US EPA RECORDS CENTER REGION 5
460640

0375976

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AG
DIVISION OF LAND POLLUTION CO
2200 CHURCHILL ROAD, SPRINGFIELD, ILLI
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997149

ILD048955959

0910550008 G

MILES LABORATORIES (Company Name) | 195 W. BIRCH ST. (Address)

KANKAKEE (City) | IL (State) | 60901 (Zip)

Generator Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL (Hauler Name) | 1360 E. LOCUST (Hauler Address)

S.W.H. Registration Number 0066012

ILD054155080

Hauler Name | Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | COLFAX AVE. & C & O R.R. (Address)

91808902 Site Number

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

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE 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:
	3. 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 / 2 CU. YDS.) (Circle One) 1

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/22/81 Jenora Barber 4004 (Authorized Signature)

WASTE HAULER

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

(1) Gary Kid (Authorized Signature) DATE: 6/22/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ✓

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

(Authorized Signature) DATE: 6/22/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO #7 STILL 6/22/81 T-63 gpm

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

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

SITE COPY - PART 3

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

0375977

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997149

MILES LABORATORIES (Company Name) | 195 W. BIRCH ST. (Address)
KANKAKEE (City) | IL (State) | 60901 (Zip)
ILD048955959
0910550008 G (Generator Number)

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL (Hauler Name) | 1360 E. LOCUST (Hauler Address)
S.W.H. Registration Number 0066011
ILD054155080

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | COLFAX AVE. & C & O R.R. (Address)
Site Number 91808902
GRIFFITH (City) | IN (State) | 46319 (Zip)
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES
WASTE 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 40,420 (LBS / TONS (circle one))

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 005000
1 GALLONS (Circle One) 2 CU. YDS. 1

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE 6/29/81 Jenora Barber (Authorized Signature) 11807

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) Richard Miller (Authorized Signature) DATE 06 29 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

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

(Authorized Signature) DATE: / /

COMMENTS OR SPECIAL INSTRUCTIONS: TO #7 SOIL T-63 6/29/81 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

000964

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0375978
1 7

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997149 (8–13)

MILES LABORATORIES (Company Name) | 195 W. BIRCH ST. (Address)
KANKAKEE (City) | IL (State) | 60901 (Zip)

ILD048955959
091055000 8 G
14 Generator Number 24

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL (Hauler Name) | 1360 E. LOCUST (Hauler Address)
S.W.H. Registration Number 006601 (25–31)

ILD054155080

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

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | COLFAX AVE. & C & O R.R. (Address)
Site Number 91808902 (39–46)
GRIFFITH (City) | IN (State) | 46319 (Zip)
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES
WASTE 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 39,230 (LBS / TONS (circle one))

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 005000 (47–52)
(1 GALLONS (Circle One) / 2 CU. YDS.) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/6/81 Jenora Barber (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) Richard Miller (Authorized Signature) DATE: 07 06 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: 7 16 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO #7 STILL T-63 7/16/81 JM

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

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

SITE COPY - PART 3

000965

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

0468798 (1–7)

Authorization Number 997149 (8–13)

MILES LABORATORIES	195 W. BIRCH ST.	8159378270	0910550008 G
(Company Name)	Address	Phone Number	(14) Generator Number (24)
KANKAKEE	IL	60901	ILD048955959
City	State	Zip	EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST	S.W.H. Registration Number 0066012 (25–31)
Hauler Name	Hauler Address	
8159332931	ILD054155080	
Phone Number	EPA Number	
		S.W.H. Registration Number (32–38)
Hauler Name	Hauler Address	
Phone Number	EPA Number	

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C & O R.R.	91808902 (39–46)
(Facility Name)	Address	Site Number
GRIFFITH	IN	46319
City	State	Zip

2199244370 INDO16360265
Phone Number EPA Number

		(39–46)
Alternate (Facility Name)	Address	Site Number
City	State	Zip

Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE 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:	UN1090	U002
WASTE ACETONE	FLAMMABLE LIQUID	UN or NA Number	EPA HW Number

WEIGHT FOR D.O.T. USE 24,300 (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 Jenora Barbee (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) John Markis (Authorized Signature) DATE: 7/15/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO ✓

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

_____ (Authorized Signature) DATE: 7/15/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO #7 STILL 7/15/81 T-63 JM

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 3

SITE COPY - PART 3

000966

STATE OF ILLINOIS

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

0468799

Authorization Number 997149

TO BE COMPLETED BY WASTE GENERATOR

MILES LABORATORIES	195 W. BIRCH ST.	8159378270	0910550008 G
(Company Name)	Address	Phone Number	Generator Number
KANKAKEE	IL	60901	ILD048955959
City	State	Zip	EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST	S.W.H. Registration Number 0066012
Hauler Name	Hauler Address	
	8159332931	ILD054155080
	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	COLFAX AVE. & C & O R.R.	91808902
(Facility Name)	Address	Site Number
GRIFFITH	IN	46319 2199244370 IND016360265
City	State	Zip Phone Number EPA Number
Alternate (Facility Name)	Address	Site Number
City	State	Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE 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 ACETONE	FLAMMABLE LIQUID	UN1090 (UN or NA Number)	U002 (EPA HW Number)

WEIGHT FOR D.O.T. USE 37,720 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52) (1) GALLONS (Circle One) (2) CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Jenora Barker (Authorized Signature) DATE 8/3/81

WASTE HAULER

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

(1) Richard Miller (Authorized Signature) DATE 08/03/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

_____ (Authorized Signature) DATE 8/3/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS TO 110R T-63 8/3/81 gpm

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

000967

STATE OF ILLINOIS

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

0468800

Authorization Number 997149

TO BE COMPLETED BY WASTE GENERATOR

MILES LABORATORIES (Company Name) | 195 W. BIRCH ST. (Address) | 8159378270 (Phone Number) | 0910550008 G (Generator Number)

KANKAKEE (City) | IL (State) | 60901 (Zip) | ILD048955959 (EPA Number)

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL (Hauler Name) | 1360 E. LOCUST (Hauler Address) | S.W.H. Registration Number 0066012

8159332931 (Phone Number) | ILD054155080 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | COLFAX AVE. & C & O R.R. (Address) | 91808902 (Site Number)

GRIFFITH (City) | IN (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE 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 ACETONE | HAZARD CLASS: FLAMMABLE LIQUID | UN1090 (UN or NA Number) | U002 (EPA HW Number)

WEIGHT FOR D.O.T. USE 37,740 LBS / ____ TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 00500.0 (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 Jenora Barber (Authorized Signature) DATE: 8/10/81

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) Don Engelman (Authorized Signature) DATE: 08/10/81

(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: 8/10/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO #7 STILL T-63 8/10/81 JM

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. 3

SITE COPY - PART 3

000968

STATE OF ILLINOIS

No. _____ Date 8-27-81

66040 Gross

29,590 Tare

36,450 Net

GENERAL FOODS CORPORATION
Kankakee, Illinois

From Miles Lab.

Trucker KID INC.

Contents Spent Acetone To Bin _____

Weigher _____

706

0468803

Authorization Number 997149

270 0910550008 G
Generator Number

ILD048955959
EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL | 1360 E. LOCUST | S.W.H. Registration Number 0066012
Hauler Name | Hauler Address

8159332931 | ILD054155080
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 | COLFAX AVE. & C & O R.R. | 91808902
(Facility Name) | Address | Site Number

GRIFFITH | IN | 46319 | 2199244370 | IND016360265
City | State | Zip | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE 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 ACETONE	FLAMMABLE LIQUID	UN1090	U002

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 Jenora Barber (Authorized Signature) DATE: 8/27/81

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) Yours Kadow (Authorized Signature) DATE: 8/27/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

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

_____ (Authorized Signature) DATE 8/27/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO #1 STILL T-63 8/22/81 JDA

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

000969

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

0468802 (1–7)

Authorization Number 997149 (8–13)

MILES LABORATORIES	195 W. BIRCH ST.	8159378270	0910550008 G
(Company Name)	Address	Phone Number	14 Generator Number 24
KANKAKEE	IL	60901	ILD048955959
City	State	Zip	EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST	S.W.H. Registration Number 0066012 (25–31)
Hauler Name	Hauler Address	
	8159332931 Phone Number	ILD054155080 EPA Number
		S.W.H. Registration Number (32–38)
Hauler Name	Hauler Address	
	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C & O R.R.	91808902 (39–46)
(Facility Name)	Address	Site Number
GRIFFITH	IN	46319 2199244370 IND016360265
City	State	Zip Phone Number EPA Number
Alternate (Facility Name)	Address	(39–46) Site Number
City	State	Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE 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 ACETONE	FLAMMABLE LIQUID	UN1090 (UN or NA Number)	U002 (EPA HW Number)

WEIGHT FOR D.O.T. USE 41,600 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52) 1 GALLONS 2 CU. YDS. (Circle One) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Jenora Barber VP (Authorized Signature) DATE: 8/25/81

WASTE HAULER

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

(1) John Ulwelling (Authorized Signature) DATE: 8/25/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

(Authorized Signature) DATE: 8/25/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO # 7 STILL T-63 8/25/81 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

000970

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

0468805 (1–7)

Authorization Number 997149 (8–13)

MILES LABORATORIES	195 W. BIRCH ST.	8159378270	0910550008 G
(Company Name)	Address	Phone Number	14 Generator Number 24
KANKAKEE	IL 60901		ILD048955959
City	State Zip		EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST	S.W.H. Registration Number 0066012 (25–31)
Hauler Name	Hauler Address	
	8159332931	ILD054155080
	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	COLFAX AVE. & C & O R.R.	91808902 (39–46)
(Facility Name)	Address	Site Number
GRIFFITH	IN 46319	2199244370 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: ACETONE & CONTAMINATES WASTE 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:	UN1090	U002
		UN or NA Number	EPA HW Number

WEIGHT FOR D.O.T. USE 11,600 LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52) 1 GALLONS / 2 CU. YDS. (Circle One) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Jenora Barber (Authorized Signature) DATE: 9/1/81

ER 11/11/ I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

...ized Signature) DATE: 9/1/81 (54–59)

...ature) DATE: __/__/__

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

...E AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: DATE: 9/1/81 (60–65)

STILL T-63 9/1/81 gpm.

...NCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

4 HAULER PART - 5 IEPA PART 6 - GENERATOR

000971

STATE OF ILLINOIS

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

0468807 (1–7)

Authorization Number 997149 (8–13)

MILES LABORATORIES	195 W. BIRCH ST.	8159378270	0910550008 G
(Company Name)	Address	Phone Number	(14) Generator Number (24)
KANKAKEE	IL	60901	ILD048955959
City	State	Zip	EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST		S.W.H. Registration Number 0066012 (25–31)
Hauler Name	Hauler Address	8159332931 Phone Number	ILD054155080 EPA Number
			S.W.H. Registration Number (32–38)
Hauler Name	Hauler Address	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C & O R.R.		91808902 (39–46)
(Facility Name)	Address		Site Number
GRIFFITH	IN	46319 2199244370	IND016360265
City	State	Zip Phone Number	EPA Number
			(39–46)
Alternate (Facility Name)	Address		Site Number
City	State	Zip Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE 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:	UN1090	U002
WASTE ACETONE	FLAMMABLE LIQUID	UN or NA Number	EPA HW Number

WEIGHT FOR D.O.T. USE 37,810 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52) (1 GALLONS) 2 CU YDS. (circle One) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Jessica Barber (Authorized Signature) DATE 9/21/81

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) Richard Miller (Authorized Signature) DATE 09/21/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

(Authorized Signature) DATE 9 21 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO #7 STILL 9/22/81 T-63 Jcm

IN ILLINOIS: 217 / 782-3637 *24 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

000972

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

0468811 (1–7)

Authorization Number 997149 (8–13)

MILES LABORATORIES (Company Name) | 195 W. BIRCH ST. (Address) | 8159378270 (Phone Number) | 0910550008 G (14 Generator Number 24)

KANKAKEE (City) | IL (State) | 60901 (Zip) | ILD048955959 (EPA Number)

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL (Hauler Name) | 1360 E. LOCUST (Hauler Address) | S.W.H. Registration Number 0066012 (25–31)

8159332931 (Phone Number) | ILD054155080 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | COLFAX AVE. & C & O R.R. (Address) | 91808902 (39 Site Number 46)

GRIFFITH (City) | IN (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | 39 Site Number 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES | WASTE 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 ACETONE	FLAMMABLE LIQUID	UN1090	U002

WEIGHT FOR D.O.T. USE 38,590 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52) (1 GALLONS (Circle One) 2 CU. YDS.) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Jenora Barber (Authorized Signature) DATE: 10/19/81

WASTE HAULER

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

(1) Richard Miller (Authorized Signature) DATE: 10/19/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

(Authorized Signature) DATE 10/19/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO # 7 STILL 10/19/81 T-63 JM

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 3

SITE COPY - PART 3

000973

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

0468809 (1–7)

Authorization Number 997149 (8–13)

MILES LABORATORIES	195 W. BIRCH ST.	8159378270	09105500008 G
(Company Name)	Address	Phone Number	14 Generator Number 24
KANKAKEE	IL 60901		ILD048955959
City	State Zip		EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST	S.W.H. Registration Number 0006612 (25–31)
Hauler Name	Hauler Address	
	8159332931	ILD054155080
	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	COLFAX AVE. & C & O R.R.	91808902 (39–46)
(Facility Name)	Address	Site Number
GRIFFITH	IN	46319 2199244370 IND016360265
City	State	Zip Phone Number EPA Number
Alternate (Facility Name)	Address	(39–46) Site Number
City	State Zip	Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE 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:	UN1090	U002
WASTE ACETONE	FLAMMABLE LIQUID	UN or NA Number	EPA HW Number

WEIGHT FOR D.O.T. USE 41,590 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52) (1) GALLONS (Circle One) (2) CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Jenora Barber (Authorized Signature) DATE 10/5/81

WASTE HAULER

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

(1) John Mosko (Authorized Signature) DATE 10/5/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

_____ (Authorized Signature) DATE 10/5/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS TO #7 STILL 10/5/81 T-63 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

000974

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

0468808 (1–7)

Authorization Number 997149 (8–13)

MILES LABORATORIES	195 W. BIRCH ST.	8159378270	0910550008 G
(Company Name)	Address	Phone Number	(14) Generator Number (24)
KANKAKEE	IL	60901	ILD048955959
City	State	Zip	EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST		S.W.H. Registration Number 0066012 (25–31)
Hauler Name	Hauler Address	8159332931 Phone Number	ILD054155080 EPA Number
			S.W.H. Registration Number (32–38)
Hauler Name	Hauler Address	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C & O R.R.		91808902 (39–46)
(Facility Name)	Address		Site Number
GRIFFITH	IN	46319	2199244370 ILD016360265
City	State	Zip	Phone Number EPA Number
Alternate (Facility Name)	Address		(39–46) Site Number
City	State	Zip	Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE 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:	UN1090	U002
WASTE ACETONE	FLAMMABLE LIQUID	UN or NA Number	EPA HW Number

WEIGHT FOR D.O.T. USE 41,380 LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52) (1 GALLONS / 2 CU. YDS. — Circle One) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Jenora Barber (Authorized Signature) DATE: 9/29/81

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) John L. Morgan (Authorized Signature) DATE: 9 29 81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

_____ (Authorized Signature) DATE: 9-29-81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO # 7 STILL T-63 9/29/81 JRM.

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

000975

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

0468810 (1–7)

Authorization Number 997149 (8–13)

MILES LABORATORIES	195 W. BIRCH ST.	8159378270	0910550008 G
(Company Name)	Address	Phone Number	(14) Generator Number (24)

KANKAKEE	IL	60901	ILD048955959
City	State	Zip	EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST	S.W.H. Registration Number 0066012 (25–31)
Hauler Name	Hauler Address	

8159332931	ILD054155080
Phone Number	EPA Number

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

Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C & O R.R.	91808902 (39–46)
(Facility Name)	Address	Site Number

GRIFFITH	IN	46319	2199244370	IND016360265
City	State	Zip	Phone Number	EPA Number

		(39–46)
Alternate (Facility Name)	Address	Site Number

City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE 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 ACETONE	FLAMMABLE LIQUID	UN1090 (UN or NA Number)	U002 (EPA HW Number)

WEIGHT FOR D.O.T. USE 4/4600 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52) (1 GALLONS / 2 CU. YDS. Circle One) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 10/12/81

WASTE HAULER

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

(1) John D. Griffin (Authorized Signature) DATE: 10/12 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 QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 10/12/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO #7 STALL T-63 10/12/81 gpm

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

000976

STATE OF ILLINOIS

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

0468815

Authorization Number 997149

TO BE COMPLETED BY WASTE GENERATOR

(Company Name)	Address	Phone Number	Generator Number
MILES LABORATORIES	195 W. BIRCH ST.	8159378270	0910550008

City	State	Zip	EPA Number
KANKAKEE	IL	60901	ILD048955959

WASTE HAULER(S)

Hauler Name	Hauler Address	Phone Number	EPA Number	S.W.H. Registration Number
KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST	8159332931	ILD054155080	006601

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C & O R.R.	91808902

City	State	Zip	Phone Number	EPA Number
GRIFFITH	IN	46319	2199244370	IND016360265

Alternate (Facility Name)	Address	Site Number

City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE 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 ACETONE	FLAMMABLE LIQUID	UN1090	U002

WEIGHT FOR D.O.T. USE 39,490 (LBS / TONS circle one)

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

QUANTITY OF WASTE DELIVERED: 1050000 (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 Jenora Barber (Authorized Signature) DATE 11/2/81

WASTE HAULER

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

(1) Richard Miller (Authorized Signature) DATE 11/2/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

(Authorized Signature) DATE: 11-2-81

COMMENTS OR SPECIAL INSTRUCTIONS To 110R T-63 GKM 11/2/81

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

000977

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

0468813 (1–7)

Authorization Number 997149 (8–13)

MILES LABORATORIES	195 W. BIRCH ST.	8159378270	09105500008 G
(Company Name)	Address	Phone Number	(14) Generator Number (24)
KANKAKEE	IL	60901	ILD048955959
City	State	Zip	EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST	S.W.H. Registration Number 006601 (25–31)
Hauler Name	Hauler Address	
	8159332931	ILD054155080
	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	COLFAX AVE. & C & O R.R.	91808902 (39–46)
(Facility Name)	Address	Site Number
GRIFFITH	IN	46319 2199244370 INDO16360265
City	State	Zip Phone Number EPA Number
Alternate (Facility Name)	Address	(39–46) Site Number
City	State	Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE 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 ACETONE	FLAMMABLE LIQUID	UN1090 (UN or NA Number)	U002 (EPA HW Number)

WEIGHT FOR D.O.T. USE 39,100 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52) (1) GALLONS (2) CU. YDS. (Circle One) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Jenora Barber (Authorized Signature) DATE: 11/9/81

WASTE HAULER

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

(1) Don Engelman (Authorized Signature) DATE: 11/09/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

J Hendee (Authorized Signature) DATE: 11/9/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 3

SITE COPY - PART 3 To #7 still T-63 GRM 11/9/81

000978

STATE OF ILLINOIS

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

0468812

Authorization Number 997149

TO BE COMPLETED BY WASTE GENERATOR

MILES LABORATORIES	195 W. BIRCH ST.	8159378270	09105500008 G
(Company Name)	Address	Phone Number	Generator Number
KANKAKEE	IL	60901	ILD048955959
City	State	Zip	EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST		S.W.H. Registration Number 0066012
Hauler Name	Hauler Address		
		8159332931	ILD054155080
		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 SERVICE	COLFAX AVE. & C & O R.R.		91808902
(Facility Name)	Address		Site Number
GRIFFITH	IN	46319 2199244370	IND016360265
City	State	Zip Phone Number	EPA Number
Alternate (Facility Name)	Address		Site Number
City	State	Zip Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE 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.	UN1090	U002
WASTE ACETONE	FLAMMABLE LIQUID	UN or NA Number	EPA HW Number

WEIGHT FOR D.O.T. USE 40,890 (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 Jenora Durbin (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) Richard Miller (Authorized Signature) DATE: 11/30/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

_____ (Authorized Signature) DATE: 11/30/81

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 # 7 T-63 GRM 11/30/81

000979

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

0468817

Authorization Number 997149

MILES LABORATORIES (Company Name) | 195 W. BIRCH ST. (Address) | 8159378270 (Phone Number) | 0910550008 G (Generator Number)

KANKAKEE (City) | IL (State) | 60901 (Zip) | ILD048955959 (EPA Number)

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL (Hauler Name) | 1360 E. LOCUST (Hauler Address) | S.W.H. Registration Number 0066012

8159332931 (Phone Number) | ILD054155080 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | COLFAX AVE. & C & O R.R. (Address) | 91808902 (Site Number)

GRIFFITH (City) | IN (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE 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 ACETONE	FLAMMABLE LIQUID	UN1090	U002

WEIGHT FOR D.O.T. USE 4,400 LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (1 GALLONS) (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 Honora Barber (Authorized Signature) DATE: 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) _____ (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

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 #7 Still T-63 GRM 12/15/81

000980

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

0435651

Authorization Number 997714

MID-WEST SPRING MFG.CO. (Company Name) | 8 GREENWOOD AVE (Address) | 8158387812 (Phone Number) | 0316000443 G (Generator Number)

ROMEOVILLE (City) | IL (State) | 60441 (Zip) | ILD005093257 (EPA Number)

WASTE HAULER(S)

American Chemical (Hauler Name) | 420 S. Colfax (Hauler Address) | S.W.H. Registration Number 0024002 | ILT000646810 (EPA Number)

Phone Number

STRAND TRUCKING (Hauler Name) | 137 S. KENTON (Hauler Address) | CRESTWOOD, IL | S.W.H. Registration Number | Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | IND (State) | Zip | 2197683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
ORGANIC SOLVENT	TRICHLOR NON-FLAMABLE	1710	F001

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 001050 (GALLONS) (Circle One) 2 CU YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 21 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) SEMI-TRAILER

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 8-3-81

WASTE HAULER

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

(1) James Batten (Authorized Signature) DATE: 8/3/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

_____ (Authorized Signature) DATE: 8/31/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 8/3/81 TO 122E T-63 10/22/81 JPM

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

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

REV. # 3

SITE COPY - PART 3

000981

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

0435657 (1–7)

Authorization Number 997665 (8–13)

Midwest Sintered Prod (Company Name) | 13605 S. Halsted (Address) | 3178495240 (Phone Number) | 0 31258 0004 G (14–24 Generator Number)

Riverdale (City) | IL (State) | 60627 (Zip) | ILD 005234141 (EPA Number)

WASTE HAULER(S)

STRAND Trucking (Hauler Name) | Crestwood IL (Hauler Address) | S.W.H Registration Number 0024901 (25–31)

(Phone Number) | ILT 000646810 (EPA Number)

AMERICAN CHEMICAL (Hauler Name) | GRIFFITH IND (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | Po Box 190 (Address) | 91808902 (39–46 Site Number)

GRIFFITH (City) | IND (State) | 46319 (Zip) | 219 924 4370 (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: TRICHLORETHYLENE/OIL | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: TRICHLORETHYLENE/OIL | HAZARD CLASS: | UN or NA Number | F001 EPA HW Number

WEIGHT FOR D.O.T. USE: 9,900 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 000825 (47–52) (1 GALLONS 2 CU. YDS. (Circle One)) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 15 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) JAN

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION: F. R. Boeckmann (Authorized Signature) | DATE: 7/6/81 (ED)

WASTE HAULER

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

(1) Jim Batt (Authorized Signature) | DATE: 7/6/81 (54–59)

(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.

M. Clark Rudy (Authorized Signature) | DATE: 7/6/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 7/6/81 TO # 2 STILL T-637 7/6/81 gm

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

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

REV. # 3

SITE COPY - PART 3

000982

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

0370796
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991283 (8–13)

MIDWEST FILM COMP 2120 W 49TH ST FED. I.D. ILD054322474
(Company Name) Address

CHICAGO ILL. 60609
City State Zip

0316000203 G
14 Generator Number 24

WASTE HAULER(S)

MR. FRANK INC, 201 W 155TH ST. S.W.H. Registration Number 0079027 (25–31)
Hauler Name Hauler Address

SO. HOLLAND FED. ID. ILD069506160
Hauler Name Hauler Address S.W.H. Registration Number (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SER. 420 S. COLFAX AVE. 91808902 (39–46)
(Facility Name) Address Site Number

GRIFFITH IN. 46319 FED. ID. IND016360265 ~~FED. I.D. ILD069506160~~
City State Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK SOLVENT WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: FLAMMABLE 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: 2500 (47–52)

(1) GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-2-81 T903 [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: 3/2/81 (54–59)

(2) _____ (Authorized Signature) DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO ✓

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

BOB MANCK (Authorized Signature) DATE: 03/02/81 (60–65)

SPECIAL INSTRUCTIONS: TO IA 3/2/81 T-63 Jim Murphy

2-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

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

SITE COPY - PART 3

000983

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0367777 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997104 (43)

MIDLAND DIV DEXTER 47 E WATER ST (Company Name / Address) — FED ID NO 004531927

WAUKEGAN (City) — IL (State) — 60085 (Zip) — 312-623-4200

0971900001 G (14–24) Generator Number

WASTE HAULER(S)

MR FRANK (Hauler Name) — 201 W 155TH ST. SOUTH HOLLAND, IL (Hauler Address) — S.W.H. Registration Number 0079023 (25–31)

Hauler Name — Hauler Address — FED ID NO 069506160 — S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) — 420 Colfax (Address) — 91808902 (39–46) Site Number

GRIFFITH (City) — IND (State) — (Zip) — FED ID NO 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT — WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT — HAZARD CLASS: FLAMMABLE LIQUID — WEIGHT FOR D.O.T. USE 34500 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 004700 (47–52) — 1 GALLONS 2 CU. YDS. (Circle One) — 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-681 K-078 — Ronald T Kytasaari (Authorized Signature)

WASTE HAULER

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

(1) [signature] (Authorized Signature) — DATE: 01 06 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:

BOB MAUCK (Authorized Signature) — DATE: 01 06 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 204R T-50 1/6/81 Jim Mungal 0 1 0 f

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

000984

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

0367785

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991104

MIDLAND DW DEXTER (Company Name) | 1-7 E WATER (Address) | ILD 004531927

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 0971900001 G (Generator Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 15 South HOLLAND ILL (Hauler Address) | S.W.H. Registration Number 0079019

ILD 069506160

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

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | IND (State) | (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT

HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE: 35,400 (LBS / TONS (circle one))

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

QUANTITY OF WASTE DELIVERED: 004500

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-9-81 K078 (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 O Morton (Authorized Signature) DATE: 01/09/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

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

(Authorized Signature) DATE: 01/09/81

COMMENTS OR SPECIAL INSTRUCTIONS: PUMPED TO EAST AGIT 1/9/81 T-50 Jim Murphy

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

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

SITE COPY - PART 3

000985

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

0367780

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991104

MIDLAND DIV DEXTER (Company Name) | 1-7 EAST WATER (Address) | ILD 004581927

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312 623-4200

Generator Number 097190000 1 G

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155 South Holland ILL (Hauler Address) | S.W.H. Registration Number 0079019

ILD. 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | IND (State) | (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT

HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 34,500 LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 004000

1 GALLONS (Circle One) / 2 CU. YDS. 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. AND EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-15-81 K078 (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: 01/15/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

_____ (Authorized Signature) DATE: 1/15/81

COMMENTS OR SPECIAL INSTRUCTIONS: Pumped to 204K 1/15/81 T-50 Jim Murphy

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

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

SITE COPY - PART 3

000986

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

0367781 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991104 (8–13)

MIDLAND D.U DEXTER (Company Name) | 1-7 EAST WATER (Address) | ILD 004531927

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312 623 4200 | 09 71 900001 G (Generator Number, 14–24)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 153 South Holland ILL (Hauler Address) | S.W.H. Registration Number DD74023 (25–31) | ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918089D2 (Site Number, 39–46)

GRIFFITH (City) | IND (State) | (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

FED CODE K-078

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

SHIPPING DESCRIPTION: WASTE SOLVENTS NOS | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 36,350 (LBS / TONS (circle one))

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. | 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-16-81 K078 (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: 01 16 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: 1 16 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 125R 1/16/81 Jim Murphy T-63

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

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

SITE COPY - PART 3

000987

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

0367784

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991104

MIDLAND DIV DEXTER (Company Name) | 1-7 EAST WATER (Address) | ILD 004531927 (8)
WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 0 9 7 1 9 D D D 0 1 G (Generator Number 14–24) | 312 623 4200

MR FRANK (Hauler Name) | 201 155th SOUTH HOLLAND ILL (Hauler Address) | S.W.H. Registration Number D 2 7 9 0 2 3 (25–31)
ILD D69506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER CAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 9 1 8 0 8 9 0 2 (Site Number 39–46)
GRIFFITH (City) | IND (State) | (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)
K.078

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

SHIPPING DESCRIPTION: WASTE SOLVENT, NOS | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 35,650 LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 025000 (47–52) | 1 GALLONS 2 CU. YDS. (Circle One) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-19-81 | (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: 01/19/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

(Authorized Signature) | DATE: 01/19/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:
TO 124K 1/19/81 T-63 Jim Murphy

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

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

SITE COPY - PART 3

000988

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0367782

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997104

MIDLAND DIV DEXTER | 1-7 EAST WATER | ILD 004531427
(Company Name) | Address

WAUKEGAN | ILL | 60085 | 0971900001 G
City | State | Zip | Generator Number

312 623 4200

WASTE HAULER(S)

MR FRANK | 200 W 154th HOLLAND ILL | S.W.H. Registration Number 0079023
Hauler Name | Hauler Address

ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL | H20 COLFAX | 91808902
(Facility Name) | Address | Site Number

GRIFFITH | IND | | IND 016360265
City | State | Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT

HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 36,500 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. X8.78

QUANTITY OF WASTE DELIVERED: 025000

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. IND EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-20-81

(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: 01/20/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

(Authorized Signature) DATE: 01/20/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT R 1/20/81 T-50 Jim Murphy

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

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

SITE COPY - PART 3

000989

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

0334057 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104 (8–13)

MIDLAND DU DEXTER (Company Name) | 1-7 E WATER ST (Address) | ILD 00453192 (8)

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312 623 4200

09719000 01 G (14–24 Generator Number)

MR FRANK (Hauler Name) | 201 SOUTH HOLLAND ILL (Hauler Address) WASTE HAULER(S)

S.W.H. Registration Number D079018 (25–31)

ILD 069506160

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

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 91808902 (39–46 Site Number)

GRIFFITH (City) | IND (State) | Zip | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT K-078

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
WASTE SOLVENTS, NOS	FLAMMABLE LIQUID	36,700 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 05000 (47–52)

1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE 2-6-81 (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: 02 06 81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 2 6 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 124TK 2/6/81 T-63 Jim Murphy

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

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

SITE COPY - PART 3

000990

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

0334050

SPECIAL WASTE HAULING MANIFEST

Authorization Number 99704

MIDLAND DIV DEXTER (Company Name) | 17 E WATER ST (Address) | ILD 004531927

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312 623-4200 | 09719DD001 G (Generator Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 N. 155th South Holl (Hauler Address) | S.W.H. Registration Number D079018 | ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918089D2 (Site Number)

GRIFFITH (City) | IND (State) | Zip | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT

HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 35,650 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 02500

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. AND EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2-3-81 K078 (Authorized Signature)

WASTE HAULER

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

(1) Robert Perkins (Authorized Signature) DATE 02/03/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

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

(Authorized Signature) DATE: 2/4/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT IL 2/4/81 T-50 Jim Murphy

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

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

SITE COPY - PART 3

000991

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

0334043 (1–7)

Authorization Number 991104 (13)

MIDLAND DIVDEXTER (Company Name) | 1-7 EAST WATER (Address) | ILD 004531927
WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312 623 4200
D9719 00001 G (14 Generator Number 24)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 N 155th South Holland IND (Hauler Address) | S.W.H. Registration Number D07918 (25–31)
ILD 069506160

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

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918089D2 (39–46 Site Number)
GRIFFITH (City) | IND (State) | Zip | IND 0163602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 36,550 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 4005 | QUANTITY OF WASTE DELIVERED: D05000 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. | 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-28-81 | (Authorized Signature)

WASTE HAULER

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

(1) Michael D. Mentor (Authorized Signature) | DATE: 01/28/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

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

Bob Mauck (Authorized Signature) | DATE: 01/28/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT R 1/28/81 T-50 Jim Mayf

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

000992

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

TO BE COMPLETED BY WASTE GENERATOR

0334045 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number (8–13): 997104

Midland Dixie (Company Name) | I-7 E Water (Address) | ILD 004531927
Waukegan (City) | ILL (State) | 60085 (Zip) | 312 623 4200
09719000016 (Generator Number 14–24)

WASTE HAULER(S)

Mr. Frank (Hauler Name) | 201 W 155th South Holland ILL (Hauler Address) | S.W.H. Registration Number (25–31): 0079018
ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 Colfax (Address) | 91808902 (Site Number 39–46)
Griffith (City) | IND (State) | Zip | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Waste Paint | HAZARD CLASS: Flammable Liquid | WEIGHT FOR D.O.T. USE: 35,450 (LBS / TONS circle one)

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

QUANTITY OF WASTE DELIVERED (47–52): 005000 | (1 GALLONS / 2 CU. YDS. Circle One) (53): 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. AND E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2-26-81 | (Authorized Signature) F005

WASTE HAULER

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

(1) (Authorized Signature) | DATE (54–59): 02 26 81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

(Authorized Signature) | DATE (60–65): 02 26 81

COMMENTS OR SPECIAL INSTRUCTIONS: To East Gate 2/26/81 T-50 Jim Murphy

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

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

SITE COPY - PART 3

000993

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

0345905 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number (8–13): 997104

MIDLAND DIV DEFFER I-7 E WATER ST — ILD 004531927
(Company Name) — Address

WAUCEGAN — ILLINOIS — 60085 — 0971900001 G
City — State — Zip — Generator Number (14–24)

312-623-4200

WASTE HAULER(S)

MR FRANK — 201 W 155TH SOUTH HOLLAND, IL — S.W.H. Registration Number 0079023 (25–31)
Hauler Name — Hauler Address

ILD 069 506 160
S.W.H. Registration Number (32–38)
Hauler Name — Hauler Address

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical — 420 Colfax — 91808902 (39–46)
(Facility Name) — Address — Site Number

Griffith — INDIANA — IND 016360265
City — State — Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT — WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT — HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 36000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 18 T

QUANTITY OF WASTE DELIVERED: 004500 (47–52)

(1) GALLONS (Circle One) (2) CU. YDS. — 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION AND E.P.A.

DATE: March 4, 1981 — (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 04 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: 03 04 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST ACUTE – 3600 T-50 3/4/81
TO EAST ACUTE – 1400 T-50

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

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

SITE COPY - PART 3

000994

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

0334046 (1–7)

Authorization Number 99104 (8–13)

MIDLAND DIV DEXTER (Company Name) | 1-7 EAST WATER ST (Address) | ILD 004531427

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312 623 4200

09719DDDDL G (14 Generator Number 24)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 N 155TH South Holland ILL (Hauler Address) | S.W.H. Registration Number DD79018 (25–31)

ILD 069506160

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

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918089D2 (39 Site Number 46)

GRIFFITH (City) | IND (State) | Zip | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 34,400 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 004600 (47–52)

1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-6-81 0905 (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 06 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: 03 06 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST PIT # T-50 3/6/81 Jim Murphy

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

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

SITE COPY - PART 3

000995

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

0334047 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104 (8–13)

MIDLAND DIV DEXTER (Company Name) | 1-7 E. WATER ST (Address) | ILD 004531927
WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312 623 4200
D 971900001 L (14–24) Generator Number

MR FRANK (Hauler Name) | 201 N 155 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

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918 08902 (39–46) Site Number
GRIFFITH (City) | IND (State) | (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

F-003

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

SHIPPING DESCRIPTION: WASTE PAINT | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 36,650 (LBS / TONS (circle one))

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 95000 (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. AND E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/2/81 | (Authorized Signature)

WASTE HAULER

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

(1) (Authorized Signature) | DATE: 04 02 81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO /

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

(Authorized Signature) | DATE: 4 12 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 207E T-50 4/2/81 gpm

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

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

SITE COPY - PART 3

000996

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0334048 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997104 (8–13)

MIDLAND DIV DEXTER (Company Name) | 1-7 E. WATER ST (Address) | ILD 004531427

WAUKEGAN (City) | ILL (State) | (Zip) | 312 623 4200

D971900001 G (14–24) Generator Number

MR FRANK (Hauler Name) | 201 155th (WASTE HAULER(S)) SOUTH HOLLAND ILL (Hauler Address) | S.W.H. Registration Number DD79023 (25–31)

ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 CALUMET AVE (Address) | 9180902 (39–46) Site Number

GRIFFITH (City) | IND (State) | (Zip) | IND 016362265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT K-078

WASTE 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, NOS | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 35,450 (LBS / TONS (circle one))

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

QUANTITY OF WASTE DELIVERED: 005 000 (47–52) | (1 GALLONS / 2 CU. YDS. (Circle One)) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/1/81 | (Authorized Signature)

WASTE HAULER

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

(1) (Authorized Signature) DATE: 04/01/81 (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: 04/01/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125E T-63 4/1/81 JRM

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

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

SITE COPY - PART 3

000997

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

0334051 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104 (8–13)

MIDLAND DIV DEXTER (Company Name) | 1-7 E WATER (Address) | ILD 004531927

WAUKEGAN (City) | ILL (State) | 60085 (Zip) 312 623 4200

0971900001 G (Generator Number, 14–24)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th SOUTH HOLLAND ILL (Hauler Address) | S.W.H. Registration Number D079018 (25–31)

ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 91808902 (Site Number, 39–46)

GRIFFITH (City) | IND (State) | (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 36500 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 05000 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. | 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/31/81 | (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 31 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: 03 31 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT K T-50 3/31/81 JTM

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

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

SITE COPY - PART 3

000998

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

0389308

Authorization Number 997104

MIDLAND BRADFORD (Company Name) 1-7 E WATER ST (Address) ILD 004531927
WAUKEGAN (City) ILL (State) (Zip) 312-623-4200
D971900001 (Generator Number)

WASTE HAULER(S)

M & F FRANK (Hauler Name) 201 N 155 SOUTH HOLLAND ILL (Hauler Address) S.W.H. Registration Number 0079009
ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) 420 COLFAX (Address) 918089012 (Site Number)
GRIFFITH (City) IND (State) (Zip) IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT 905 WASTE 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 HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE: 34,500 (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. 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. AND EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-20-81 (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: 03/20/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

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

(Authorized Signature) DATE: 3/20/81

* INSTRUCTIONS: TO EAST ACT 3/26/81 T-50 Jim Mundy

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS OUTSIDE ILLINOIS: 800 / 424-8802

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

SITE COPY - PART 3

000999

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

0389306
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991104 (8–13)

MIDLAND DIV DEXTER (Company Name) | 1-7 E WATER ST (Address) | ILD 004531927

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312 623 4200

09719 DDDD1 G (14–24 Generator Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 N 155th SOUTH HOLLAND ILL (Hauler Address) | S.W.H. Registration Number 0079023 (25–31)

(Hauler Name) | (Hauler Address) | ILD 069506160 | S.W.H. Registration Number (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 DOLFAX (Address) | 91808902 (39–46 Site Number)

GRIFFITH (City) | IND (State) | (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT

WASTE PHASE: L. & 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 | HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 26,250 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 003 DDD (52)

1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE 3-17-81 (Authorized Signature) T805

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: 03/17/81 (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: 3/17/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST ACIT 3/17/81 T-50 Jim Murphy

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

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

SITE COPY - PART 3

001000

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

0334053 (1–7)

Authorization Number 99104 (8–13)

MIDLAND D.J. DEXTER (Company Name) | 1-7 E WATER ST (Address) | ILD 004531927

WAUKEGAN (City) | ILL (State) | (Zip) | 09719000 DL (Generator Number, 14–24)

312 623 4200

(WASTE HAULER(S))

MR FRANK (Hauler Name) | 201 155 South HOLLAND ILL (Hauler Address) | S.W.H. Registration Number D079018 (25–31)

ILD 049506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918089D2 (Site Number, 39–46)

GRIFFITH (City) | IND (State) | (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT K-078

WASTE 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 NOS | HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 34,500 (LBS / TONS (circle one))

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52)

(1 GALLONS / 2 CU. YDS.) (Circle One) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-13-81 (Authorized Signature) 1305

WASTE HAULER

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

(1) Daniel N Batt (Authorized Signature) DATE: 03/13/81 (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:

Bob Mann (Authorized Signature) DATE: 03/13/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 207R T-50 3/13/81 Jim Murphy

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

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

SITE COPY - PART 3

001001

STATE OF ILLINOIS

0345906

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 997104

MIDLAND DUPEYER (Company Name) | 1-7 E WATER ST - Address | WAUKEGAN City | IL State | 60085 Zip

ILD 004531927

0971900001 G
Generator Number

312-623-4200

WASTE HAULER(S)

MR FRANK Hauler Name | 201 W 155th Hauler Address | South Holland, IL

S.W.H. Registration Number 0079009

ILD 069506160

Hauler Name | Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 400 COLFAX Address | GRIFFITH City | INDIANA State | 46319 Zip

91808902 Site Number

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT

WASTE PHASE: LIQUID (Liquid) Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 40000 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 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. AND EPA.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-1-81 (Authorized Signature)

F-005

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: 6/1/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 6/1/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT 6/1/81 T-50 gpm

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

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

SITE COPY - PART 3

001002

STATE OF ILLINOIS

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

0345907
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 947104 8 13

DU DEXTER (Name) | I-7 & WATER Address | ILD 004531427 14

WHEATON City | ILL State | 60187 Zip | 09719 DD001 G 14 24 Generator Number

312 623-4200

WASTE HAULER(S)

MR FRANK Hauler Name | 201 15J SOUTH HOLLAND ILL Hauler Address | S.W.H. Registration Number 0079021 25 31

ILD 069506160

Hauler Name | Hauler Address | S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM (Facility Name) | 420 COLFAX Address | 918089102 39 46 Site Number

GARFIELD City | IND State | Zip | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS K 079 | WASTE 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, NOS | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 29400 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. | 6 53

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-21-81 | AMP EPA (Authorized Signature) FOOS

WASTE HAULER

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

(1) Donald R Burt (Authorized Signature) DATE: 05 21 81 54 59

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

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

(Authorized Signature) DATE: 5/22/81 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT 5/21/81 gpm T-50

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

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

SITE COPY - PART 3

001003

STATE OF ILLINOIS

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

BY
ATOR

0345908
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104

MIDLAND DU DEPT (Company Name) | 1-7 E WATER (Address) | ILO 0645316427 (Generator Number)
WAUKEGAN (City) | ILL (State) | 60085 (Zip)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 103 SOUTH HOLLAND ILL (Hauler Address) | S.W.H. Registration Number 00 1900 19
ILO 0695 0616 0

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 CALFAX (Address) | 918 08902 (Site Number)
GALEF (City) | IND (State) | (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 34200 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 004502 (47–52)

1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-22-81 | (Authorized Signature) | F005

WASTE HAULER

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

(1) Robert Perkins (Authorized Signature) DATE 05 22 81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

(Authorized Signature) DATE: 5/22/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST ACIT 5/22/81 T-50 J129

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

001004

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

0345913 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104 (8–13)

MIDLAND DIVDEXTER (Company Name) | I-7 & WATER (Address) | ILD 004531927

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312-23-4200

0971900001 G (14 Generator Number 24)

MR FRANK (Hauler Name) | 201 W 15 Mundelein ILL (Hauler Address) | WASTE HAULER(S)

S.W.H. Registration Number 0079009 (25–31)

ILD 069506160

Hauler Name | Hauler Address

S.W.H. Registration Number (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address)

9180890Z (39 Site Number 46)

GRIFFITH (City) | IND (State) | Zip

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 34,200 (LBS / TONS (circle one))

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

QUANTITY OF WASTE DELIVERED: 004500 (47–52)

(1 GALLONS / 2 CU. YDS.) (Circle One) 1 (53)

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

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

AND EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-11-81 | (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: 5/11/81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

(Authorized Signature) DATE: 5/11/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST ACIT 5/11/81 T-50 gym

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

001005

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

0389310 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991104 (8–13)

MIDLAND DEXTER (Company Name) | 1-7 E WATER (Address) | ILD 004531927 (14–24)
WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 0971900001 G (Generator Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 15TH 50th HOLLAND ILL (Hauler Address) | S.W.H. Registration Number DOT9009 (25–31)

ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918D8902 (39–46 Site Number)
GRIFFITH (City) | IND (State) | (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

F005

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
WASTE PAINT	FLAMMABLE LIQUID	36450 (LBS / TONS (circle one))

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

QUANTITY OF WASTE DELIVERED: 05000 (47–52)

(1 GALLONS / 2 CU. YDS.) (Circle One) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-4-81 | (Authorized Signature)

WASTE HAULER

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

(1) (Authorized Signature) DATE: 05/04/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ✓

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

(Authorized Signature) DATE: 5/4/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST ACRE 5/4/81 T-50 gpm

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

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

SITE COPY

001006

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

0389313 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991104 (8–13)

MIDLAND DEXTER + E WATER (Company Name) — Address — ILD 004534277

WAUKEGAN (City) — ILL (State) — 60085 (Zip) — 312 623 4200

09119 00001 G (14–24) Generator Number

WASTE HAULER(S)

MR FRANK (Hauler Name) — 201 N 13th, Hallan ILL (Hauler Address) — S.W.H. Registration Number D 079009 (25–31)

ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) — 420 COLFAX (Address) — 918 0890 2 (39–46) Site Number

GRIFFITH (City) — IND (State) — Zip — IND 063602655

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS K-078

WASTE 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, NOS — HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE: 35,250 LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52)

1 GALLONS / 2 CU. YDS. (Circle One) — 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS (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. AND EPA F005

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE 5-8-81 — (Authorized Signature)

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE: 05 08 81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

_____ (Authorized Signature) DATE: 05 12 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 142R T-63 5/8/81 9PM

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

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

SITE COPY - PART 3

001007

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 ID 0045390 0350411

Authorization Number 99104

MIDLAND DEVELOPMENT 1-7 WATER ST (Company Name / Address)
WAUKEGAN ILL 60085 (City / State / Zip)
ILO 0045342 7
04119 00001 G (Generator Number)
312 623 4200

WASTE HAULER(S)

MR FRANK 201 W 3RD SPRINGFIELD ILL (Hauler Name / Hauler Address)
S.W.H. Registration Number IL 079019

Hauler Name / Hauler Address
ILO 0695061 60
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL 420 COLFAX (Facility Name / Address)
GALESBURG IL (City / State)
918 08902 Site Number
ILO 0136026 5

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS
K-078
WASTE 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
WEIGHT FOR D.O.T. USE 3500 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 004500
1 GALLONS (Circle One) 2 CU. YDS. 1

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-15-81 (Authorized Signature)

WASTE HAULER

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

(1) (Authorized Signature) DATE: 05 15 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

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

(Authorized Signature) DATE: 5 15 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 12+X 5/15/81 T-63 JM

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

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

SITE COPY - PART 3

001008

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

0350412

SPECIAL WASTE HAULING MANIFEST

ILD045319271

Authorization Number 99104

MIDLAND DIXIE (Company Name) | I-7 & WATER (Address) | ILD045319271 (Generator Number) 1 1 4 0 0 0 0 1

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312 623 6000

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 S. 15TH (Hauler Address) SOUTH MELROSE ILL | S.W.H. Registration Number 0 0 79 0 2 1

ILD 069506160

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

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 9 1 8 0 8 9 0 2 Site Number

IND 016360265

GRIFFITH (City) | IND (State) | Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ~~WASTE PAINT~~ WASTE PAINT

WASTE PHASE: ~~LIQUID~~ (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: ~~WASTE PAINT~~ FLAMMABLE LIQUID

HAZARD CLASS: FOOL

WEIGHT FOR D.O.T. USE ~~36,320~~ 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.

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. AND EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/18/81 (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: 05/18/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ✓

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

_____ (Authorized Signature) DATE: 5/18/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT 5/18/81 T-50 JAM

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

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

SITE COPY - PART 3

001009

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

0389317 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991104 (6–13)

MIDLAND DIV DEXTER (Company Name) | 1-7 EAST WATER (Address) | ILD 004531927 (14)
WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312 623 4200
09719 DDDD1 G (14–24 Generator Number)

MR FRANK (Hauler Name) | 201 N 15 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

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918089D2 (39–46 Site Number)
GRIFFITH (City) | IND (State) | Zip | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT F005 | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 36,500 (LBS, TONS (circle one))

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 005000 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/10/81 | (Authorized Signature)

WASTE HAULER

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

(1) (Authorized Signature) | DATE: 04 10 81 (34–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

(Authorized Signature) | DATE: 4/10/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125 IL 4/10/81 T-63 JJM

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

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

SITE COPY - PART 3

001010

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

0389311

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104

MIDLAND DU DEXTER (Company Name) | 170 E WATER Address | ILD 004531927 | 0971700001 Generator Number

WAUKEGAN City | ILL State | 60085 Zip | 312 623 4200

WASTE HAULER(S)

MR FRANK Hauler Name | 201 153rd South Holland ILL Hauler Address | S.W.H. Registration Number 0079018

Hauler Name | Hauler Address | ILD 069506460 S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH City | IND State | Zip | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT K-078 | WASTE 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 NOS | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 36,500 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 005000 | 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. AND EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/3/81 | (Authorized Signature)

WASTE HAULER

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

(1) (Authorized Signature) DATE: 04/03/81

(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

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

(Authorized Signature) DATE: 4/3/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 203R F-50 4/3/81 JM

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

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

SITE COPY - PART 3

001011

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

0334055 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104 (8–13)

MIDLAND DAVIDSON (Company Name) | I-7 E WATER Address | ILD 004531927

WAUKEGAN City | ILL State | 60085 Zip | 312 623 4200

D 971900001 (14–24) Generator Number

WASTE HAULER(S)

MR FRANK Hauler Name | 201 W 15 South HOLLAND ILL Hauler Address | S.W.H. Registration Number D079009 (25–31)

ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX Address | 918089DD (39–46) Site Number

GRIFFITH City | IND State | Zip | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT F005 | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT | HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 36,540 (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. (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. AND E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/14/81 | (Authorized Signature)

WASTE HAULER

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

(1) (Authorized Signature) DATE: 04 14 81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

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

(Authorized Signature) DATE: 4 14 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 0124E 4/14/81 T-63978M

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

001012

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

0334052
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991104 13

MIDLAND DIV DEXTER (Company Name) | I-7 E WATER Address | ILD004531927 | 0911900001 G (Generator Number 14 24)

WAUKEGAN City | ILL State | 60085 Zip | 312 623 4200

WASTE HAULER(S)

MR FRANK Hauler Name | 201 N 1ST SOUTH HOLLAND IL Hauler Address | S.W.H. Registration Number 0079008 25 31

ILD069506160

Hauler Name | Hauler Address | S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX Address | 91808902 39 Site Number 46

BRIFTON City | IND State | Zip | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

F 005

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

SHIPPING DESCRIPTION: WASTE PAINT | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 35,650 (LBS / TONS (circle one))

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

QUANTITY OF WASTE DELIVERED: 005000 47 52 | (1 GALLONS / 2 CU. YDS.) (Circle One) 1 53

METHOD OF SHIPMENT (Circle One) DRUMS (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. AND E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-16-81 | (Authorized Signature)

WASTE HAULER

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

(1) Michael D Mark (Authorized Signature) | DATE 04/16/81 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 04/16/81 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: TO 204 E 4/16/81 T-50 JTM

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

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

SITE COPY - PART 3

001013

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0389315

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 991104

MIDLAND DIV DEXTER | 17 E WATER | ILD 004531927
(Company Name) | Address

WAUKEGAN | ILL | | 09119000001 G
City | State | Zip | Generator Number

312 623-4200

WASTE HAULER(S)

MR FRANK | 201 155th HOLLAND ILL | S.W.H. Registration Number D079008
Hauler Name | Hauler Address

ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL | 420 COLFAX | 91808402
(Facility Name) | Address | Site Number

GRIFFITH | IND | | IND 016310265
City | State | Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS K078 | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

1995

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
WASTE SOLVENTS, NOS	FLAMMABLE LIQUID	37500 (LBS) TONS (circle one)
		4500

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

QUANTITY OF WASTE DELIVERED: 004500 (47–52)

1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/24/81 (Authorized Signature)

WASTE HAULER

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

(1) (Authorized Signature) DATE 04 24 81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

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

(Authorized Signature) DATE: 4/24/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 205E 4/21/81 T-50 gpm

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

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

SITE COPY - PART 3

001014

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

0345909

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104

MIDLAND DIV. DEXTER
(Company Name)

Address

I-7 E WATER WAUKEGAN IL 60085
City State Zip

ILD 004531927 13
0971900001 G 24
Generator Number

312 623 4200

WASTE HAULER(S)

~~American Chemical~~ ~~400 Colfax~~
Hauler Name Hauler Address

S.W.H. Registration Number 0079009 31

MR FRANK 201 W-155th South Holland IL
Hauler Name Hauler Address

ILD 069506160
S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical 400 Colfax 91808902 39 46
(Facility Name) Address Site Number

Griffith IND 46319 IND 016360265
City State Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT K-078

WASTE 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, NOS

HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 36150 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 47 52

1 (GALLONS) (Circle One)
2 CU. YDS. 53

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: June 4, 1981 (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: 6/4/81 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: 6/4/81 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125X T-43 6/4/81 gpm

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

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

SITE COPY - PART 3

001015

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

0303221
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104 (8-12)

MIDLAND DIV DEXTER 1-7 E WATER ST — Company Name
WAUKEGAN — City
IL — State
60085 — Zip
Address

ILD 004531927 (13)
0971900001 G (14-24)
Generator Number
312 623-4000

WASTE HAULER(S)

MR FRANK — Hauler Name
201 W 155TH — Hauler Address
South Holland, IL
S.W.H. Registration Number 0079009 (25-31)

Hauler Name
Hauler Address
S.W.H. Registration Number (32-38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical — Facility Name
400 Colfax — Address
Griffith — City
INDIANA — State
46319 — Zip
91808902 (39-46) Site Number
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT
HAZARD CLASS: FLAMMABLE LIQUID
WEIGHT FOR D.O.T. USE 37600 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 4700 (47-52)
1 GALLONS (Circle One)
2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: June 5, 1981
(Authorized Signature)

WASTE HAULER

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

(1) Gary Owen (Authorized Signature) DATE: 06 05 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: 6 / 5 81 (60-65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 125R 6/5/81 T-63 gpm

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

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

SITE COPY - PART 3

001016

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0350413
1 7

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 99104 (8–13)

MIDLAND DIV DEXTER (Company Name) | 1-7 E WATER ST (Address) | ILD 004531927

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 0971900001 G (Generator Number 14–24) | 312 623 4200

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155 SOUTH HOLLAND ILL (Hauler Address) | S.W.H. Registration Number DOT1009 (25–31)

ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 9180890Z (Site Number 39–46)

GRIFFITH (City) | IND (State) | Zip | IND 016360765

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT K-078 | WASTE 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 NOS | HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 35,450 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (52) | (1) GALLONS (Circle One) (2) CU. YDS. | 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION AND EPA

DATE: 6-15-81 | (Authorized Signature)

WASTE HAULER

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

(1) Michael D. Martin (Authorized Signature) | DATE: 06/15/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

(Authorized Signature) | DATE: 06/15/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST ACRE T-50 6/15/81 JAM

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

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

001017

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

0345912

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991104

MIDLAND DIXIE (Company Name) | I-T-E WATER Address | ILD 004531927

WAUKEGAN City | ILL State | 60085 Zip | 312 623 4200

Generator Number 0971900021 G

WASTE HAULER(S)

M FRANK Hauler Name | 201 W 15 South Holland ILL Hauler Address | S.W.H. Registration Number D079004

ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 OLEAX Address | 9180892 Site Number

GRIFFITH City | IND State | 46319 Zip | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT K-078

WASTE 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 NOS | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 36,240 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-16-81 (Authorized Signature) D Purchasing

WASTE HAULER

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

(1) (Authorized Signature) DATE: 06 16 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

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

(Authorized Signature) DATE: 6/16/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 125R T-63 6/16/81 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

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

0350409
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104 8 13

MIDLAND DIV DEXTER (Company Name)
1-7 E WATER ST (Address) WAUKEGAN (City) IL (State) 60085 (Zip)
ILD 004531927
0971900001 G (Generator Number) 14 24
312 623 4200

WASTE HAULER(S)

MR FRANK (Hauler Name) 201 W 155th (Hauler Address) South Holland IL
S.W.H. Registration Number 0079009 25 31

Hauler Name ____ Hauler Address ____
S.W.H. Registration Number ILD 069506160 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) 420 Colfax (Address)
Griffith (City) IN (State) 46319 (Zip)
91808902 39 46 Site Number
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT K078
WASTE 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, NOS FLAMMABLE LIQUID
HAZARD CLASS:
WEIGHT FOR D.O.T. USE 36150 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 005000 47 52
1 GALLONS (Circle One) 2 CU. YDS. 1 53

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: June 19, '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: 06/19/81 54 59

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

____ (Authorized Signature) DATE: 6/19/81 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: To 125E T-63 6/19/81 gpm.

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

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

SITE COPY - PART 3

001019

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0350410

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997104

MIDLAND DEXTER 1-7 E WATER ST. — (Company Name) — Address
WAUKEGAN — City — IL — State — 60085 — Zip
IL D004531927 — Generator Number
0971900001 G
312 623-4200

WASTE HAULER(S)

MR FRANK — Hauler Name — 201 W 155th — Hauler Address
South Holland IL
S.W.H. Registration Number 0079021

Hauler Name — Hauler Address
IL D069506160
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical — (Facility Name) — 420 Colfax — Address
Griffith — City — INDIANA — State — 46319 — Zip
91808902 — Site Number
IN D016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT K078

WASTE 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 NOS
HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 42900 (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 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: 6-26-81 — (Authorized Signature)

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE: 06/26/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ✓

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

_____ (Authorized Signature) DATE: 6/26/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 1258 T-63 6/26/81 JMM

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

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

SITE COPY - PART 3

001020

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

0303249 (1–7)

P Purchase 8

Authorization Number 997104 (8–13)

MIDLAND DIV DEXTER (Company Name) | I-T-E WATER (Address) | ILD 004531927

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 212 623 4200

0971900001 G (14–24) Generator Number

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 15 SOUTH MILLBROOK ILL (Hauler Address) | S.W.H. Registration Number 0079025 (25–31)

ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 OLD FAX (Address) | 9180 8902 (39–46) Site Number

GRIFFITH (City) | IND (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT K-078

WASTE 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 NOS | HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 36420 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 004920 (47–52)

1 GALLONS (Circle One) / 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/30/81 (Authorized Signature)

WASTE HAULER

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

(1) Tom Berry (Authorized Signature) DATE: 6 30 81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

(Authorized Signature) DATE: 6 30 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125R - T-63 6/30/81 gm

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

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

SITE COPY - PART 3

001021

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

0303225

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104

MIDLAND DN DEXTER (Company Name) | 1 TE WATER ST (Address) | ILD 004531927

WAUKEGAN (City) | ILL (State) | 60085 (Zip) 312 623 4200 | Generator Number

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | S.W.H. Registration Number 0079021

South Holland IL | ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM (Facility Name) | 420 COLFAX (Address) | 9180902 Site Number

GARY 14th (City) | IND (State) | Zip | IND D163602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT K-078 | WASTE 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 NOS | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 3920 (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. /

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. AND EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-1-81 (Authorized Signature)

WASTE HAULER

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

(1) Michael Martin (Authorized Signature) DATE: 07/01/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO /

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

(Authorized Signature) DATE: 07/01/81

COMMENTS OR SPECIAL INSTRUCTIONS: 2500 TO 125K
3000 TO 124K T-63 7/1/81 8pm.

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

001022

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

0303231

Authorization Number 991104

MIDLAND DN DEXTER (Company Name) | I-7 E WATER Address | ILD 004531927
WAUKEGAN City | ILL State | 60085 Zip
09719DD001 G Generator Number
312 623 4200

WASTE HAULER(S)

MR FRANK Hauler Name | 201 W 155 South HOLLAND ILL Hauler Address | S.W.H. Registration Number 0079004
ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 421 COLFAX Address | 91808902 Site Number
GRIFFITH City | IND State | 46319 Zip
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS K. 078

WASTE 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, NOS | HAZARD CLASS: FLAMMABLE LIQUID | 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 (47–52)

(1 GALLONS / 2 CU. YDS. Circle One) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-7-81 (Authorized Signature)

WASTE HAULER

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

(1) Tom Berry (Authorized Signature) DATE: 7 07 81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

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

(Authorized Signature) DATE: 7 / 7 / 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 726K T-63. 7/7/81 JJM.

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

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

SITE COPY - PART 3

001023

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

0303226

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991104

MIDLAND DEXTER I-7 & WATER
(Company Name) Address

WAUKEGAN ILL 60085
City State Zip

ILD 004531427
691190DDD21 G
Generator Number

312 623 4200

WASTE HAULER(S)

MR FRANK 201 W 155
Hauler Name Hauler Address

SOUTH HOLLAND ILL

S.W.H. Registration Number IDTHD21

Hauler Name Hauler Address

ILD 069506160
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL 420 COLFAX
(Facility Name) Address

GRIFFITH IND 46319
City State Zip

9180890Z
Site Number

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS K-078

WASTE 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, NOS

HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 38400 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 AND EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-9-81

(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) _____ DATE: 7/9/81
(Authorized Signature)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

T. D MANLEE
(Authorized Signature)

DATE: 7/9/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125K T-63 7/9/81 JMM

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

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

SITE COPY - PART 3

001024

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0303227

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997104

MIDLAND DIVISION (Company Name) | I-7 E WATER (Address) | ILD 004531927 (8)
WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 0971900001 G (Generator Number) | 312 623 4200

WASTE HAULER(S)

DR FRANK (Hauler Name) | 201 W 155th South Holland ILL (Hauler Address) | S.W.H. Registration Number D079009
ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 91808902 (Site Number)
GRIFFITH (City) | IND (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT UN1263 | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 37,850 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 05000 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS | TANK TRUCK | OPEN TOP | 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. AND EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-14-81 | (Authorized Signature)

WASTE HAULER

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

(1) Dan H. Brent (Authorized Signature) | DATE: 07 14 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: 7 14 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT J-50 7/14/81 3PM.

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

001025

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

0303233

SPECIAL WASTE HAULING MANIFEST

997104
Authorization Number

MIDLAND DIV DEXTER 1-7 E WATER ST — ILD 004531927
(Company Name) — Address

WAUKEGAN — ILL — 60085 — 097190001 G
City — State — Zip — Generator Number

312 623 4200

WASTE HAULER(S)

MR FRANK — 201 W 15TH SOUTH MOLINE ILL — S.W.H. Registration Number DD79023 — ILD 069506165
Hauler Name — Hauler Address

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL — 426 LaFAX — 918089902
(Facility Name) — Address — Site Number

GRIFFITH — IND — IND 016362065
City — State — Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT K-078 — WASTE 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 NOS — HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 30010 LBS. TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 004300 (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. DOT EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/20/81 — (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) [signature] (Authorized Signature) — DATE: 07 20 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:

[signature] (Authorized Signature) — DATE: 07 20 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 205K T-50 7/20/81 gpm

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

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

SITE COPY - PART 3

001026

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

0303229 (1–7)

Authorization Number 997104 (8–13)

MIDLAND DIV DEXTER (Company Name) | I-J E. WATER (Address) | ILD 004531927 (14)
WAUKEGAN (City) | ILL (State) | 60085 (Zip)
09719DD01 G (Generator Number 14–24)
312 623 4200

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W. 155th (Hauler Address) | S.W.H. Registration Number DD79009 (25–31)
SOUTH HOLLAND ILL | ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918089D2 (39–46 Site Number)
GRIFFITH (City) | IND (State) | 4639 (Zip)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT UN1993 | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 35670 LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 004500 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. | 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/28/81 | (Authorized Signature)

WASTE HAULER

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

(1) Donald W Bell (Authorized Signature) | DATE: 07 20 81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) | DATE: 7 28 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST PIT T-50 7/28/81

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

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

SITE COPY - PART 3

001027

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

0303247
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104 (8–13)

MIDLAND DN DEXTER (Company Name) | I-7 E WATER (Address) | ILD 004531927 (8)
WAUKEGAN (City) | ILL (State) | 60085 (Zip)
09719000001 G (14–24 Generator Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 202 W 155th South Holland ILL (Hauler Address) | S.W.H. Registration Number ILD 069506160 (25–31)
(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 400 CLF AX (Address) | 918089402 (39–46 Site Number)
GRIFFITH (City) | IND (State) | 46319 (Zip) | IND 163602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT UN1993 | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 36750 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 05000 (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 | DNP EPA F90

DATE: 8/6/81 | (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: 08 06 81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

_____ (Authorized Signature) DATE: 8/6/81 (65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 8/6/81 - TO EAST GATE T-50 8/7/81

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

001028

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

0303232 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104 (8–13)

MIDLAND DIV DEXTER I-7 E WATER (Company Name) — Address — ILD 00453 1927

WAUKEGAN — City — ILL — State — 60085 — Zip — 312 623 4200

09 71 4 00001 G (14–24) Generator Number

WASTE HAULER(S)

MR FRANK — Hauler Name — 202 W 155th — Hauler Address — SOUTH HOLLAND ILL — S.W.H. Registration Number DD 990 09 (25–31) — ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) — 420 CLFAX — Address — 91808902 (39–46) Site Number

GRIFFITH — City — IND — State — 46319 — Zip — IND 163602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT — WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT UN1993 — HAZARD CLASS: FLAMMABLE LIQUID — WEIGHT FOR D.O.T. USE 35440 (LBS / TONS (circle one))

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

QUANTITY OF WASTE DELIVERED: 004600 (47–52) — (1 GALLONS (Circle One) / 2 CU. YDS.) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-14-81 — (Authorized Signature)

WASTE HAULER

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

(1) _____ (Authorized Signature) — DATE 08/14/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

_____ (Authorized Signature) — DATE: 8/14/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 210X T-50 8/17/81 jpm

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

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

SITE COPY - PART 3

001029

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

0303236 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104 (8–13)

MIDLAND DU DEXTER 1-7 EAST WATER — ILD 004531927
(Company Name) — Address
WAUKEGAN — ILL — 60085 — 312 623 4200
City — State — Zip
D 971900001 G (14–24)
Generator Number

WASTE HAULER(S)

MR FRANK — 201 W 155th — S.W.H. Registration Number D 979029 (25–31)
Hauler Name — Hauler Address
SOUTH HOLLAND ILL — ILD 069506460

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL — 420 COLFAX — 91808902 (39–46)
(Facility Name) — Address — Site Number
GRIFFITH — IND — Zip — IND 016360263
City — State

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT K-078 — WASTE 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 NOS — HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 32,150 (LBS / TONS (circle one))

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52)

1 GALLONS (Circle One) / 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/18/81

(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: 08/19/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

_____ (Authorized Signature) — DATE: 8/19/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 211R T-50 8/18/81 gpm

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

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

SITE COPY - PART 3

001030

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

0303235 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991104 (8–13)

MIDLAND DIX DEXTER (Company Name) | 17 E WATER (Address) | ILD 004531927 (14–24)
WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312 623 4200

Generator Number 0971900001 G

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th South HOLLAND ILL (Hauler Address) | S.W.H. Registration Number ILD 069506160 (25–31)

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM (Facility Name) | 420 COLFAX (Address) | 9180890 2 (39–46 Site Number)
GRIFFITH (City) | IND (State) | (Zip) | IND 163600865

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT UN 1993 | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 38,000 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52) | ~~1 GALLONS~~ 2 CU. YDS. (Circle One) | 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9-14-81 | (Authorized Signature)

WASTE HAULER

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

(1) Michael Martin (Authorized Signature) | DATE: 09 14 81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

(Authorized Signature) | DATE: 9/14/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 210 X T-50 9/14/81

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

001031

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

0303234 (1–7)

Authorization Number 99104 (8–13)

MIDLAND DIV DEXTER (Company Name) | I-7 E WATER (Address) | ILD 004531927

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312 623 4200

0971900001 G (14–24) Generator Number

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W. 155th (Hauler Address) | S.W.H. Registration Number 0079004 (25–31)

SOUTH HOLLAND ILL | ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 91808902 (39–46) Site Number

GRIFFITH (City) | IND (State) | (Zip) | IND 163 60265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT K-078

WASTE 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 NOS | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 37525 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 025000 (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. DOT & EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9/22/81 | (Authorized Signature)

WASTE HAULER

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

(1) Ronald Brinkmeier (Authorized Signature) DATE: 9 22 81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

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

(Authorized Signature) DATE: 9 22 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125R T-63 9/22/81 JJM

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

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

SITE COPY - PART 3

001032

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

0303241 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991104 (8–13)

MIDLAND DIV DEXTER (Company Name) | I-T-E WATER (Address) | ILD 004531927 (14)
WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312 623 3200
0971900001 G (14–24) Generator Number

WASTE HAULER(S)

MR FRANK (Hauler Name) | 202 W 155th (Hauler Address) | S.W.H. Registration Number 0079009 (25–31)
SOUTH HOLLAND, ILL | ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 91808902 (39–46) Site Number
GRIFFITH (City) | IND (State) | Zip | IND 163600265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT UN 1993 | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 36500 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: D 04500 (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. AND EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9-25-81 | 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: 9/25/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 9/25/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 126R T-63 9/25/81 9AM

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

001033

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0303254 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997104 (8–13)

MIDLAND DU DEXTER (Company Name) | I-7 E WATER (Address) | ILD 00453 1927

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312 623 4200

0971900001 G (Generator Number 14–24)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W. 155th (Hauler Address) | S.W.H. Registration Number OD79009 (25–31)

South Holland ILL | ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918089O2 (Site Number 39–46)

GRIFFITH (City) | IND (State) | Zip | IND 163626265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

UN1993

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

SHIPPING DESCRIPTION: WASTE PAINT | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 37500 (LBS / TONS (circle one))

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52)

1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-19-81 | (Authorized Signature) | 1978

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 19 81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 10 19 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 21TK T-50 10/19/81 9PM

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

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

SITE COPY - PART 3

001034

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

0303252 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991104 (8–13)

MIDLAND DU DEXTER (Company Name) | I-TE WATER Address | ILD 004530427
WAUKEGAN City | ILL State | 60085 Zip | 312 623 4200
D9719D0001 (14–24) Generator Number

WASTE HAULER(S)

MR FRANK Hauler Name | 201 W 155th Hauler Address | S.W.H. Registration Number DD79018 (25–31)
SOUTH HOLLAND IL | ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX Address | 918808902 (39–46) Site Number
GALFIN City | IND State | Zip | IND 163600265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT K-078 | WASTE 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 NOS | HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 37340 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52)

1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-14-81 (Authorized Signature)

WASTE HAULER

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

(1) (Authorized Signature) DATE: 10/14/81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

(Authorized Signature) DATE: 10 14 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 124 R T-63 10/14/81 gm

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

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

SITE COPY - PART 3

001035

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

0303239 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104 (8–13)

MIDLAND DU DEXTER I-7 EAST WATER (Company Name) — Address — ILD 084531927

WAUKEGAN — City — ILL — State — 60085 — Zip

0 47190 DDD01 G — Generator Number (14–24)

312 623 4200

WASTE HAULER(S)

MR FRANK — Hauler Name — 201 W 155th — Hauler Address — SOUTH HOLLAND ILL

S.W.H. Registration Number DD79009 (25–31)

ILD 064506160

Hauler Name — Hauler Address

S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL — Facility Name — 420 COLFAX — Address

9180 8902 — Site Number (39–46)

GRIFFITH — City — IND — State — Zip

IND 163602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT UN1993

HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 36,750 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52)

1 GALLONS (Circle One)
2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-13-81

(Authorized Signature)

WASTE HAULER

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

(1) Donald D Bult (Authorized Signature) DATE: 10 13 81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

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

(Authorized Signature) DATE: 10 13 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 210Z T-50 10/13/81 JRM

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

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

SITE COPY - PART 3

001036

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

0303251
1 7

SPECIAL WASTE HAULING MANIFEST

MIDLAND DIV DEXTER 1-7 E WATER
(Company Name) Address

WAUKEGAN, IL 60085
City State Zip

Authorization Number 997104
ILD 004531937
0971900001 G
14 Generator Number 24
312-623-4200

WASTE HAULER(S)

MR FRANK 201 W 155th
Hauler Name Hauler Address

South Holland IL
Hauler Name Hauler Address

S.W.H. Registration Number 0079019
25 31
ILD 069506160

S.W.H. Registration Number
32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical 400 S Colfax
(Facility Name) Address

Griffith IN
City State Zip

91808902
39 Site Number 46
IND 163602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS K-078

WASTE 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 NOS
HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 33750 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 (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: 10-8-81

(Authorized Signature)

WASTE HAULER

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

(1) _____ DATE: 10/09/81
(Authorized Signature) 54 59

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

_____ DATE: 10/5/81
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125TH T-63 10/8/81 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

001037

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

0303240 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104 (8–13)

MIDLAND DIV DEXTER (Company Name) | I-7 E WATER (Address) | ILD 004531927 (14)
WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312 623 4200
D971900001 L G (Generator Number 14–24)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | S.W.H. Registration Number D079019 (25–31)
SOUTH HOLLAND ILL | ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM (Facility Name) | 420 COLFAX (Address) | 918D8902 (39–46 Site Number)
GRIFFITH (City) | IND (State) | (Zip) | IND 163620 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT UN1993 | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 55250 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 054000 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/5/81 | (Authorized Signature) | K073

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: 10/05/81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 10/21/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 211R T-50 10/5/81 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

001038

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

0303259 (1–7)

Authorization Number 997104 (8–13)

MIDLAND DU DEXTER (Company Name) | 1-7 E WATER ST (Address) | ILD 004531927
WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 09719000001G (14 Generator Number 24) | 312 623 4200

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 15TH (Hauler Address) SOUTH HOLLAND, ILL | S.W.H. Registration Number DD79009 (25–31) | ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918 D8902 (39 Site Number 46)
GRIFFITH (City) | IND (State) | Zip | IND 163600 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT UN 1993 | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 37,550 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/2/82 | (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: 11/02/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

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

(Authorized Signature) | DATE: 11/2/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 211R T-50 GRM 11/2/81

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

001039

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

0303258

SPECIAL WASTE HAULING MANIFEST

Authorization Number 99104

MIDLAND DuDEXER (Company Name) | 17 EAST WATER (Address) | ILD 004531927

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312 623 4200 | 0971920001 G (Generator Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | S.W.H. Registration Number DOT019

Sobth Holland ILL | ILD 064506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 CELFAX (Address) | 918089O2 (Site Number)

GRIFFITH (City) | IND (State) | Zip | IND 163602O5

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

UN 1993

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

SHIPPING DESCRIPTION: WASTE PAINT NOS | HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE: 36,750 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 004500 | 1 GALLONS (Circle One) 2 CU. YDS. 1

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-28-81 | (Authorized Signature)

WASTE HAULER

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

(1) Robert Heikkinen (Authorized Signature) | DATE: 10/28/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

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

(Authorized Signature) | DATE: 10/28/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 211E T-50 10/28/81 8pm.

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

001040

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0303257 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997104 (8–13)

MIDLAND DIV DEXTER (Company Name) | 1-7E WATER Address | ILO 00453 1927 09719 D0001 G (14–24 Generator Number)

WAUKEGAN City | ILL State | 60085 Zip | 312 623 4200

WASTE HAULER(S)

MR FRANK Hauler Name | 201 W 135th Hauler Address | S.W.H. Registration Number 0079029 (25–31)

SOUTH HOLLAND ILL | ILO 0695006160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX Address | 9180890D2 (39–46 Site Number)

GRIFFITH City | IND State | Zip | IND 163602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT K-078

WASTE 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, NOS | HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 37400 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52)

1 GALLONS (Circle One) 2 CU. YDS. / (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-27-81 (Authorized Signature)

WASTE HAULER

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

(1) (Authorized Signature) DATE: 10 27 81 (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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 10 27 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 142R T-63 10/27/81 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

001041

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0303261
1 7

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997104 (8 13)

MIDLAND DEXTER (Company Name) | I-7 E WATER (Address) | ILD 004531927

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | D97190D001 G (14 Generator Number 24) | 312 623 4200

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | S.W.H. Registration Number OD79009 (25 31)

South Holland IL | ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918089D2 (39 Site Number 46)

GRIFFITH (City) | IND (State) | (Zip) | IND 163602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT UN1993 | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 37320 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL | QUANTITY OF WASTE DELIVERED: 025000 (47 52) | 1 GALLONS (Circle One) 2 CU. YDS. | 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION AND EPA

DATE: 11-6-81 | (Authorized Signature)

WASTE HAULER

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

(1) _____ (Authorized Signature) | DATE: 11 06 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: 11 6 81 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

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

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

To 211K T-50 GPM 11/6/81

SITE COPY - PART 3

001042

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

0303282 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991104 (8–13)

MIDLAND DEXTER (Company Name) | I-7 E WATER (Address) | ILD 004531927

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312 623 4200

D9719 00001 G (14–24 Generator Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | S.W.H. Registration Number DD79009 (25–31)

504th HOLLAND ILL | ILD 069506160

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

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM (Facility Name) | 420 COL FAX (Address) | 91808902 (39–46 Site Number)

GRIFFITH (City) | IND (State) | (Zip) | IND 163602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT UN 1993 | HAZARD CLASS: FLAMMABLE LIQUIDS | 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 (47–52) | (1 GALLONS / 2 CU. YDS.) (Circle One) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11-10 81 | B J Jeffries (Authorized Signature)

WASTE HAULER

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

(1) _____ (Authorized Signature) | DATE: 11 10 81 (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 11/10/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

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

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

To 210 K T-50 GRM 11/10/81

SITE COPY - PART 3

001043

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0303296 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997104 (8–13)

MIDLAND DEXTER (Company Name) | 1-7 E WATER (Address) | ILD 004531927 (14–24 Generator Number)

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312 623 4200

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | S.W.H. Registration Number D079DDA (25–31)

SOUTH HOLLAND ILL (Hauler Address) | ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918 08902 (39–46 Site Number)

GRIFFITH (City) | IND (State) | Zip | IND 163602655

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT UN1993 | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 36250 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 005000 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11-12-81 | (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: 11 12 81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 11/12/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

TO 210 R T-50 GPM 11/12/81

SITE COPY - PART 3

001044

STATE OF ILLINOIS

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

0303269 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 99710 4 (8–13)

MIDLAND DIV, DEXTER CORP (Company Name) | 1-7 E. WATER STREET (Address) | ILD 004531927

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312-623-4200

0 9 7 1 9 0 00 0 1 G (14–24) Generator Number

WASTE HAULER(S)

MR. ~~RSR~~ FRANK (Hauler Name) | 201 W. 155TH STREET (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 1 9 (25–31)

SOUTH HOLLAND, ILL. | ILD 069506160

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

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) | IND (State) | (Zip) | IND 16360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

UN 1993

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

SHIPPING DESCRIPTION: WASTE PAINT | HAZARD CLASS: FLAMMABEE LIQUID | WEIGHT FOR D.O.T. USE 37,650 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 004500 (47–52) | (1) GALLONS (Circle One) (2) CU. YDS. | 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11-23-81 | (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) Robert Reubens (Authorized Signature) | DATE: 11 23 81 (54–59)

(2) (Authorized Signature) | DATE: / / (60–65)

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

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

(Authorized Signature) | DATE: 11 23 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

To 211 R T-50 GRM 11/23/81

SITE COPY - PART 3

001045

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0303275

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997104

MIDLAND DEXTER (Company Name) | I-T-E WATER Address | ILD 004531927

WAUKEGAN City | ILL State | 60085 Zip | 312 623 4200 | D9 7 19 0D201 G Generator Number

WASTE HAULER(S)

MR FRANK Hauler Name | 201 W 155th SOUTH HOLLAND Hauler Address | ILL | ILD 069506160 S.W.H. Registration Number

Hauler Name | Hauler Address | S.W.H. Registration 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 | IND State | Zip | IND 163602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT UN1993 | WASTE 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 | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 37300 (LBS / TONS circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 004500 | (1 GALLONS / 2 CU. YDS. Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS (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 AND EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11-20-81 | (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) Robert Perkins (Authorized Signature) | DATE: 11 20 81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) | DATE: 11 20 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 211K T-50 GPM 11/20/81

SITE COPY - PART 3

001046

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0303260

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997104

MIDLAND DEXTER (Company Name) | I-7 E. WATER (Address) | ILD 004531927

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 312 623 4200 | 0971900001 G (Generator Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | S.W.H. Registration Number 0079004

SOUTH HOLLAND ILL | ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 CAL FAX (Address) | 918088402 (Site Number)

GRIFFITH (City) | IND (State) | Zip | IND 163600265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT UN 1993 | WASTE 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 | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 37200 (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 | TANK TRUCK | OTHER (Specify)

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11-13-81 | (Authorized Signature)

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE: 11/13/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

(Authorized Signature) DATE: 11/13/81 (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 211 R T-50 GRM 11/13/81

SITE COPY - PART 3

001047

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

SPECIAL WASTE HAULING MANIFEST

0303262
1 7

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 991104 (1 8 13)

MIDLAND DIVISION, DEXTER CORP (Company Name) | 1-7 EAST WATER STREET (Address)
ILD 004531927
WAUKEGAN (City) | ILLINOIS (State) | 60085 (Zip)
D971900001 G (14 24 Generator Number)
312 623 4000

WASTE HAULER(S)

MR. FSRANK (Hauler Name) | 201 W. 155TH (Hauler Address)
S.W.H. Registration Number 0079021 (25 31)
SOUTH HOLLAND, ILL.
ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address)
9 18 08 902 (39 Site Number 46)
GRIFFITH (City) | IND (State) | (Zip)
IND 163602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)
UN 1993

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

SHIPPING DESCRIPTION: WASTE PAINT
HAZARD CLASS: FLAMMABLE LIQUID
WEIGHT FOR D.O.T. USE 37240 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 005500 (47 52)
1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS (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. AND EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11-25-81
(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) Robert Pickens (Authorized Signature) DATE: 11 25 81 (54 59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

(Authorized Signature) DATE: 11 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

To 210 TK T-50 GRM 11/25/81 SITE COPY - PART 3

001048

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

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

SPECIAL WASTE HAULING MANIFEST

Authorization Number 41.

MIDLAND DEXTER (Company Name) | 1-7 E WATER (Address) | ILD 004531927

WAUKEGAN (City) | ILL (State) | (Zip) | D971900001 L (Generator Number) | 312 623 4200

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | S.W.H. Registration Number 0079009

SOUTH HOLLAND ILL ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 OLEAX (Address) | 91808902 (Site Number)

GRIFFITH (City) | IND (State) | (Zip) | IND 163602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT K-078

WASTE 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 UN 1993

HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 3750 (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 (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. AND EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11-24-81

(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 Bessy (Authorized Signature) DATE: 11 24 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 11 24 81

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

To 124 E T-63 GRM 11/24/81

SITE COPY - PART 3

001049

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0303263

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 9 9 7 1 0 4

MIDLAND DIVISION, DEXTER CORP (Company Name) | 1-7 EAST WATER STREET (Address) | ILD 004531927

WAUKEGAN, I (City) | ILL (State) | 60085 (Zip)

0 9 7 1 9 0 0 0 0 1 G
Generator Number

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH. (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 1 8

SOUTH HOLLAND, ILL | ILD 069506160

Hauler Name | Hauler Address | S.W.H. Registration 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) | IND (State) | (Zip) | IND 16360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

UN1993

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

SHIPPING DESCRIPTION: WASTE PAINT | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 37,510 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 4200 (47–52)

1 GALLONS (Circle One)
2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-4-81 | (Authorized Signature)

WASTE HAULER

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

(1) (Authorized Signature) DATE: 12/4/81 (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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 12/4/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

To 210 R T-50 GRM 12/4/81

SITE COPY - PART 3

001050

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0303281

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997104

MIDLAND DIV DEXTER — (Company Name)
1-7 E WATER — Address
ILD 004531927
WAUKEGAN — City
ILL — State
60085 — Zip
09190000016 — Generator Number
312 623 4200

WASTE HAULER(S)

MR FRANK — Hauler Name
201 W 155th — Hauler Address
SOUTH HOLLAND ILL
S.W.H. Registration Number DD 790089
ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL — (Facility Name)
450 CALFAX — Address
9180 8902 — Site Number
GLIFFITH — City
IND — State
Zip
IND 163826 5

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT K-078
WASTE 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 UN1993
HAZARD CLASS: FLAMMABLE LIQUID
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
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 AND EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-3-81
(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 03 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

(Authorized Signature) DATE: 12/3/81

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 124K T-63 6PM 12/3/81

SITE COPY - PART 3

001051

STATE OF ILLINOIS

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

0303289
1 7

TO BE COMPLETED BY WASTE GENERATOR

SPECIAL WASTE HAULING MANIFEST

Authorization Number 99704 (8 13)

MIDLAND DIV DEXTER (Company Name) | 1-7 E WATER (Address) | ILD004531927 (14 24 Generator Number)

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 3126234200

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155TH (Hauler Address) | S.W.H. Registration Number DD79009 (25 31)

SOUTH HOLLAND, ILL | ILD 069506160

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

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 9180902 (39 46 Site Number)

GRIFFITH (City) | IND (State) | Zip | IND 163602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

K-078

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

SHIPPING DESCRIPTION: WASTE PAINT | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 3730 (LBS / TONS (circle one))

UN1993

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

QUANTITY OF WASTE DELIVERED: 005000 (47 52) | (1 GALLONS / 2 CU. YDS.) (Circle One) / (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. AND EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-2-81 | (Authorized Signature)

WASTE HAULER

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

(1) Tom Berry (Authorized Signature) DATE: 12 02 81 (54 59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 12 02 81 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

To 210 K T-50 GRH 12/2/81

SITE COPY - PART 3

001052

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

0303264 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991104 (8–13)

MIDLAND DEXTER (Company Name) | I-7 E WATER Address | ILD 00453927 (14–24)
WAUKEGAN City | ILL State | Zip 312 623 4000
09719 DD001 G Generator Number

WASTE HAULER(S)

MR FRANK Hauler Name | 201 W 155th Hauler Address | S.W.H. Registration Number D 079009 (25–31)
SOUTH HOLLAND ILL | ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX Address | 91808902 (39–46) Site Number
GRIFFITH City | IND State | Zip IND 163602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT K-078 | WASTE 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 UN 1993 | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 3000 (LBS / TONS (circle one))

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 003600 (47–52) | GALLONS (Circle One) / 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. FIND EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-8-81 | (Authorized Signature)

WASTE HAULER

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

(1) (Authorized Signature) DATE: 12/08/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

(Authorized Signature) DATE: 12/08/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

TO 210R T-50 6KM 12/8/81

SITE COPY - PART 3

001053

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0303277 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number: 997104 (8–13)

MIDLAND DU DEXTER (Company Name) | 1-7 E. WATER (Address) | ILO 0045319 27 (14–24)
WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 0971900001 G (Generator Number) | 312 623 4200

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th S. HOLLAND ILL (Hauler Address) | S.W.H. Registration Number ILD 068506160 (25–31) | 0079069

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

DESTINATION — DISPOSAL, STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918 089 02 (39–46 Site Number)
GRIFFITH (City) | IND (State) | Zip | IND 163602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT K-078

WASTE 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 UN1993

HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE: 36,150 (LBS / TONS (circle one))

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52)

1 GALLONS (Circle One) / 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-16-81

(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 16 81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 12/16 (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 211K T-50 6RM 12/16/81

SITE COPY - PART 3

001054

STATE OF ILLINOIS

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

TO BE COMPLETED BY WASTE GENERATOR

0303266

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104

MIDLAND DIV (Company Name) | 1-7 E WATER (Address)
WAUKEGAN (City) | IL (State) | 60085 (Zip) | 312 623-4900
ILD OD 453 1927
097190 0001 G (Generator Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | South Holland, IL
S.W.H. Registration Number 0079018
ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 400 Colfax (Address)
Griffith (City) | IND (State) | Zip
9180890 2 (Site Number)
INP0163602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT
WASTE PHASE: LIQUID (Liquid, Viscous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT UN1993
HAZARD CLASS: FLAMMABLE LIQUID
WEIGHT FOR D.O.T. USE: 40 000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 005000 (47–52)
1 GALLONS 2 CU. YDS. (Circle One) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/14/81 (Authorized Signature)

WASTE HAULER

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

(1) (Authorized Signature) DATE: 10 14 81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

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

(Authorized Signature) DATE: 12/14/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

To 210 K T-50 GRM 12/14/81

SITE COPY - PART 3

001055

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0303265 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997104 (8–13)

MIDLAND DuDEXTER (Company Name) | 1-7 E. WATER (Address) | ILD 004531927 (14–24 EPA ID)
WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 0971900001 G (Generator Number) | 312 623 4200

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | S.W.H. Registration Number ODT9009 (25–31)
SOUTH HOLLAND, ILL | ILD 069506160

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

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918D89D2 (39–46 Site Number)
GRIFFITH (City) | IND (State) | (Zip) | IND 163602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE PAINT UN1993 | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 37,220 (1 LBS, 2 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, 2 CU. YDS. (Circle One)) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-10-81 | (Authorized Signature)

WASTE HAULER

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

(1) Tom Berry (Authorized Signature) | DATE: 12 10 81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) | DATE: 12/10/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

To 210 R T-50 GRM 12/10/81

SITE COPY - PART 3

001056

STATE OF ILLINOIS

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

TO BE COMPLETED BY WASTE GENERATOR

0303271

SPECIAL WASTE HAULING MANIFEST

Authorization Number 99704

MIDLAND DEXTER — (Company Name)
1-7 E WATER — Address
WAUKEGAN — City
ILL — State
60085 — Zip
ILD 004531927 — Generator Number
D97190001G
312 623 4200

WASTE HAULER(S)

BR FRANK — Hauler Name
201 W 155th — Hauler Address
South Holland ILL
S.W.H. Registration Number ILD 079004
ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL — (Facility Name)
420 COLFAX — Address
GRIFFITH — City
IND — State — Zip
Site Number 918D89D2
IND 1636026 5

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT K078
WASTE 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 UN1993
HAZARD CLASS: FLAMMABLE LIQUID
WEIGHT FOR D.O.T. USE: 36,420 (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 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. AND EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-18-81
(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: 12 18 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: 12/18/81

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 211 R T-50 GRM 12/18/81

SITE COPY - PART 3

001057

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0115756

ILDD69499234

Authorization Number 9 9 7 1 3 8

MID-AMERICA PROTECTIVE COATINGS, 1395 LOUIS AVENUE
(Company Name) Address

ELK GROVE VILLAGE, ILLINOIS 60007
City State Zip

0 31 44 000 26 G
Generator Number

WASTE HAULER(S)

STRAND
AMERICA CHEMICAL SERVICE GRIFFITH, INDIANA
Hauler Name Hauler Address

S.W.H. Registration Number 00 24002
ILT000646810

(2) AMERICA CHEMICAL SERVICE GRIFFITH, INDIANA
Hauler Name Hauler Address

S.W.H. Registration Number 0024002

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICA CHEMICAL SERVICE P.O. BOX 190 9 1808902
(Facility Name) Address Site Number

GRIFFITH, INDIANA 46319 IND016360265
City State Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY THINNER WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: HAZARD CLASS:

FLAMMABLE.....

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-23-80 F005 (Authorized Signature)

WASTE HAULER*

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

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

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

(1) Thomas Paul Stone (Authorized Signature) DATE: 12/23/80

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

Michael J Bulger (Authorized Signature) DATE: 12/23/80

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED 12/23/80 TO DOCK
PUMPED TO 124 TK 12/23/80 T-63

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

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

SITE COPY - PART 3

001058

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0377035

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 99 13 81

MID-AMERICA PROTECTIVE COATINGS (Company Name) | 3348 WASHINGTON ST. (Address)

FRANKLIN PARK, ILLINOIS (City) | ILLINOIS (State) | 60131 (Zip)

03 109 600 54 G
Generator Number
ILD069499234

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE (Hauler Name) | GRIFFITH, INDIANA (Hauler Address)

ILT 000646810
S.W.H. Registration Number 00 24002

AMERICAN CHEMICAL SERVICE (Hauler Name) | GRIFFITH, INDIANA (Hauler Address)

S.W.H. Registration Number 00 24002

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

9 180 8902 Site Number

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

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S.

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE	
FLAMMABLE LIQUID N.O.S.	FLAMMABLE	8800	LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 001100

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/5/81 Betty Lee (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) Thomas P. Hill (Authorized Signature) DATE: 02 05 81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

Michael T. Pusz (Authorized Signature) DATE: 2 15 81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED AT DOCK 2/5/81 UNLOADED 2/6/81 PUMPED TO 125R 2/6/81 T-63 Jim Murphy

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

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

SITE COPY - PART 3

001062

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0144686

ILDD69499234

Authorization Number 9 97 138

MID-AMERICA PROTECTIVE COATINGS (Company Name) | 1395 LOUIS AVENUE (Address)

ELK GROVE VILLAGE, (City) | ILLINOIS (State) | 60007 (Zip)

03144000026 G (Generator Number)

WASTE HAULER(S)

c/o STRAND TRUCKING
AMERICA CHEMICAL SERVICE (Hauler Name) | GRIFFITH, INDIANA (Hauler Address)

ILT 0006468 10

S.W.H. Registration Number 0024002

(2) AMERICAN CHEMCIAL SERVICE (Hauler Name) | GRIFFITH, INDIANA (Hauler Address)

S.W.H. Registration Number 0024002

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)

IN0 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY THINNER

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: FLAMMABLE.....

HAZARD CLASS:

F 3 5

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: 2-5-81

Mildred Wegner (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 001155 (47–52) 1 GALLONS 2 CU. YDS. (Circle One) 1 (53)

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

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

(1) [signature] (Authorized Signature) DATE 02/05/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

[signature] (Authorized Signature) DATE: 2/5/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED AT DOCK 2/5/81 UNLOADED 2/6/81
PUMPED TO 125K 2/6/81 T-63 Jim Murphy

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBER 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

001063

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0115752

ILDD69499234

Authorization Number 99 71 38

MID-AMERICA PROTECTIVE COATINGS (Company Name) | 1395 LOUIS AVENUE (Address)

ELK GROVE VILLAGE (City) | ILLINOIS (State) | 60007 (Zip)

0 3 14 40 0026 G
Generator Number

WASTE HAULER(S)

(1) ~~AMERICAN CHEMICAL SERVICE~~ (Hauler Name) | ~~GRIFFITH, INDIANA~~ (Hauler Address)

STRAND TRUCKING CRESTWOOD, IL, ILT0006468 10 0024001

S.W.H. Registration Number ~~0 0 2 4 0 0 2~~

(2) AMERICAN CHEMICAL SERVICE (Hauler Name) | GRIFFITH, INDIANA (Hauler Address)

IND 0 1 6 3 6 0 2 6 5

S.W.H. Registration Number ~~0 0 2 4 0 0 2~~ 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)

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY THINNER

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: FLAMMABLE..... DIRTY THINNER

FDS

HAZARD CLASS: ~~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: 3-26-81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 00 12 65 GALLONS / CU. YDS. (Circle One)

METHOD OF SHIPMENT (Circle One): ~~DRUMS~~ 23 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. Schuster (Authorized Signature) DATE: ~~03~~ 3/26/81

(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'Brien (Authorized Signature) DATE: 3/26/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 3/26/81
PUMPED TO 124R 3/27/81 T-63 Jim Murphy

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

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

SITE COPY - PART 3

001064

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

0350429 (1–7)

Authorization Number 991381 (8–13)

MID-AMERICA PROTECTIVE CTGS. (Company Name) | 3348 WASHINGTON STREET (Address)
FRANKLIN PARK, (City) | ILLINOIS (State) | 60131 (Zip)
0310960054 G (14–24) Generator Number
TID 069499234

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE (Hauler Name) | GRIFFITH, INDIANA (Hauler Address)
S.W.H. Registration Number 0 0 2 4 0 0 1 (25–31)

STRAND TRUCKING CRESTWOOD, IL.
~~AMERICAN CHEMICAL SERIVDE~~ (Hauler Name) | ~~GRIFFITH, INDIANA~~ (Hauler Address)
IND 016360265
S.W.H. Registration Number 0 0 2 4 0 0 1 (32–38)
TIT 0016448 18

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

~~AMERICAN CHEMICAL SERVICE~~ (Facility Name) | P.O. BOX 190 (Address)
9180890 02 (39–46) Site Number

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S. 495
WASTE 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
FLAMMABLE LIQUID N.O.S.	FLAMMABLE CLASS 55	9900 (LBS / TONS (circle one))

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

QUANTITY OF WASTE DELIVERED: 0 0 1 2 1 0 (47–52)
(1 GALLONS / ~~2 CU. YDS.~~ (Circle One)) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE 3/26/81 — Patty Lee (Authorized Signature)

WASTE HAULER

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

(1) William J. Sylvester (Authorized Signature) DATE: 03/26/81 (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:

Michael C. Dietz (Authorized Signature) DATE: 3/26/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 3/26/81
Pumped to 124R T-50 3/27/81 Jim Murphy

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

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

SITE COPY - PART 3

001061

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0115754

WASTE GENERATOR

Authorization Number 9913 01

MID-AMERICA PROTECTIVE COATINGS (Company Name) 1395 LOUIS (Address)

ILD 069499234

ELK GROVE VILLAGE, (City) ILLINOIS (State) 60007 (Zip)

03 14 4 00 0 2 6 G
Generator Number

WASTE HAULER(S)

(1) MR. FRANK (Hauler Name) 201 W. 155th STREET (Hauler Address) S.W.H. Registration Number 0 0 7 9 0 0 4

(2) SOUTH HOLLAND, (Hauler Name) ILLINOIS (Hauler Address)

ILD 069506160
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) 240 COLFAX (Address) 9 1 8 0 8 9 0 2 Site Number

GRAFFITH, (City) INDIANA (State) (Zip)

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: FLAMMABLE LIQUID N.O.S. WASTE SOLVENTS

HAZARD CLASS: FLAMMABLE..

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-27-81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 002500 (47–52) (1 GALLONS / 2 CU. YDS. (Circle One)) 1 (53)

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

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

(1) (Authorized Signature) DATE: 04 27 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: 04 27 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 12476 4/27/81 T-63 JMM

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

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

SITE COPY - PART 3

001066

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0377041

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 9 9 1 3 8 1 (8–13)

MID-AMERICA PROTECTIVE COATINGS (Company Name) | 3348 WASHINGTON ST. (Address)

FRANKLIN PARK, ILL. (City) | ILLINOIS (State) | 60131 (Zip)

0 3 1 0 9 6 0 0 5 4 G (14–24) Generator Number

ILD069499234

WASTE HAULER(S) ILTOCC6U6RIC

AMERICAN CHEMICAL (Hauler Name) | GRIFFITH, INDIANA (Hauler Address)

STRAND TRUCKING CRESTWOOD, IL

S.W.H. Registration Number 0 0 2 4 0 0 2 (25–31)

IND016360265

AMERICAN CHEMICAL (Hauler Name) | GRIFFITH, INDIANA (Hauler Address)

S.W.H. Registration Number 0 0 2 4 0 0 2 (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

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

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: FLAMMABLE LIQUID N.O.S.

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
FLAMMABLE LIQUID N.O.S.	FLAMMABLE...	13,120 (LBS / TONS circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 1 6 5 0 (47–52)

1 GALLONS (Circle One) / 2 CU. YDS. (53)

30

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

F005

DATE: 5/19/81 | Cathy Lee (Authorized Signature)

WASTE HAULER

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

(1) William J. DeLucia Jr. (Authorized Signature) DATE: 05 19 81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

Michael O'Rourke (Authorized Signature) DATE: 5/19/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 5/19/81 TO 1402 5/20/81 T463 JJM

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

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

SITE COPY - PART 3

001059

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0115755 (1–7)

312 - 593-3239

Authorization Number 9 9 1 3 0 1 (8–13)

MID-AMERICA PROTECTIVE CTGS,INC (Company Name) | 1395 LOUIS (Address)

ILD 069499234

ELK GROVE VILLAGE, (City) | ILLINOIS (State) | 60007 (Zip)

0 3 1 4 4 0 0 0 2 6 G (14–24) Generator Number

WASTE HAULER(S)

ILT 000646810

(1) STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILLINOIS (Hauler Address)

S.W.H. Registration Number 0 0 2 4 0 0 2 (25–31)

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

S.W.H. Registration Number 0 0 2 4 0 0 2 (32–38)

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 240 COLFAX (Address)

9 1 8 0 0 9 0 2 (39–46) Site Number

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

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S.

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: FLAMMABLE LIQUID N.O.S.

WASTE SOLVENTS

HAZARD CLASS: FLAMMABLE

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-28-81

Laura Johnson (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 0 0 1 9 8 0 (47–52)

(1 GALLONS / 2 CU. YDS.) (Circle One) 1 (53)

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

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

(1) Thomas L Farrell (Authorized Signature) DATE: 0 5 / 2 9 / 8 1 (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:

W. A. Cu [illegible] (Authorized Signature) DATE: 5/29/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 142X 5/29/81 T-63 gpm

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

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

SITE COPY - PART 3

001065

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0115757

312 593-3239

Authorization Number 9 91 301

MID-AMERICA PROTECTIVE CTGS (Company Name) | 1395 LOUIS AVENUE (Address) | ILD 069499234

ELK GROVE VILLAGE, (City) | ILLINOIS (State) | 60007 (Zip)

0 314 40 00 26 G — Generator Number

WASTE HAULER(S)

(1) STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILLINOIS (Hauler Address) | ILT 000646810 | S.W.H. Registration Number 0 02 5 00

(2) _____ (Hauler Name) | _____ (Hauler Address) | S.W.H. Registration Number 0 0 240 0

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 240 COLFAX (Address) | 9 180 090 2 — Site Number

GRIFFITH, (City) | INDIANA (State) | _____ (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S. | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:
FLAMMABLE LIQUID N.O.S.	FLAMMABLE
WASTE SOLVENTS	

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: 1-24-81 — Laura A. Johnson (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 0 03300 — (1) GALLONS (2) CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) 68 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: 1/24/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

_____ (Authorized Signature) DATE: 1-24-81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 1/24/81 TO 125E T-63 1/27/81 JM

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

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

SITE COPY - PART 3

001067

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0115758

312 593-3239

Authorization Number 991301

MID-AMERICA PROTECTIVE COATINGS (Company Name) 1395 LOUIS AVENUE (Address)

ILD 069499234

ELK GROVE VILLAGE, (City) ILLINOIS (State) 60007 (Zip)

0 31 44 00 02 6 G Generator Number

WASTE HAULER(S)

ILT 000646810

(1) STRAND TRUCKING (Hauler Name) CRESTWOOD, ILLINOIS (Hauler Address) S.W.H. Registration Number 0 024 002

(2) AMERICAN CHEMICAL (Hauler Name) GRIFFITH, INDIANA (Hauler Address) S.W.H. Registration Number 0 024 002

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) 240 COLFAX (Address) 9 1 80 09 02 Site Number

GRIFFITH, (City) INDIANA (State) (Zip)

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE. LIQUID N.O.S.

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: FLAMMABLE LIQUID N.O.S. WASTE SOLVENTS

X 075

HAZARD CLASS: FLAMMABLE...

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9-28-81 Louisa Johnson (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 0 01750 (1 GALLONS / 2 CU. YDS.) (Circle One) 1

21

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) James Batten (Authorized Signature) DATE: 09 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:

M. A. Gallo (Authorized Signature) DATE: 9/29/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 126E T-63 9/29/81 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

001068

STATE OF ILLINOIS

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

TO BE COMPLETED BY WASTE GENERATOR

0377039

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991381

MID-AMERICA PRTOECTIVE COATINGS (Company Name) 3348 WASHINGTON ST. (Address)

FRANKLIN PARK, (City) ILLINOIS (State) 60131 (Zip)

03 109 60 054 G
ILD069499234 (Generator Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) CRESTWOOD, ILLINOIS (Hauler Address) S.W.H. Registration Number 0 02 4002
ILT000646810

STRAND TRUCKING (Hauler Name) CRESTWOOD, ILLINOIS (Hauler Address) S.W.H. Registration Number 0 02 4002

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) P.O. BOX 190 (Address) 9 180 8902 (Site Number)

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
FLAMMABLE LIQUID N.O.S.	FLAMMABLE..	14,280 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 00 1876

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/9/81 Betty Lee (Authorized Signature)

WASTE HAULER

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

(1) Stan Strand (Authorized Signature) DATE: 11/9/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

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

Michael O'Dwyer (Authorized Signature) DATE: 11/5/81

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

At dock GKM 11/9/81
To 126 Tk T-63 GKM 11/10/81

SITE COPY - PART 3

001060

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0115759 (1–7)

312 593-3239

Authorization Number 9 9 1 3 0 1 (8–13)

MID-AMERICA PROTECTIVE COATINGS (Company Name) | 1395 LOUIS AVENUE (Address) | ILD 069499234

ELK GROVE VILLAGE, (City) | ILLINOIS (State) | 60007 (Zip)

0 3 1 4 4 0 0 0 2 6 G (14–24) Generator Number

WASTE HAULER(S)

ILT 000646810

(1) STRAND ETTRUCKING (Hauler Name) | CRESTWOOD, ILLINOIS (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 2 (25–31)

(2) AMERICAN CHEMICAL SERVICE (Hauler Name) | GRIFFITH, INDIANA (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 2 (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 240 COLFAX (Address) | 9 1 8 0 0 9 0 2 (39–46) Site Number

GRIFFITH, (City) | INDIANA (State) | (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE...LIQUID N.O.S. | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:
FLAMMABLE LIQUID N.O.S.	FLAMMALBE CLASS 55
WASTE SOLVENTS	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: 11-9-81 | Laura L Johnson (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 001155 (47–52) | 1 GALLONS 2 CU. YDS. (Circle One) 1 (53)

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

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

(1) Stan Strand (Authorized Signature) | DATE: 11/9/81 (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 Bulge (Authorized Signature) | DATE 11/9/81 (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

At dock 6PM 11/9/81
To 126 K T-63 6PM 11/10/81

001069

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

0350338 (1–7)

Authorization Number 9 9 7 1 9 9 (8–13)

THE MEYERCORD COMPANY (Company Name) | 365 EAST NORTH AVEUNE (Address) | U.S. EPA # IL D005103593
CAROL STREAM (City) | ILLINOIS (State) | 60187 (Zip)
1 4 3 0 2 0 0 0 0 4 G (14–24) Generator Number

WASTE HAULER(S)

LANDGREBE (Hauler Name) | 3009 S. SHIELDS AVEUNE (Hauler Address) | S.W.H. Registration Number I C C 3 0 0 5 - 1 5 7 (25–31)
IND 009-842624

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

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | COLFAX AVE & C & O R.R. (Address) | 9 1 8 0 8 9 0 2 (39–46) Site Number
GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PLANT SLUDGE | WASTE PHASE: LIQUID/SOLID (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: 3/4 | 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: 23100 (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: 1/16/81 F005 (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) 1/16 DATE: 1 1 6 8 1 (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: 1 1 9 8 1 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED 1/19/81 Jim Murphy
PUMPED 14 TO 124R 1/21/81 T-63 -- DUMPED 27 1/22/81 T-50

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

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

SITE COPY - PART 3

001070

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0167786 (7)

U.S. EPA# IL 0005103593

Authorization Number 997199 (8–13)

MEYERCORD COMPANY (Company Name) | 365 E. NORTH AVEUNE (Address)

CAROL STREAM (City) | ILLINOIS (State) | 60187 (Zip)

0430200004 G (14 / Generator Number / 24)

WASTE HAULER(S)

(1) LA PORTE TRANSIT (Hauler Name) | P. O. BOX 578 (Hauler Address) | ICC S.W.H. Registration Number 3005-164 (25–31)

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

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL COMPANY (Facility Name) | P.O. BOX 190 (Address) | 9180890 2 (39–46 / Site Number)

GRIFFITH (City) | INDIANIA (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PLANT SLUDGE | WASTE PHASE: LIQUID / SOLID (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: 3/4

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: 5/12/81 F005 | (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 4210 (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) F Schlumpf (22 drums) (Authorized Signature) DATE: 5/14/81 (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:

F Dunfee (Authorized Signature) DATE: 5/15/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 5/15/81

To 125X T-63 5/20/81 g78M

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

001071

TO BE COMPLETED BY WASTE GENERATOR

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

0167789

997199 Authorization Number

WASTE GENERATOR

MEYERCORD COMPANY (Company Name) | 365 E. NORTH AVEUNE Address | U.S. EPA# IL D005103593

CAROL STREAM City | ILLINOIS State | 60187 Zip

0430200004 Generator Number

WASTE HAULER(S)

(1) Landgate be LA PORTE TRANSIT Hauler Name | P.O. BOX 578 Hauler Address | I C C 3005-130 S.W.H. Registration Number

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL COMPANY P.O. BOX 190 (Facility Name) | INDIANIA Address | 46319

GRIFFITH City | State | Zip

91808902 Site Number

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PLANT SLUDGE 191

WASTE PHASE: LIQUID / SOLID (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: 3/4

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: 10-12-81 F005 | (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 4375 (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) Landgate Don Egli (Authorized Signature) DATE: 3/12/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

(Authorized Signature) DATE: 3/13/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 3/13/81* PUMPED TO 125E 3/12/81 T-63 Jim Murphy

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

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

SITE COPY - PART 3

001072

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

0555053

Authorization Number 997199

MEYERCORD CO (Company Name) | 365 E. NORTH AVE (Address) | 312/682/6373 (Phone Number) | 0430200004 G (Generator Number)

CAROL STREAM (City) | ILLINOIS (State) | 60187 (Zip) | ILD000510359 3 (EPA Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) | 3009 S. SHIELDS (Hauler Address) | ICC S.W.H. Registration Number 3005-148

312/721/0095 (Phone Number) | 009-842-824 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFTH (City) | INDIANA (State) | 46319 (Zip) | 219/924/4370 (Phone Number) | 016360265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE ORGANIC SOLVENTS WASTE PHASE: LIQUID/SOLID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
WASTE SOLVENTS	3/4	X 9189	

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 1,160 (1 GALLONS (Circle One) 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One) (DRUMS 20 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) F005 DATE: 11-3-81

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE: 10/30/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

_____ (Authorized Signature) DATE: 11/2/81

COMMENTS OR SPECIAL INSTRUCTIONS: Unloaded at dock 11/2/81*
TO 125 TK T-63 GPM 11/3/81

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

001073

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0167784

U.S. EPA# 0005103593

Authorization Number 997199

MEYERCORD COMPANY (Company Name) | 365X E. NORTH AVENUE (Address)

CAROL STREAM (City) | ILLINOIS (State) | 60187 (Zip)

0430200004 G (Generator Number)

WASTE HAULER(S)

LA PORTE TRANSIT (Hauler Name) | P.O. BOX 88 578 (Hauler Address)

ICC S.W.H. Registration Number 3005-126

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

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

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

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

9180890 2 (Site Number)

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PLANT SLUDGE

WASTE PHASE: LIQUID/SOLID (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: 3/4

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: 2-15-81 E005 (Authorized Signature) 2742

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 4430 (42–52) (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: 7/15/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

(Authorized Signature) DATE: 7/16/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 1242 T-63 7/24/81 9 a.m.

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

001074

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

0350334

U.S. EPA# 0005103593

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997190

MEYERCORD COMPANY (Company Name) | 365 E. NORTH AVENUE (Address)

CAROL STREAM (City) | ILLINOIS (State) | 60817 (Zip)

0430200004 (Generator Number)

WASTE HAULER(S)

~~LANDGREBE~~ (Hauler Name) | ~~P.O. BOX 578~~ (Hauler Address)

ICC S.W.H. Registration Number ~~3005~~ 1519

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

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

91808902 Site Number

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ~~PLANT SLUDGE~~

WASTE PHASE: ~~LIQUID/SOLID~~ (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: ~~3/4~~

WEIGHT FOR D.O.T. USE 7250 LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 900

(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: 9-11-81 F005 (Authorized Signature)

WASTE HAULER

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

(1) (Authorized Signature) DATE: 9/11/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

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

COMMENTS OR SPECIAL INSTRUCTIONS: To 126 IL T-63 9/14/81 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

001075

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0389964

TO BE COMPLETED BY WASTE GENERATOR

Attn T Kirke

Authorization Number 991627

Met-L-Wood Corp (Company Name) | 6755 W 65th St (Address)

Chicago (City) | IL (State) | 60638 (Zip)

031000741 G (Generator Number)

WASTE HAULER(S)

Landgrebe Mtr. Trnspt (Hauler Name) | Valparaiso IND 46383 (Hauler Address) | IND S.W.H. Registration Number 009842824

ICC MC 2980

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

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chem Serv (Facility Name) | 420 S Colfax (Address)

Griffith (City) | IND (State) | 46319 (Zip)

9180890Z (Site Number)

IND 063602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents (MEK) Material F-005 UN 1993

WASTE 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: 1

WEIGHT FOR D.O.T. USE 4000 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 600

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-24-81 Tom Kirke (Authorized Signature)

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 8/25/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

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

(Authorized Signature) DATE: 8/26/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 8/26/81 TO 124K T-63 8/26/81 9am.

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

001076

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0389963
1 7

TO BE COMPLETED BY WASTE GENERATOR

Attn T. Kirke

Authorization Number 991627 (8–13)

Met-L-Wood Corp (Company Name) | 6755 W 65th St. (Address)

Chicago (City) | IL (State) | 60638 (Zip)

0310007411 G (14 Generator Number 24)

WASTE HAULER(S)

Landgrebe Mtr Trnspt (Hauler Name) | Valparaiso IND 46383 (Hauler Address)

IND 809842824 (S.W.H. Registration Number 31)

ICC MC 2980

Hauler Name | Hauler Address

S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. (Facility Name) | 420 S. Colfax (Address)

9 1808902 (39 Site Number 46)

Griffith (City) | IND (State) | 46319 (Zip)

IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Sdvents (MEK) WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

Material F-005, UN 1993

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

SHIPPING DESCRIPTION: Flammable | HAZARD CLASS: 1 | WEIGHT FOR D.O.T. USE 1600 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 220 (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: 7-1-81 Tom Kirke (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) Mark Mullins X (Authorized Signature) X DATE: 7/2/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO ✓

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

Tom Cahill (Authorized Signature) DATE: 7/6/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 20th T-50 7/6/81 *grm,

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

001077

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

0389968

TO BE COMPLETED BY WASTE GENERATOR

ATTN: T Kirke

Authorization Number 991627

Met-L-Wood Corp (Company Name) | 6755 W 65th St (Address)

Chicago (City) | IL (State) | 60638 (Zip)

0316000741 Generator Number

WASTE HAULER(S)

Landgrebe Mtr Transpt (Hauler Name) | 3009 S Sheilds Ave (Hauler Address)

IND S.W.H. Registration Number 009842824

ICC NO MC 2980

Hauler Name | Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv (Facility Name) | 420 S Colfax (Address)

91808902 Site Number

Griffith (City) | IND (State) | 46319 (Zip)

IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents (MEK) Material F-005 - UN 1993

WASTE 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: 1

WEIGHT FOR D.O.T. USE 1600 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 220

1 GALLONS (Circle One)
2 CU. YDS.

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-12-81 Tom Kirke (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.

6-15-81 (Authorized Signature) DATE: / /

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

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

(Authorized Signature) DATE: 6/16/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 6/16/81
TO L25K 6/17/81 T-63 JJM

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

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

SITE COPY - PART 3

001078

TEST SHIPMENT FOR PROPER FORMS. LATER SHIPMENTS will Be Larger.
ATTN: T Kirke

(CH_2Cl_2)

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0261997

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 992840

Met-L-Wood Corp (Company Name) | 6755 W 65th St. (Address)
Chicago (City) | IL (State) | 60638 (Zip)
316 0000741 G (Generator Number)

WASTE HAULER(S)

Landgrebe Mtr Trspt (Hauler Name) | Std 130 W (Hauler Address) | ICC MC 2980
~~Griffith~~ Valparaiso IND046383 | IND 009 842 824 (S.W.H. Registration Number)

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. 420 S Colfax (Facility Name / Address) | 9180890Z (Site Number)
Griffith (City) | IND (State) | 46383 (Zip) | IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Methylene Chloride + Waste Oil | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Hazardous Dot Hazard # ORM-A | HAZARD CLASS: ~~DOT~~ F-001 | WEIGHT FOR D.O.T. USE 400 (LBS / TONS circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 55 | (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: 6-5-81 | Tom Kirke (Authorized Signature)

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 6/8/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

[signature] (Authorized Signature) DATE: 6/9/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 6/9/81
TO PUMP BOX 6/12/81 T-50 gjm

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

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

SITE COPY - PART 3

001079

(MEK)

STATE OF ILLINOIS

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

0261996

TO BE COMPLETED BY WASTE GENERATOR

ATTN: T Kirke

Authorization Number 991627

Met-L-Wood (Company Name) | 6755 W 65th St (Address)

Chicago (City) | IL (State) | 60638 (Zip)

03160000741 G (Generator Number)

WASTE HAULER(S)

Landgrebe Mtr Trasp (Hauler Name) | 3009 S Shields Ave (Hauler Address) | ICC NO MC2980 (S.W.H. Registration Number) 009892824 IND

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

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

American Chem Serv (Facility Name) | 420 S Colfax (Address) | 91808902 (Site Number)

Griffith (City) | IND (State) | 46319 (Zip) | IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents (MEK) WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

Material F-005

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

SHIPPING DESCRIPTION: Flammable | HAZARD CLASS: 3 | WEIGHT FOR D.O.T. USE 1600 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 220

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-5-81 Tom Kirke (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) Mike Mullins (Authorized Signature) DATE: 6 8 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

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

(Authorized Signature) DATE: 6/9/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT 1 DOCK 6/9/81

TO 124TK T-63 6/12/81 jm

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

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

SITE COPY - PART 3

001080

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

0389961

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991627

MET-L-WOOD Corp (Company Name) 6755 W 65th ST. (Address)
Chicago (City) IL (State) 60638 (Zip)
FED ID 005892390
0316000741 (Generator Number)

WASTE HAULER(S)

Landgrebe Mtr Trsnpt (Hauler Name) 3009 S Sheilds Ave (Hauler Address)
IND 009842824 (S.W.H. Registration Number)
ICC NO. MC 2980

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv (Facility Name) 420 S Colfax (Address)
9 1 8 0 8 9 0 2 (Site Number)
Griffith (City) IND (State) 46319 (Zip)
IND 016860265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents
2905
WASTE 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
Flammable	1	1600 (LBS / TONS (circle one))

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

QUANTITY OF WASTE DELIVERED: 220 (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 MATERIAL NO F-005

DATE: 4-20-81 Tom Kirke (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) Landgrebe Don Fgl (Authorized Signature) DATE: 4/21/81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES: NO: X

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

(Authorized Signature) DATE: 4/22/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: * UNLOADED AT DOCK 4/22/81
PUMPED TO 124E 4/23/81 T-63 gtm

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

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

SITE COPY - PART 3

001081

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0389958

TO BE COMPLETED BY WASTE GENERATOR

ATTN: D. RIZZO

Authorization Number 991627

MET-L-WOOD CORP. (Company Name) | 6755 W. 65TH ST. (Address) | FED ID 0059092390

CHICAGO (City) | ILL (State) | 60638 (Zip) | 031600074 1 G (Generator Number)

WASTE HAULER(S)

LANDGREBE MTR TRNPRT (Hauler Name) | 3009 S. SHEILDS AVE (Hauler Address) | S.W.H. Registration Number IND009842824

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | IND. (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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 | HAZARD CLASS: 1 | WEIGHT FOR D.O.T. USE 1600 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 220 | 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 MATERIAL NO. F-005

DATE: 3-12-81 | Dan Rizzo (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) Mark Mullin Lmt (Authorized Signature) DATE: __/__/__

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ✓

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

(Authorized Signature) DATE: 3/16/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 3/16/81 PUMPED TO 125E
3/17/81 T-63 Jim Murphy

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

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

SITE COPY - PART 3

001082

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

0389962

Authorization Number 991627

MET-L-WOOD Corp. (Company Name) | 6755 W 65th St. (Address)
Chicago (City) | IL (State) | 60638 (Zip)

FED ID 005992390

03 16000141 (14 Generator Number)

WASTE HAULER(S)

Landgrebe Mtr. Trsnprt (Hauler Name) | 3009 S Sheffield Ave (Hauler Address)
IND S.W.H. Registration Number 009842824 (31)
ICC MC 2980

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S Colfax (Address)
9180890Z (39 Site Number 46)
Griffith (City) | IND (State) | 46319 (Zip)
IND 016360165

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
HAZARD CLASS: 1
WEIGHT FOR D.O.T. USE 3200 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL
QUANTITY OF WASTE DELIVERED: 440 (47–52)
1 GALLONS (Circle One) 2 CU. YDS. (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-14-81 | Tom Kinke (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) Landgrebe Don Egli (Authorized Signature) DATE: 5/15/81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

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

(Authorized Signature) DATE: 5/18/81 (65)

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 5/18/81
TO 125Z 5/19/81 T-6397M

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

001083

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

0389960
1 7

ATTN: T Kirke

Authorization Number 991627 13

Met-L-Wood Corp (Company Name) | 6755 W. 65th St. (Address)

Fed ID 005909239O

Chicago (City) | IL (State) | 60638 (Zip)

0316000741 G
14 Generator Number 24

WASTE HAULER(S)

Landgrebe Mtr Trnprt (Hauler Name) | 3009 S Sheilds Ave (Hauler Address)

IND 009842824
S.W.H. Registration Number 25 31

(Hauler Name) | (Hauler Address)

S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem Service (Facility Name) | 420 S Colfax (Address)

9 18089 02
39 Site Number 46

Griffith (City) | Ind (State) | 46319 (Zip)

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents Material F005

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Flammable | HAZARD CLASS:

WEIGHT FOR D.O.T. USE: 1600 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 220
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: 3-26-81 | Tom Kirke (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], 3/27, (Authorized Signature) DATE: __/__/__ 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:

[signature] (Authorized Signature) DATE: 3/30/81 65

COMMENTS OR SPECIAL INSTRUCTIONS: TO 124 Tk T-63 - 3/30/81 Jim Murphy

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

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

SITE COPY - PART 3

001084

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0389957

TO BE COMPLETED BY WASTE GENERATOR

ATTN: D. RIZZO

Authorization Number 991627

MET-L-WOOD CORP. (Company Name) | 6755 W. 65 ST. (Address)
CHICAGO (City) | ILL (State) | 60638 (Zip)

FED ID 005909239O

0316000741 G (Generator Number)

WASTE HAULER(S)

LANDGREBE MTR TNSPRT (Hauler Name) | 3009 S. SHIELDS AVE (Hauler Address) | S.W.H. Registration Number IND009842824

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERV. (Facility Name) | 420 S. COLFAX (Address) | 91808902 (Site Number)
GRIFFITH (City) | IND (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gascous, Solid)

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

SHIPPING DESCRIPTION: FLAMMABLE | HAZARD CLASS: 1 | WEIGHT FOR D.O.T. USE 1600 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 220 | (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 MATERIAL NO. F-005

DATE: 3-2-81 | Jan Rizzo (Authorized Signature)

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: __/__/__

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO✓

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

[signature] (Authorized Signature) DATE: 3/04/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125E T-63 3/4/81 Jan Murphy

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

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

SITE COPY - PART 3

001085

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

0261995 (1–7)

Authorization Number 991627 (8–13)

Met-L-Wood Corp (Company Name) | 6755 W 65 ST (Address) | FED ID 0059092390

Chicago (City) | Il (State) | 60638 (Zip)

0316000741 (14–23) Generator Number | G (24)

WASTE HAULER(S)

Landgrebe Mtr Trspt (Hauler Name) | 3009 S Sheilds Ave (Hauler Address) | S.W.H. Registration Number [redacted] (25–31)

IND009842824

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. (Facility Name) | 420 S Colfax (Address) | 9180890 2 (39–46) Site Number

Griffith (City) | Ind (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Flammable | HAZARD CLASS: 1 | WEIGHT FOR D.O.T. USE 1200 (LBS / TONS (circle one))

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

QUANTITY OF WASTE DELIVERED: 165 (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 Material No. F-005

DATE: 2-10-81 | Tom Kirke (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) Landgrebe Dem Eq. 2-11-81 (Authorized Signature) | DATE: 2 11 81 (54–59)

(2) _____ (Authorized Signature) | DATE: __ __ __

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

[signature] (Authorized Signature) | DATE: 2 13 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED 2/12/81 AT DOCK
PUMPED TO 124K 2/13/81 T-63 Jim Murff

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

001086

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

0261994

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 991627

MET-L-WOOD CORP (Company Name) 625 W DIVISION (Address) FED. I.D.# 005904239O

CHICAGO (City) IL (State) 60638 (Zip) 0316000741 (Generator Number)

WASTE HAULER(S)

LANDGREBE MTR TANK 3000 S SHIELDS AVE (Hauler Name / Hauler Address) S.W.H. Registration Number ILD 000824842

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

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE - 420 S. COLFAX (Facility Name / Address) 9180890 (Site Number)

GRIFFITH (City) INDIANA (State) 46319 (Zip) IND 016 261 065

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 HAZARD CLASS: 1 400#/DRUM

WEIGHT FOR D.O.T. USE 2600 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: GALLONS 400 (GALLONS (Circle One) 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: 1/24/81 FDS (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE: 1/29/81

(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

BOB (Authorized Signature) DATE: 2/3/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED 1/30/81

PUMPED TO 125# 2/3/81 T-63 Jim Murphy

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001087

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

0319155

Authorization Number 997998

ILD-074-400-896

MEAD PACKAGING (Company Name) | 9540 S. DORCHESTER (Address) | CHICAGO (City) | ILLINOIS (State) | 60628 (Zip)

0316000170 (Generator Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 151ST S. HOLLAND, ILL (Hauler Address) | S.W.H. Registration Number 0079005

ILD-069-506-160

Hauler Name | Hauler Address | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

ILD-016-300-265

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX (Address) | 916099002 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: SOLVENT WASTE

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
SOLVENT WASTE	TOXIC
	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: 3000

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: 3/12/81 FDS (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: 3/12/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

BOB MUCK (Authorized Signature) DATE: 3/12/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 112E 3/12/81 T-63 Jim Murphy

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001088

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

0319159 (1–7)

Authorization Number (8–12): 997998

ILD - 074-400-896

MEAD PACKAGING (Company Name) | 9540 S. OGLESBY (Address) | CHICAGO (City) | ILLINOIS (State) | 60629 (Zip)

0316000170 (14–24) Generator Number

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W. 155TH ST. S. HOLLAND ILL (Hauler Address) | S.W.H. Registration Number 0079027 (25–31)
ILD 069-506-160

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

ILD-016-860-265

AMERICAN CHEMICAL (Facility Name) | 400 S. COLFAX (Address) | 91809902 (39–46) Site Number

GRIFFITH (City) | IND. (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: SOLVENT WASTE | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
SOLVENT WASTE	TOXIC
	FLAMMABLE

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000 (47–52)

1 GALLONS (Circle One)
2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

UN1993

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/28/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 5/28/81 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ___

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 5/28/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 112 X T-63 5/28/81 JGM

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

001089

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0319158

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997995

MEAD PACKAGING (Company Name) | 9540 S. DOAKS STREET (Address) | ILD-074-400-996

CHICAGO (City) | ILLINOIS (State) | 60620 (Zip)

0316000170 G (Generator Number)

WASTE HAULER(S)

MAC FRANK (Hauler Name) | 201 W. 155TH S. HOLLAND, IL (Hauler Address) | S.W.H. Registration Number 0078005

ILD-069-506-160

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

ILD-016-360-265

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX (Address) | 918089 02 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: SOLVENT WASTE | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
SOLVENT WASTE	TOXIC
	FLAMMABLE

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-24-91 (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: 4/24/91

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE 4/24/91

COMMENTS OR SPECIAL INSTRUCTIONS: 2000 GALS TO 109TH T-63 4/24/91 JPM
1000 GALS TO 112TH T-63

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001090

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0319161

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997998
ILD-074-400-896

MEAD PACKAGING — (Company Name)
9540 S. DORCHESTER — Address
CHICAGO — City
ILLINOIS — State
60628 — Zip

03/16000170 G — Generator Number

WASTE HAULER(S)

MR. FRANK — Hauler Name
201 W. 155TH ST. S. HOLLAND, ILL — Hauler Address
S.W.H. Registration Number 00790005
ILD-069-506-160

Hauler Name — Hauler Address
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

ILD-016-360-265

AMERICAN CHEMICAL — (Facility Name)
420 S. COLFAX — Address
GRIFFITH — City
INDIANA — State
46319 — Zip

918089 02 — Site Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: SOLVENT WASTE
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: UN1993

SHIPPING DESCRIPTION:	HAZARD CLASS:	
SOLVENT WASTE	TOXIC	F003
	FLAMMABLE	

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000

(1 GALLONS 2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/30/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) J Bradley — (Authorized Signature) — DATE: 7/30/81

(2) _____ (Authorized Signature) — DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) — DATE: 7/31/81

COMMENTS OR SPECIAL INSTRUCTIONS: 1 TO 112E T-63 7/30/81 gpm

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001091

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0449020 (1–7)

Authorization Number 992275 (8–13)

McWhorter Inc (Company Name) | Cottage Place (Address) | 3125282657 (Phone Number) | 0890200004 G (Generator Number 14–24)

Carpentersville (City) | Illinois (State) | 60110 (Zip) | ILD000173369 (EPA Number)

WASTE HAULER(S)

Mr Frank (Hauler Name) | South Holland (Hauler Address) | S.W.H. Registration Number 0079021 (25–31)

3125963377 (Phone Number) | ILD069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Serv. (Facility Name) | 420 S. Colfax (Address) | 91808702 (39–46 Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39–46 Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvents-Waste WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Bulk	Flamable	UN1993	D001

WEIGHT FOR D.O.T. USE 44600 (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) 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 Curt L Krull (Authorized Signature) DATE: 6-16-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE 06 16 81 (54–59)

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 6/16/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT T-50 6/16/81 gm

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

001092

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0449022

Authorization Number 992275

McWhorter Inc (Company Name) | Cottage Place (Address) | 3124282657 (Phone Number) | 0890200004 G (Generator Number)
Carpentersville (City) | Illinois (State) | 60110 (Zip) | ILD000173369 (EPA Number)

WASTE HAULER(S)

Mr Frank (Hauler Name) | South Holland (Hauler Address) | S.W.H. Registration Number 0079025
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

Amer. Chem. Serv. (Facility Name) | 420 S. Colfax (Address) | 918089 02 (Site Number)
Griffith (City) | Indiana (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)
(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Flamable Liquids Resin Mix WASTE 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
Bulk	Flamable	UN1866	D001

WEIGHT FOR D.O.T. USE 38460 (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 Curt L Krill (Authorized Signature) DATE 6-18-81

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) Donald L Bolt (Authorized Signature) DATE 06/18/81

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE 6/18/81

COMMENTS OR SPECIAL INSTRUCTIONS: To East Agit T-50 6/18/81 JPM

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

001093

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0449029

Authorization Number 992275

McWhorter Inc (Company Name) | Cottage Place (Address) | 3124282657 (Phone Number) | 0890200001 G (Generator Number)

Carpentersville (City) | Illinois (State) | 60110 (Zip) | ILD000173369 (EPA Number)

WASTE HAULER(S)

Mr Frank (Hauler Name) | South Holland (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 (Facility Name) | 420 S. Colfax (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Bulk | HAZARD CLASS: Flamable | UN1263 (UN or NA Number) | D001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 40540 (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) 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 Curt L Krull (Authorized Signature) DATE 7-13-81

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) Michael Martin (Authorized Signature) DATE 07/13/81

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

W D Murfee (Authorized Signature) DATE 07/13/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 124R T-63 7/13/81 JTM

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

001094

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

0515440 (1–7)

Authorization Number 977998 (8–13)

MEAD PACKAGING (Company Name) | 9540 S. DORCHESTER (Address) | 312-731-9500 (Phone Number) | 0316000170 (14–24) Generator Number

CHICAGO (City) | ILLINOIS (State) | 60628 (Zip)

ILD074400896 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 420 S. COLFAX (Hauler Address) | GRIFFITH, INDIANA 46319

S.W.H. Registration Number 0079003 (25–31)

(Phone Number)

ILD067506160 (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)

9180 8902 (39–46) Site Number

GRIFFITH (City) | IND (State) | (Zip) | (Phone Number)

ILD 016-760-704 (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: SOLVENT WASTE WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
SOLVENT WASTE	TOXIC FLAMMABLE	NA 1993	F003

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000 (47–52) (GALLONS (Circle One) / CU. YDS.) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

T-63

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH 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 9/18/81

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) _____ (Authorized Signature) DATE: 9/18/81 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

_____ (Authorized Signature) DATE 9/18/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 112X T-63 9/18/81 JJM

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

001095

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

0515442

Authorization Number 999998

~~ILD074466896~~

MEAD PACKAGING (Company Name) | 9540 S. Dorchester (Address) | 312-731-9500 (Phone Number) | 0316000170 (Generator Number)

CHICAGO (City) | ILLINOIS (State) | 60628 (Zip) | ILD074466896 (EPA Number)

WASTE HAULER(S)

Mr. Frank (Hauler Name) | 4205 S. Elfax (Hauler Address) | Griffith, Indiana 46319 (Phone Number) | S.W.H. Registration Number 0079006 | ILD069506160 (EPA Number)

~~AMERICAN CHEMICAL~~ (Hauler Name) | ~~42~~ (Hauler Address) | (Phone Number) | S.W.H. Registration Number | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 4205 S. COLFAX (Address) | 917077C2 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | (Phone Number) | ILD016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR.

WASTE NAME: SOLVENT WASTE WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
SOLVENT WASTE	TOXIC	UN1993	F003

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 (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 Eugene J. Frank (Authorized Signature) DATE: 10/28/81

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) Michael Weiler (Authorized Signature) DATE: 10/29/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

_____ (Authorized Signature) DATE: 10/29/81

COMMENTS OR SPECIAL INSTRUCTIONS TO 112R T-63 10/29/81 JOAN

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

001096

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 100

TO: T/S/D/F	FROM: Generator
E.P.A. ID Code No.	E.P.A. ID Code No.
Address	Address
Destination	Origin
Phone	Phone

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
26					10,400	

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D/F _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency.

Generator Signature _____ Date _____

TRANSPORTER #1 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date 6/8/81

TREATMENT/STORAGE/DISPOSAL/FACILITY UNLOADED AT DOCK 6/6/81 TO #20 T-50 6/9/81 JPM

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D/F Signature _____ Date 6/8/81

T/S/D/F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

001097

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0449078 (1–7)

Authorization Number 992275 (8–13)

COMPLETED BY GENERATOR

McWhorter Inc (Company Name) | Cottage Place (Address) | 3124282657 (Phone Number) | 0890200004 (Generator Number 14–24) | G

Carpentersville (City) | Illinois (State) | 60110 (Zip) | ILD095299020 (EPA Number)

WASTE HAULER(S)

Mr Frank (Hauler Name) | South Holland (Hauler Address) | S.W.H. Registration Number 0079021 (25–31)

3125963377 (Phone Number) | ILD069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Amer. Chem. Service (Facility Name) | 420 S. Colfax (Address) | 91808902 (Site Number 39–46)

Griffith (City) | Indiana (State) | 46319 (Zip) | 2199244370 (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: Waste Flammable Liquids Resin Scrap WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
, Flammable		UN1866	D001

WEIGHT FOR D.O.T. USE 41360 (LBS) TONS (circle one) — WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 005500 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Curt Lokell (Authorized Signature) DATE: 11-2-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Daniel Beall (Authorized Signature) DATE: 11/02 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

J Dwyer (Authorized Signature) DATE: 11/2 (60)

COMMENTS OR SPECIAL INSTRUCTIONS: To 211K T-50 GRH 11/2/81

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 or

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

P.O. #5810-10025

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

0358963
J 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997177 (8–13)

McKESSON CHEM. CO. (Company Name) | 633 E. 138 ST. (Address)
DOLTON (City) | ILL (State) | (Zip)

ILD. 005097670
031600000 2 G (14–24) Generator Number

WASTE HAULER(S)

MR. FRANK'S (Hauler Name) | 201 W. 155 ST. (Hauler Address)
S.W.H. Registration Number 0029818 (25–31)
ILD. 069506160

SOUTH HOLLAND (Hauler Name) | ILL (Hauler Address)
S.W.H. Registration Number ____ (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM-CO. (Facility Name) | (Address)
91808902 (39–46) Site Number
GRIFFITH (City) | IND (State) | (Zip)
~~IND~~ 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: SOLVENTS & RESINS 895 | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TANK TRUCK | HAZARD CLASS: FLAMMABLE | WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 4500 (47–52) | 1 GALLONS (Circle One) / 2 CU. YDS. | 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/15-81 | Don C. White (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) _____ (Authorized Signature) DATE: 04 15 81 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 4/15/81 (65)

COMMENTS OR SPECIAL INSTRUCTIONS: DANCO / TO EAST ACRE 4/15/81 T-50 gpm

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001109

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0358965
1 7

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number ~~997177~~ ILD.005097670 13

McKesson Chemical Company (Company Name) | 633 E. 138th Street (Address)

0 3 1 6 0 0 0 0 0 2 G
14 Generator Number 24

Dolton (City) | Illinois (State) | 60419 (Zip)

WASTE HAULER(S)

Mr. Frank's (Hauler Name) | 201 W. 155th St. (Hauler Address)

S.W.H. Registration Number 0 0 7 9 0 2 8
25 31

ILD. 069506160

South Holland (Hauler Name) | Illinois (Hauler Address)

S.W.H. Registration Number ___ ___ ___ ___ ___ ___ ___
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Co. (Facility Name) | (Address)

9 1 8 0 8 9 0 2
39 Site Number 46

Griffeth (City) | Indiana (State) | (Zip)

IND. 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvents & Resins

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

F005 & F003

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. ~~Tank Truck~~

HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE 38,000 (LBS) TONS (circle one)

UN1993

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000
47 52

1 GALLONS (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/28-81

Don C. White (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Robert Perkins (Authorized Signature) DATE: 04 28 81
54 59

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 4/28/81
60 65

COMMENTS OR SPECIAL INSTRUCTIONS: To East Agit 4/28/81 T-50 gpm

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001110

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

0358964
1 7

Authorization Number 9 9 7 1 7 7 13

McKesson Chemical Company (Company Name) | 633 E. 138th Street (Address)

ILD.005097670

Dolton, (City) | Illinois (State) | 60419 (Zip)

0 3 1 6 0 0 0 0 0 2 (14) Generator Number (24) G

WASTE HAULER(S)

Mr. Frank's (Hauler Name) | 201 W. 155th St. (Hauler Address)

S.W.H. Registration Number 0 0 7 9 0 1 8 (25–31)

ILD. 069506160

South Holland (Hauler Name) | Illinois (Hauler Address)

S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Co. (Facility Name) | (Address)

9 1 8 0 8 9 0 2 (39–46) Site Number

Griffeth (City) | Indiana (State) | (Zip)

IND. 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvents & Resins

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

F005 & F003

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Flammable Liquids, n.o.s.

HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

UN1993

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: 5/5-81

(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: 5/5/81 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 5/5/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To East Agit 5/5/81 T-50 gmm

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

001103

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0358966

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 9 9 7 1 7 7
ILD.005097670

McKesson Chemical Company (Company Name) | 633 E. 138th Street (Address)
Dolton (City) | Illinois (State) | 60419 (Zip)
0 3 1 6 0 0 0 0 0 2 G — Generator Number

WASTE HAULER(S)

Mr. Frank's (Hauler Name) | 201 W. 155th St. (Hauler Address)
S.W.H. Registration Number 0 0 7 9 0 0 0 4
ILD.069506160

South Holland (Hauler Name) | Illinois (Hauler Address)
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Co. (Facility Name) | (Address)
9 1 8 0 8 9 0 2 — Site Number
Griffeth (City) | Indiana (State) | (Zip)
IND.016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvents & Resins
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)
F005 & F003

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. ~~xTankxTruck~~
HAZARD CLASS: Flammable
WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)
UN1993

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 003000
1 GALLONS (Circle One) / 7 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: 5/5-81 (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) Ronald Bridgewater (Authorized Signature) DATE: 5 5 8 1

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 5 5 8 1

COMMENTS OR SPECIAL INSTRUCTIONS: To West Acit 5/5/81 T-50 gal

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

001102

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

0358962

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997177

McKESSON CHEM CO. (Company Name) 633 E. 138 ST. (Address)
DOLTON (City) ILL. (State) (Zip)
ILD 005097670
0316000002 (Generator Number)

WASTE HAULER(S)

MR. FRANK'S (Hauler Name) 201 W. 155 ST. (Hauler Address)
S.W.H. Registration Number 0079009
ILD 069506460

SOUTH HOLLAND (Hauler Name) ILL. (Hauler Address)
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. CO. (Facility Name) (Address)
GRIFFITH (City) IND (State) (Zip)
IND 016360265
918089702 (Site Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: SOLVENTS + RESINS 400 WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
TANK WAGON	FLAMMABLE	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: 4/13-81 Don C White (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE: 04 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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 4 13 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST ACRE T-50 4/13/81 JFM

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

001108

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

0358967
1 7

Authorization Number 997177 (8-13)

McKesson Chemical Company (Company Name) | 633 E. 138th Street (Address)
ILD.005097670
Dolton (City) | Illinois (State) | 60419 (Zip)
03160000002 (14) Generator Number (G, 24)

WASTE HAULER(S)

Mr. Frank's (Hauler Name) | 201 W. 155th St. (Hauler Address)
S.W.H. Registration Number 007900158 004 (25-31)
ILD.069506160
South Holland (Hauler Name) | Illinois (Hauler Address)
S.W.H. Registration Number (32-38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Company (Facility Name) | Address
91808902 (39-46) Site Number
Griffeth (City) | Indiana (State) | Zip
IND. 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvents & Resins
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

F005 & F003

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Flammable Liquids, n.o.s. ~~XXXXXXXXX~~
HAZARD CLASS: Flammable
WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

UN1993

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: 5/7/81
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 5 7 81 (54-59)

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 5 7 81 (60-65)

SPECIAL INSTRUCTIONS: TO EAST AGIT T-50 5/7/81 gm

17 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001104

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

05

Authorization Number 097177

McKesson Chemical Company (Company Name) | 633 E. 138th Street (Address) | ILD 005097670

Dolton (City) | Illinois 60419 (State, Zip) | 0316000002 (Generator Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name) | 201 W. 155th Street (Hauler Address) | S.W.H. Registration Number 0079 009

ILD.069506160

So. Holland (Hauler Name) | Illinois (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Company (Facility Name) | Address | 91508002 (Site Number)

Griffeth (City) | Indiana (State) | Zip | ILD.016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvents & Resins | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

F005 & F003

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Waste Flammable Liquids, n.o.s.	FLAMMABLE	LBS / TONS (circle one)
UN1993		

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. (63)

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: 5/14-81 | Dan C. White (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) C Borucki (Authorized Signature) | DATE: 05 14 81 (54–59)

(2) (Authorized Signature) | DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) | DATE: 5/14/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST ACTT 5/14/81 T-50 gm

IN ILLINOIS: 217 / 782-3637 | ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001105

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0358971

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997177

McKesson Chemical Company (Company Name) | 633 E. 138th Street (Address) | ILD. 005097670 03160000002 (Generator Number)

Dolton, Illinois (City) | (State) | 60419 (Zip)

WASTE HAULER(S)

Mr. Frank's (Hauler Name) | 201 W. 155th Street (Hauler Address) | S.W.H. Registration Number 0079 004

South Holland (Hauler Name) | Illinois (Hauler Address) | ILD.069506160 (S.W.H. Registration Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Company (Facility Name) | Address | 91808902 (Site Number)

Griffeth (City) | ~~Indiana~~ (State) | (Zip) | IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvents & Resins

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

F005 & F003

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Flammable Liquids, n.o.s. UN1993

HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 003000 (1 GALLONS (Circle One) 2 ~~CU. YDS.~~)

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: 5/18-81 (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: 5/18/81

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 5/18/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO CAST ACID ~ 5/18/81 T-50 gpm

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001106

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

0358972
1 7

Authorization Number ~~007177~~ 8 13
ILD. 005097670

McKesson Chemical Company (Company Name) — ~~633 E. 139th Street~~ Address
Dolton, City — ~~Illinois~~ State — ~~60419~~ Zip

0316000002 14 Generator Number G 24

WASTE HAULER(S)

Mr. Frank's Hauler Name — ~~201 W. 155th Street~~ Hauler Address — S.W.H. Registration Number ~~0079~~ 25 ~~004~~ 31

ILD.069506160

South Holland Hauler Name — ~~Illinois~~ Hauler Address — S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

~~merican Chemical Company~~ (Facility Name) — Address — 91308902 39 Site Number 46

~~Griffeth~~ City — ~~Indiana~~ State — Zip — IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvents & Resins — WASTE PHASE: Liquids (Liquid, Gaseous, Solid)

~~F005 & F003~~

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE:
Waste Flammable Liquids, n.o.s.	FLAMMABLE	LBS / TONS (circle one)
UN1993		

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 47 003000 52 — (1) GALLONS (Circle One) (2) CU. YDS. — 1 53

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/18/81 — (Authorized Signature) F005

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Ronald Bridgewater (Authorized Signature) — DATE: 54 5/18/81 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: 60 5/18/81 65

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT 5/28/81 T-50 gTM

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

SITE COPY - PART 3

001107

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0358915

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997177

McKesson Chemical Company (Company Name) | 633 EW 138th Street (Address)

ILD 005097670

Dolton (City) | Illinois (State) | 60419 (Zip)

031600002 (Generator Number)

WASTE HAULER(S)

Mr. Frank's (Hauler Name) | 201 W. 155th Street (Hauler Address) | S.W.H. Registration Number 0079 021

South Holland | Illinois | ILD.069506160

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

~~American Chemical Company~~ (Facility Name) | (Address) | 91802902 (Site Number)

Griffeth (City) | Indiana (State) | (Zip) | ILD,046360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvents & Resins

WASTE PHASE: Liquids (Liquid, Gaseous, Solid)

F005 & F003

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Flammable Liquids, n.o.s. UN1993

HAZARD CLASS: FLAMMABEE

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: 5/20-81 (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 05 29 81

(2) _____ (Authorized Signature) DATE: ___ ___ ___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 5 29 81

COMMENTS OR SPECIAL INSTRUCTIONS: To EAST ACLT 5/20/81 T-50 9:30A

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

001100

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

0358974
1 7

Authorization Number 997177 (8–13)

McKesson Chemical Company (Company Name) — 633 E. 138th Street (Address) — ILD. 005097670

Dolton (City) — Illinois (State) — 60419 (Zip)

03160000002 (14–24) Generator Number

WASTE HAULER(S)

Mr. Frank's (Hauler Name) — 201 W. 155th Street (Hauler Address) — S.W.H. Registration Number 0079 019 (25–31)

South Holland — Illinois — ILD. 069506160

Hauler Name — Hauler Address — S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Company (Facility Name) — Address — 01803902 (39–46) Site Number

Griffeth (City) — Indiana (State) — Zip — ILD, 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvents & ~~XXXXXXX~~ Resins — WASTE PHASE: Liquids (Liquid, Gaseous, Solid)

F005 & F003

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
Waste Flammable Liquids, nos	FLAMMABLE
UN1993	

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004500 (47–52) — 1 GALLONS (Circle One) / 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/26-81 — Ron C. White (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Donald H Bell (Authorized Signature) — DATE 05 26 81 (54–59)

(2) ____ (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) — DATE: 5 26 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT T-50 5/26/81 gpm

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

SITE COPY - PART 3

001101

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0358975
1 7

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997177 (8–13)

~~McKesson Chemical Company~~ (Company Name) ~~633 E. 132th Street~~ (Address)

ILD. 005097670

0316000002 (14–24 Generator Number) G

~~Dolton~~ (City) ~~Illinois~~ (State) ~~60419~~ (Zip)

WASTE HAULER(S)

Mr. Frank's (Hauler Name) 201 W. 155th Street (Hauler Address) S.W.H. Registration Number 0079 025 (25–31)

South Holland Illinois ILD. 069506160

(Hauler Name) (Hauler Address) S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Company (Facility Name) (Address) ~~9130662~~ (39–46 Site Number)

Griffeth (City) Indiana (State) (Zip) ILD. 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvents & Resins WASTE PHASE: Liquids (Liquid, Gaseous, Solid)

F005 & F003

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Waste Flammable Liquids, N.O.S.	FLAMMABLE	LBS / TONS (circle one)
UN1993		

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 00 5500 (47–52)

1 GALLONS (Circle One) / 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/29-81 Don C. White (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Donald Ball (Authorized Signature) DATE: 05 29 81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

H T Schmidt (Authorized Signature) DATE: 5 29 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT T-50 5/29/81 gtm

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001099

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

0358976
1 7

Authorization Number 997177 (8–13)

McKesson Chemical Company (Company Name) | 633 E. 138th Street (Address)
Dolton (City) | Illinois (State) | 60419 (Zip)
ILD. 005097670
0316000002 (14 Generator Number G 24)

WASTE HAULER(S)

Mr. Frank's (Hauler Name) | 201 W. 155th Street (Hauler Address) | S.W.H. Registration Number 0079 009 (25–31)
South Holland (Hauler Name) | Illinois (Hauler Address) | ILD. 069506160 S.W.H. Registration Number (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Company (Facility Name) | Address | IND016360265 91808902 (39 Site Number 46)
Griffeth (City) | Indiana (State) | Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvents & Resins | WASTE PHASE: Liquids (Liquid, Gaseous, Solid)

F005 & F003

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Waste Flammable Liquids, N.O.S.	FLAMMABLE	LBS / TONS (circle one)
UN1993		

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 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: 6/3-81 | Don C. Wirth (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: 06/03/81 (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: 6/3/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 203K T-50 6/3/81 JTM

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001111

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

0358977
1 7

Authorization Number 8 997177 13

McKesson Chemical Company (Company Name) — 633 E. 135th Street (Address)
Dolton (City) — Illinois (State) — (Zip)

ILD. 005097670
0316000002
14 Generator Number G 24

WASTE HAULER(S)

Mr. Frank's (Hauler Name) — 201 W. 155th Street (Hauler Address)
S.W.H. Registration Number 25 0079 31

South Holland (Hauler Name) — Illinois (Hauler Address)
ILD.069506160
S.W.H. Registration Number 32 38

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Company (Facility Name) — Address
39 01308502 46 Site Number

Griffeth (City) — Indiana (State) — (Zip)
ILD. 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvents & Resins — WASTE PHASE: Liquids (Liquid, Gaseous, Solid)

F005 & F003

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Flammable Liquids, n.o.s. — HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE 4000 (LBS / TONS (circle one))

UN1993

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 47 4000 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: 6/5-81 — (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) ATT - Larry Eck (Authorized Signature) — DATE: 6 6 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: 6 / 5 / 81 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 2042 T-50 6/5/81 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

001112

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

0358979

Authorization Number 997177

McKesson Chemical Company (Company Name) | 633 E. 138th Street (Address) | ILD. 005097670 0316000002

Dolton (City) | Illinois (State) | (Zip)

WASTE HAULER(S)

~~Mr. Frank's~~ (Hauler Name) | ~~201 W. 155th Street~~ (Hauler Address) | S.W.H. Registration Number ~~0079~~ 021

South Holland (Hauler Name) | Illinois (Hauler Address) | ILD. 0506160 (S.W.H. Registration Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Company (Facility Name) | (Address) | 91808902 (Site Number)

~~Griffeth~~ (City) | ~~Indiana~~ (State) | (Zip) | IND. 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ~~Solvents & Resins~~ ~~F005 & F003~~

WASTE PHASE: ~~Liquids~~ (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 ~~Flammable Liquids, n.o.s.~~	~~FLAMMABLE~~
~~UN1993~~	

WEIGHT FOR D.O.T. USE 4,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: [illegible]

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS ~~TANK TRUCK~~ OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/12/81 [signature] (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Robert [illegible] (Authorized Signature) DATE 06/12/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO /

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 6/12/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST PIT T-50 6/12/81 jsm

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

001113

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

0358980 (1–7)

Authorization Number 997177 (8–13)

ILD. 005097670

McKesson Chemical Company (Company Name) — ~~633 W. 138th Street~~ (Address)

0316000002 (Generator Number) (14–24)

Dolton (City) — ~~Illinois~~ (State) — (Zip)

WASTE HAULER(S)

Mr. Frank's (Hauler Name) — ~~201 W. 155th Street~~ (Hauler Address) — S.W.H. Registration Number ~~0079~~ 009 (25–31)

ILD069506160

South Holland (Hauler Name) — ~~Illinois~~ (Hauler Address) — S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Company (Facility Name) — (Address) — ~~01200802~~ (Site Number) (39–46)

Griffeth (City) — ~~Indiana~~ (State) — (Zip)

ILD. 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvents & Resins — WASTE PHASE: Liquids (Liquid, Gaseous, Solid)

F005 & F003

F005 F003

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	
Waste Flammable Liquids,n.o.s.	~~FLAMMABLE~~	WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)
UN1993		

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 (47–52)

1 GALLONS (Circle One) / ~~2 CU. YDS~~ (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/24/81 — (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 06/24/81 (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: 06/24/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST ACIT T-50 6/24/81 JTM

IN ILLINOIS: 217 / 7[illegible] DISTRICT — ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001114

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

TO BE COMPLETED BY WASTE GENERATOR

0358981

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997177

McKesson Chemical Company (Company Name) | 633 E. 139th Street (Address)
Dolton (City) | Illinois (State) | (Zip)

ILD. 005097670
316000002
Generator Number

WASTE HAULER(S)

Mr. Frank's (Hauler Name) | 201 W. 155th Street (Hauler Address)
S.W.H. Registration Number 0079 009

South Holland (Hauler Name) | Illinois (Hauler Address)
ILD069506160
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Company (Facility Name) | Address
Site Number 81308302

Griffeth (City) | Indiana (State) | (Zip)
ILD 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvents & Resins F005 & F003

WASTE PHASE: Liquids (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Waste Flammable Liquids,n.o.s.	FLAMMABLE	LBS / TONS (circle one)
UN1993		

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 05000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/26-81 (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE: 062681

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 6/26/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGT T-50 6/24/81 JMM

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001115

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

0358941
1 7

Authorization Number 997177
8 13

McKesson Chem. (Company Name) | 633 E 139 St. (Address)
Dolton (City) | IL (State) | (Zip)

ILD. 005097670
0316000002 G
14 Generator Number 24

WASTE HAULER(S)

Rapid Waste (Hauler Name) | Crestwood (Hauler Address)
S.W.H. Registration Number 0038/014
25 31
ILD. 066190968

(Hauler Name) | (Hauler Address)
S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Co. (Facility Name) | (Address)
9180890 02
39 Site Number 46
Griffith (City) | IND (State) | (Zip)
ILD 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvent + Resins
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)
EOC5 - F003

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
WASTE	FLAMMABLE N.O.S	20 (LBS / TONS circle one)
UN-1996		

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000
47 52

1 GALLONS (Circle One)
2 CU. YDS
53

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/3-81 (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 Huckstead (Authorized Signature) DATE: 8/3/81
54 59

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 8/3/81
60 65

COMMENTS OR SPECIAL INSTRUCTIONS: TO 20YR T-50 8/3/81 gpm

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001116

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

0511681 (1–7)

Authorization Number 997177 (8–13)

McKESSON CHEM.CO. (Company Name) | 633 E. 138 ST. (Address) | 849-4934 (Phone Number) | 0316000002 G (14 Generator Number 24)

DOLTON (City) | ILL. (State) | (Zip) | 005097670 (EPA Number)

WASTE HAULER(S)

RAPID WASTE (Hauler Name) | CRESTWOOD (Hauler Address) | S.W.H. Registration Number ILD066190966 (25–31)

312-597-6610 (Phone Number) | 0038/014 (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.CO. (Facility Name) | (Address) | 91808902 (39–46 Site Number)

GRIFFITH (City) | IND (State) | (Zip) | (Phone Number) | ILD.016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39–46 Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: SOLVENT + RESINS | WASTE 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. | HAZARD CLASS: | UN or NA Number: UN1993 | EPA HW Number:

WEIGHT FOR D.O.T. USE: 20 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 Don C. White (Authorized Signature) | DATE: 8/3-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Hackstra (Authorized Signature) | DATE: 8/3/81 (54–59)

(2) _____ (Authorized Signature) | DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature) | DATE: 8/3/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST PIT T-50 8/3/81 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

001117

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

0511684 (1–7)

Authorization Number 993869 (8–13)

McKesson Chem. Co. (Company Name) | 633 E. 139 St. (Address) | 849-4934 (Phone Number) | 0310690008 (14) (Generator Number) (24)

Dolton (City) | Ill. (State) | (Zip) | ILD005092670 (EPA Number)

WASTE HAULER(S)

Mr. Frank's (Hauler Name) | 201 W. 155 St, South Holland (Hauler Address) | S.W.H. Registration Number 0079029 (25–31)

(Phone Number) | ILD 069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 S. Colfax (Address) | 9180890 2 (39–46) Site Number

Griffith (City) | Ind. (State) | (Zip) | (Phone Number) | IND 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39–46) Site Number

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste 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:

T | 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: 00500 (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 Glen C. White FOR (Authorized Signature) DATE: 8/12-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) ~~DR~~ Don Bult (Authorized Signature) DATE: 08/12/81 (54–59)

(2) ____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 8/12/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 211K T-50 8/12/81 gm

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

001118

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

0511675 (1–7)

Authorization Number 993869 (8–13)

McKESSON CHEM. Co. (Company Name) | 633 E. 128 ST (Address) | 849-1834 (Phone Number) | 03106900086 (14–24 Generator Number)

DOLTON (City) | ILL. (State) | ____ (Zip) | ILD005097670 (EPA Number)

WASTE HAULER(S)

MR. THANKS (Hauler Name) | 201 W 155 St Hollland, Il (Hauler Address) | S.W.H. Registration Number 0079029 (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 CHEM. Co. (Facility Name) | COLFAX (Address) | 9180890 2 (39–46 Site Number)

GRIFFITH (City) | IND (State) | ____ (Zip) | ____ (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 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 N.O.S. | HAZARD CLASS: | UN 1993 (UN or NA Number) | ____ (EPA HW Number)

WEIGHT FOR D.O.T. USE ____ LBS ____ TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 6 05000 (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 Len C. White (Authorized Signature) | DATE 8/12-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) | DATE 08/12/81 (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 8/12/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 203E T-50 8/12/81 JM

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

001119

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0511700 (1–7)

Authorization Number 998869 (8–13)

COMPLETED BY WASTE GENERATOR

McKesson CHEMICAL | 6330 19th ST | 849-4934 | 0310690000 (14–24)
(Company Name) | Address | Phone Number | Generator Number

DANVILLE | IL. | Zip
City | State

ILD 005097170
EPA Number

WASTE HAULER(S)

NL TRANS | 201 W. 155 St South Holland
Hauler Name | Hauler Address

S.W.H. Registration Number 0079009 (25–31)

312-596-3377 | ILD069506160
Phone Number | EPA Number

Hauler Name | Hauler Address

S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL | 420 S. COLFAX | 910803902 (39–46)
(Facility Name) | Address | Site Number

GRIFFITH | IND | ILD 016360265
City | State | Zip | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: SOLVENTS + RESINS WASTE 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 FLAMMABLE LIQUID N.O.S. | UN 1993 (UN or NA Number) | FLAMMABLE 3 (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: 6000 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 8/26-81

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) Tom Berry (Authorized Signature) DATE: 8/26/81 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

_____ (Authorized Signature) DATE: 8/26/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 2102 T-50 8/26/81 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

001120

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

0511685 (1–7)

Authorization Number 995869 (8–13)

McKesson Chemical (Company Name) | 633 E. 135th St. (Address) | 815-1934 (Phone Number) | 0310690008 G (14 Generator Number 24)

Dolton (City) | Ill (State) | (Zip) | ILD005092670 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name) | 201 W 155th Homewood Ill (Hauler Address) | S.W.H. Registration Number 0079009 (25–31)

3125463327 (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 (Address) | 91808902 (39–46 Site Number)

Griffith (City) | IND (State) | (Zip) | (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: Solvents + Resins WASTE 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. | HAZARD CLASS: | UN1993 (UN or NA Number) | F001 F003 (EPA HW Number)

WEIGHT FOR D.O.T. USE ____ LBS ____ TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 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 Dan C. White (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) Donald H Buet (Authorized Signature) DATE: 09 11 81 (54–59)

(2) ____ (Authorized Signature) DATE: ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 9 11 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS To 211K T-50 9/11/81 JAM

IN ILLINOIS: 217 / 782-3637 *24 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

001121

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

0511680 (1–7)

Authorization Number 998869 (8–13)

McKESSON CHEM. CO. (Company Name) | 633 E. 138th. (Address) | 849-4934 (Phone Number) | 0310690008 (14–24 Generator Number)

DOLTON (City) | ILL (State) | Zip | ILD005097670 (EPA Number)

WASTE HAULER(S)

MR. FRANKS (Hauler Name) | 20 W 155 Ehn (Hauler Address) | S. HOLLAND ILL | S.W.H. Registration Number 0079009 (25–31)

3125963377 (Phone Number) | ILD069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. CO (Facility Name) | 420 SOUTH COL FAX (Address) | 91808902 (39–46 Site Number)

GRIFFITH (City) | IND. (State) | Zip | Phone Number | ILD016360265 (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: SOLVENT + RESIN'S | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:		
WASTE FLAMMABLE LIQUID N.O.S		UN9193 (UN or NA Number)	F005 F003 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 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 Don C. White (Authorized Signature) DATE 9/11-81

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 A Buet (Authorized Signature) DATE: 09/11/81 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 9/11/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 210R T-50 9/11/81 JTM

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

001122

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0511688 (1–7)

Authorization Number 998869 (8–13)

TO BE COMPLETED BY WASTE GENERATOR

McKesson CHEM. CO. | 633E. 138 ST. | 849-1934 | 0310690008 (14–24 Generator Number)
(Company Name) | Address | Phone Number

DOLTON | ILL. | | ILD005097670
City | State | Zip | EPA Number

WASTE HAULER(S)

MR. FRANK'S | 201 W 155 SOUTH HOLLAND ILL. | S.W.H. Registration Number 0079029 (25–31)
Hauler Name | Hauler Address

Phone Number | ILD006950160 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 CO. | 4205 COLFAX ST. | 91808902 (39–46 Site Number)
(Facility Name) | Address

GRIFFITH | IND | | | IND 016360265
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: SOLVENT + RESIN'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 | HAZARD CLASS: UN1993 (UN or NA Number) | FCC5+FCC3 (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 Ron C. White (Authorized Signature) DATE: 9/24-81

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 Burt (Authorized Signature) DATE: 09 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:

(Authorized Signature) DATE: 9/24/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 204x T-50 9/24/81 JM

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

001123

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

0511689 (1–7)

Authorization Number 998869 (8–13)

McKesson Chem. Co. (Company Name) | 633 E. 138th (Address) | 814-495-34 (Phone Number) | 0310690008 G (Generator Number 14–24)

Dolton (City) | Ill. (State) | ____ (Zip) | ~~ILD005036296~~ (EPA Number)

WASTE HAULER(S)

Mr. Tanks (Hauler Name) | 901 W 155th South Holland Ill. (Hauler Address) | S.W.H. Registration Number 0079024 (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 Chemco. 4205 Colfax (Facility Name / Address) | 9180890? (Site Number 39–46)

Griffith (City) | Ind. (State) | ____ (Zip) | ____ (Phone Number) | ILD016360265 (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: Solvent + Resin's | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Flammable Liquid N.O.S.		UN1993	F003 + F005

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 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 Kent C. White (Authorized Signature) | DATE 09/30-81

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) Donald H Burt (Authorized Signature) | DATE 09/30/81 (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

T D Mahle (Authorized Signature) | DATE 9/30/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 210 R T-50 9/30/81 gpm.

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

001124

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

0511694 (1–7)

Authorization Number 99E869 (8–13)

McGaw Chem (Company Name) | 622 E 138th (Address) | 849-4850 (Phone Number) | 03106900 (14–22) Generator Number

Dalton (City) | IL (State) | 60419 (Zip) | ILD005097670 (EPA Number)

WASTE HAULER(S)

Mr. Frank's (Hauler Name) | 201 W 155th (Hauler Address) | So. Holland IL | S.W.H. Registration Number 0079009 (25–31)

312-596-3377 (Phone Number) | ILD064150610 (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 Co (Facility Name) | 420 S. Colfax (Address) | 91E0290 (39–46) Site Number

Griffith (City) | IL (State) | (Zip) | 219 768-3400 (Phone Number) | ILD016360765 (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: Solvents & Resins | WASTE 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. | HAZARD CLASS: UN 1993 (UN or NA Number) | F005 + F003 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 00500 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 _____ (Authorized Signature) DATE: 10/17-21

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 10/21/81 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 10/21/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 210 X T-50 10/21/81 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

001125

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

10
MANIFEST DOCUMENT NUMBER

IND005447776
SHIPPER NUMBER

Thomas Solvent Company
NAME OF CARRIER (SCAC)

MID039993902
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND005447776	Marklon Industries Inc., 200 Bond St., Wabash, IN 46992	
TRANSPORTER # 1	MID039993902	Thomas Solvent Company, 5605 Planeview Dr. Fort Wayne, IN 46825	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service, 420 S. Colfax Griffith, IN 46319	
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 ~~9~~ drums		F003	Waste Thinning Compound	N/A		-4°C	55gal.	275 ~~495~~ 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 4/14/81

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE _____ TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE _____ DATE 4/14/81

To 124E 4/14/81 T-63 97m

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

001126

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

11
MANIFEST DOCUMENT NUMBER

IND005447776
SHIPPER NUMBER

Thomas Solvent Company
NAME OF CARRIER (SCAC)

MID039993902
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND005447776	MarkHon Industries Inc., 200 Bond St., Wabash, IN 46992	
TRANSPORTER # 1	MID039993902	Thomas Solvent Company, 5605 Planeview Dr. Fort Wayne, IN 46825	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service, 420 Colfax Griffith, IN 46319	6/3/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
11 drums	XXX	F003	Waste Thinning Compound	N/A	11	-4°C	55gal	605 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 Lynn Schaefer DATE 6-3-81

5

To 242 T-63 6/3/81 8:00

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

001127

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filling or record.

MANIFEST DOCUMENT NUMBER: 3

TO: T/S/D/F Advanced Chemical	FROM: Generator Grabill Cabinet Co. Inc
E.P.A. ID Code No. IND [illegible]	E.P.A. ID Code No. IND [illegible]
Address [illegible]	Address P.O. Box 40
Destination Smith, IND 46517	Origin Grabill IND 46741
Phone 219-424-4310	Phone 219 627 2141

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	55 Gal Drum			F003		
	Waste Paint Thinning					
	Compound	Flammable Liquid			550	gal

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D/F _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency.

Generator Signature Grabill Cabinet Co. Inc Date [illegible]

TRANSPORTER #1 [illegible] E.P.A. ID No. [illegible]
Address [illegible]
City [illegible] State IN Zip [illegible] Phone [illegible]

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL/FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D/F Signature Jennifer Carlisle Date 6-3-81

HAZARDOUS WASTE

HAZARDOUS WASTE

COPY

001128

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT

001

TO:	FROM:
T/S/D FACILITY [illegible]	Generator GARNET TUBULAR
E.P.A. ID Code No. [illegible]	E.P.A. ID Code No. N/A
Address [illegible]	Address 802 S. King Street
Destination [illegible]	Origin [illegible] 46720
Phone [illegible]	Phone 219-357-4161

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
10	Waste Xylene	Flammable Liquid		U-239	[illegible]	Flammable Liquid

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

$_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____
(Signature of Consignor)

FREIGHT CHARGES
PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature [signature] Date 5/24/91

TRANSPORTER #1 [illegible] E.P.A. ID No. [illegible]
Address [illegible]
City [illegible] State [illegible] Zip [illegible] Phone [illegible]

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature [signature] Date [illegible]

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature [signature] Date 6-7-91

HAZARDOUS WASTE

HAZARDOUS WASTE

COPY

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

12
MANIFEST DOCUMENT NUMBER

IND005447776
SHIPPER NUMBER

Thomas Solvent Company
NAME OF CARRIER (SCAC)

MID039993902
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND005447776	MarkHon Industries Inc., 200 Bond St., Wabash, IN 46992	
TRANSPORTER # 1	MID039993902	Thomas Solvent Company, 5605 Planeview Dr. Fort Wayne, IN 46825	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service, 420 Colfax Griffith, IN 46319	
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)
17 drums		F003	Waste Thinning Compound	N/A	16	-4°C	55gal	825 gals.		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID (except when box at right is checked) ☐ Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges
_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE _____ DATE 9-25-81

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE _____ TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE _____ DATE _____

5

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TSDF COPY To 126 T-C3 10/8/81 JPM

001130

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

6
MANIFEST DOCUMENT NUMBER

IND005447776
SHIPPER NUMBER

Thomas Solvent Company
NAME OF CARRIER (SCAC)

MID039993902
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND005447776	Markhon Industries Inc., 200 Bond St., Wabash, ~~IN~~ 46992	2/23/81
TRANSPORTER # 1	MID039993902	Thomas Solvent Company, 5605 Planeview Dr. Fort Wayne, IN 46825	2/23/81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service, 420 S. Colfax ~~Griffith, IN 46319~~	3/1/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
~~5~~ drums 10		F003	Waste Thinning Compound	N/A	~~5~~ 10	-4°C	55 gal.	~~275~~ gal. 550		

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.

_____ 03-11-81
TSDF SIGNATURE DATE

Pump(a) to 125E 3/11/81 T-63 Jim Murphy

5

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TSDF COPY

001131

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

2
MANIFEST DOCUMENT NUMBER

IND005447776
SHIPPER NUMBER

Thomas Solvent Company
NAME OF CARRIER (SCAC)

MID039993902
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND005447776	MarkHon Industries Inc., 200 Bond St., Wabash, IN 46992	12/16/80
TRANSPORTER # 1	MID039993902	Thomas Solvent Company, 5605 Planeview Dr. Fort Wayne, IN 46825	12/16/80
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service, 420 S. Colfax, Griffith, IN 46319	1/9/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
11 drums		F003	Waste Thinning Compound	N/A	11	-4°C	55gal	605 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 1/9/81

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

~~TRANSPORTER~~ #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE _____ DATE 1/9/81

UNLOADED AT DOCK 1/9/81 - PUMPED TO 124R 1/12/81 T-63 Ann Murphy

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

001132

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0144417

WASTE GENERATOR

Authorization Number 997188

M&D FLEXOGRAPHIC PRINTERS, INC. 7600 W. 83rd. Pl.
(Company Name) Address

0316000342 G
Generator Number

Chicago, Illinois 60652
City State Zip

WASTE HAULER(S)

(1) American Chemical Service Inc. P.O. Box 190
Hauler Name Hauler Address

S.W.H. Registration Number 0034001

(2) STRAND TRUCKING Griffith, Ind. CRESTWOOD ILT000646810
Hauler Name Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service P.O. Box 190 91808902
(Facility Name) Address Site Number

Griffith, Indiana
City State Zip

TNO016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: ~~Flammable~~ INK SOLVENT

HAZARD CLASS: ~~None~~ FLAMMABL

Quanity of waste 275 gallons

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11-26-80 F003 William J. Ward
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 00375 (1 GALLONS / 2 CU. YDS.) (Circle One)

METHOD OF SHIPMENT (Circle One) 5 (DRUMS) TANK TRUCK OPEN TRUCK (OTHER) VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) William J. Sylvester
(Authorized Signature) DATE: 11 26 80

(2) _____
(Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Michael O'Brien
(Authorized Signature) DATE: 11-26-80

COMMENTS OR SPECIAL INSTRUCTIONS: Unloaded on Dock 12-1-80 - pumped into TTC 12-4

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

001133

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0144418 (1–7)

Authorization Number 997188 (8–13)

M&D Flexographic Printers, Inc. (Company Name) 3600 W. 83rd. Pl. (Address)
Chicago, Illinois (City) (State) 60652 (Zip)

0316000342 G (14–24) 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 (25–31)

(2) STRAND TRUCKING (Hauler Name) CRESTWOOD (Hauler Address)
S.W.H. Registration Number ILT 000646810 (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) P.O. Box 190 (Address)
Griffith, (City) Indiana (State) (Zip)
9180890 2 (39–46) Site Number
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Ink Solvent
HAZARD CLASS: Flammable

Quanity of waste gallons

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: 2-17-81 per William J. Ward (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 000715 (47–52) (1 GALLONS / 2 CU. YDS.) (Circle One) (53)

METHOD OF SHIPMENT (Circle One) (13) 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: 02/17/81 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[signature] (Authorized Signature) DATE: 2/19/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 2/19/81 UNLOADED 2/19/81
PLANNED TO 142E 2/23/81 T-63 Jim Murphy.

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001134

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

0350349

Authorization Number 9 9 7 1 8 9 (8–13)

M&D FLEXOGRAPHIC PRINTERS, INC. (Company Name) | 3600 West 83rd. Place (Address)

Chicago, Illinois (City) | (State) | 60652 (Zip)

0 3 1 6 0 0 0 3 4 2 (6) (14–24) Generator Number

WASTE HAULER(S)

AMerican Chemical Service (Hauler Name) | P.O. Box 190 (Hauler Address)

S.W.H. Registration Number 0 0 2 4 0 0 1 (25–31)

STRODT PICKING CO (Hauler Name) | CRESTWOOD, IL (Hauler Address)

ILT 0006462 10

S.W.H. Registration Number 0 0 2 4 0 0 1 (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | P.O. Box 190 (Address)

9 1 8 0 8 9 0 2 (39–46) Site Number

Griffith, (City) | Indiana (State) | (Zip)

IND 016360765

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Ink Solvent	Flammable	450 (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 4 9 5 (47–52)

1 GALLONS (Circle One)
2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) 9 DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) VDN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-26-81 William J. Ward (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) William J. Defuente (Authorized Signature) DATE: 03-26-81 (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:

Michael C. Dunn (Authorized Signature) DATE: 3/27/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 3/27/81
PUMPED TO 712E 4/2/81 T-63 JJM

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001135

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0350350

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 9971881

M&D FLEXOGRAPHIC PRINTER, INC. (Company Name) 3600 W. 83rd. Pl. (Address)

Chicago, Illinois (City) _____ (State) 60652 (Zip)

03160003420 Generator Number

ILD 005-096-045

WASTE HAULER(S)

American Chemical Service (Hauler Name) P.O. Box 190 (Hauler Address)

S.W.H. Registration Number 0024001

Stl. and Muddy 1364 x KENTON WEST Wood IL (Hauler Name / Hauler Address)

ILT 0006468 10 S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) P.O. Box 190 (Address)

9180890 2 Site Number

Griffith, (City) Indiana (State) _____ (Zip)

IND 016 360 265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE	LBS TONS (circle one)
Ink Solvent	Flammable		

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0000935

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) 17 DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/9/81 Edward D. Miller (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 7/9/81

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 7/9/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 7/9/81 - TO 112X T-63 7/14/81 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

001136

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0350351

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 9 9 7 1 8 8

M & D FLEXOGRAPHIC PRINTERS, INC. (Company Name) 3600 W. 83rd Pl. (Address)

Chicago, (City) Illinois (State) 60652 (Zip)

0 3 1 6 0 0 0 3 4 2 G (Generator Number)

I L D 000646810

WASTE HAULER(S)

American Chemical Service (Hauler Name) P.O. BOX 190 (Hauler Address) S.W.H. Registration Number 0 0 2 4 0 0 8

STRAND TRUCKING (Hauler Name) CROSTWOOD ILL (Hauler Address) ILD000646810 S.W.H. Registration Number 0 3 1 1

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) Ind. (State) (Zip)

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE	LBS / TONS (circle one)
Ink Solvent	Flammable		

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 001100 (1) GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) 20 (DRUMS) TANK TRUCK OPEN TRUCK (OTHER) (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9/28/81 William J Ward (Authorized Signature) KOS

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) James Batt (Authorized Signature) DATE: 9 28 81

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 9/29/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 9/28/81
TO 112R T-63 10/13/81 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

001137

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

0350352

Authorization Number 907108

M&D Flexographic Printers, Inc. (Company Name) 3600 W. 83rd. Pl. (Address)

Chicago, (City) Illinois (State) 60652 (Zip)

0316000342 (Generator Number)

WASTE HAULER(S)

Landgrebe Motor Iport. (Hauler Name) 3009 S. Shields (Hauler Address)

EPA IND (S.W.H. Registration Number) 009849824

ICC 2980

(Hauler Name) (Hauler Address) (S.W.H. Registration Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) PO Box 190 Griffith, Ind. (Address)

9180890 2 (Site Number)

Griffith, (City) Indiana (State) (Zip)

IND016360765

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Ink Solvent	Flammable	10,625 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 001375 (47–52) (1) GALLONS (Circle One) / 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: Dec. 29, 1981 William J. Ward (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE: 12/29/81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 12/30/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

TO 112R T-63 ERM 12/30/81

SITE COPY - PART 3

001138

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0343030

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997144

3M COMPANY (Company Name) | 6850 SOUTH HARLEM AVENUE (Address)

BEDFORD PARK, ARGO, (City) | ILLINOIS (State) | 60501 (Zip)

ILD-066226133

0310060007 (Generator Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH STREET (Hauler Address)

S.W.H. Registration Number 0079023

S. HOLLAND, ILLINOIS (Hauler Address)

ILD066956160

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | P. O. BOX 190 (Address)

GRIFFITH (City) | GRIFFITH, INDIANA (State) | 46319 (Zip)

91808902 (Site Number)

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID NOS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE LIQUID NOS

HAZARD CLASS: 2-3-0

WEIGHT FOR D.O.T. USE 40000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 00500 00

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS XX TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-27-81 2-3-0 (Authorized Signature) J. E. MATT, SAFETY & SECURITY SUPV.

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: 01 27 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: 01 27 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 1435 1/27/81 T-63 Jim Murphy

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001139

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

0343020

Authorization Number 997144

3M COMPANY (Company Name) | 6850 S. HARLEM AVE. (Address)

ILD-006220123

BEDFORD PARK, ARGO, (City) | ILLINOIS (State) | 60501 (Zip)

03100600076 Generator Number

MR. FRANK (Hauler Name) | 201 W. 155TH STREET (Hauler Address) — WASTE HAULER(S)

S.W.H. Registration Number 00790[illegible]

S. HOLLAND, ILLINOIS (Hauler Address)

ILD-069506160

Hauler Name | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | P. O. BOX 190 (Address)

91808902 Site Number

GRIFFITH, (City) | INDIANA (State) | 46319 (Zip)

IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID NOS

WASTE PHASE: LIQUID (Liquid, Gascous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
FLAMMABLE LIQUID NOS	2-3-0
	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: 00[illegible]00

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS XXX 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: 2-18-81

J.E.MATT, SAFETY & SECURITY SUPV.
(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: 02/18/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO_____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 02/18/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 143E 2/18/81 T-63 Jim Murphy

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001140

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

0343027

Authorization Number 997144

3M COMPANY (Company Name) | 6850 S. HARLEM AVENUE (Address)

ILD-006220123

BEDFORD PARK, ARGO, (City) | ILLINOIS (State) | 60501 (Zip)

0 3 1 0 0 6 0 0 0 7 G
Generator Number

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH STREET (Hauler Address)

S.W.H. Registration Number 0 0 7 9 0 2 3

ILD-069506160

(Hauler Name) | SOUTH HOLLAND, IL. (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)

IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABEE LIQUID NOS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

UN- 1993

SHIPPING DESCRIPTION: FLAMMABLE LIQUID NOS

HAZARD CLASS: 2-3-0

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 ~~XXX~~ 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: 3-10-81 F95 J.E.MATT, SAFETY & SECURITY SUPV. (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: 03/10/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 03/10/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125R 3/10/81 T-63

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001141

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

0343025

Authorization Number 997144
ILD-006220123

3M COMPANY (Company Name) | 6850 SOUTH HARLEM AVENUE (Address)
BEDFORD PARK, ARGO, (City) | ILLINOIS (State) | 60501 (Zip)
031 00 6000 7 G (Generator Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH STREET (Hauler Address)
S.W.H. Registration Number 00 79 009
ILD-069506160

(Hauler Name) | S. HOLLAND, ILLINOIS (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)
918 08 902 (Site Number)
IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID NOS
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
FLAMMABLE LIQUID NOS	2-3-0	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 | XXX TANK TRUCK | OPEN TRUCK | OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-2-81

J.E. MATT, SAFETY & SECURITY SUPV. (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 04/02/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 4-7-81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125E T-63 4/2/81 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

001142

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0343026

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997144

3M COMPANY (Company Name)	6850 S. HARLEM AVE. (Address)		ILD-006220123
BEDFORD PARK, ARGO, (City)	ILLINOIS (State)	60501 (Zip)	031006000 7 (Generator Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name)	201 W. 155TH STREET (Hauler Address)	S.W.H. Registration Number 0079023
		ILD-069506160
(Hauler Name)	S. HOLLAND, ILLINOIS (Hauler Address)	S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name)	P.O. BOX 190 (Address)		91808902 (Site Number)
GRIFFITH (City)	INDIANA (State)	46319 (Zip)	IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID NOS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE	LBS / TONS (circle one)
FLAMMABLE LIQUID NOS	2-3-0		

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 XX TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-19-81 J.E. MATT, SAFETY & SECURITY SUPV. (Authorized Signature)

HAULER

I CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS

(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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 3/19/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 124K T-63 3/19/81 Jim Murphy

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001143

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0343018

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number: 997144

3M COMPANY	6850 SOUTH HARLEM AVENUE	ILD-006220123
(Company Name)	Address	
BEDFORD PARK, ARGO,	ILLINOIS 60501	0310006000 7G
City	State Zip	Generator Number

WASTE HAULER(S)

MR. FRANK	201 W. 155TH STREET	S.W.H. Registration Number 0079009
Hauler Name	Hauler Address	SOUTH HOLLAND, ILLINOIS
		ILD-069506160
Hauler Name	Hauler Address	S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE	P. O. BOX 190	91808902
(Facility Name)	Address	Site Number
GRIFFITH	INDIANA 46319	IND-016360265
City	State Zip	

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID (NOS)

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)
FLAMMABLE LIQUID (NOS)	FLAMMABLE 2-3-0	

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

GALLONS / 2 CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS XXX 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

UN 1993

DATE: 5-6-81

J. E. MATT, SAFETY & SECURITY SUPV.
(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) _____ DATE: 05 06 81
(Authorized Signature)

(2) _____ DATE: / /
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ DATE: 5/6/81
(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 12TR 5/6/81 T-63 9 2PM

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

001144

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0343024

TO BE COMPLETED BY WASTE GENERATOR

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 7 1 4 4
ILD-006220123

3M COMPANY	6850 SOUTH HARLEM AVENUE	
(Company Name)	Address	
BEDFORD PARK, ARGO,	ILLINOIS	60501
City	State	Zip

0 3 1 0 0 6 0 0 0 7 G
Generator Number

WASTE HAULER(S)

MR. FRANK	201 W. 155TH STREET	S.W.H. Registration Number 0 0 7 9 0 0 9
Hauler Name	Hauler Address	
	S. HOLLAND, ILLINOIS	ILD-069506160
Hauler Name	Hauler Address	S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE	P. O. BOX 190	9 1 8 0 8 9 0 2
(Facility Name)	Address	Site Number
GRIFFITH	INDIANA 46319	IND-016360265
City	State Zip	

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID NOS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE	
FLAMMABLE LIQUID NOS	~~FLAMMABLE~~		LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0

1 GALLONS 2 CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS XXX TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-13-81 J.E.MATT, SAFETY & SECURITY SUPV. (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 04 / 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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 4 13 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125K T-63 #1.13/81 gjm

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001145

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0343017

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997144

3M COMPANY	6850 SOUTH HARLEM AVENUE	ILD-006220123
(Company Name)	Address	
BEDFORD PARK, ARGO	ILLINOIS 60501	031006000 7G
City	State Zip	Generator Number

WASTE HAULER(S)

MR. FRANK	201 W. 155TH STREET	S.W.H. Registration Number 0079623
Hauler Name	Hauler Address	SOUTH HOLLAND, ILLINOIS ILD-069506160
		S.W.H. Registration Number
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	IND-016360265
City	State Zip	

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID NOS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)
FLAMMABLE LIQUID NOS	FLAMMABLE 2 - 3 - 0	

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 XXX 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: 5-12-81 J.E. MATT, SAFETY & SECURITY SUPV. (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: 05/12/81

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 05/12/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125X T-63 5/12/81

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

001146

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0343016

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997144

3M COMPANY (Company Name) | 6850 S. HARLEM AVE. (Address) | ILD-006220123

BEDFORD PARK, ARGO, (City) | ILLINOIS (State) | 60501 (Zip)

0510060007G (Generator Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079029

SOUTH HOLLAND, ILLINOIS | ILD-069506160

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | P. O. BOX 190 (Address) | 91808902 (Site Number)

GRIFFITH, (City) | INDIANA (State) | 46319 (Zip) | IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID NOS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
FLAMMABLE LIQUID NOS	FLAMMABLE 2-3-0

WEIGHT FOR D.O.T. USE 38,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
2 CU. YDS: 1

METHOD OF SHIPMENT (Circle One): DRUMS XXX 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: 5-18-81

J.E. MATT, SAFETY & SECURITY SUPV. (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Robert R. Robinson (Authorized Signature) DATE: 05/18/81

(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 5/19/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125X T-63 5/18/81 gjm

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001147

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0343023

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997144
ILD-006220123

3M COMPANY	6850 SOUTH HARLEM AVENUE	
(Company Name)	Address	
BEDFORD PRK, ARGO, ILLINOIS	ILLINOIS	60501
City	State	Zip

0 3 1 0 0 6 0 0 0 7 G
Generator Number

WASTE HAULER(S)

MR. FRANK	201 W. 155TH STREET	S.W.H. Registration Number 0 0 7 9 0 2 1
Hauler Name	Hauler Address	
	S. HOLLAND, ILLINOIS	ILD-069506160
Hauler Name	Hauler Address	S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE	P. O. BOX 190	9 1 8 0 8 9 0 2
(Facility Name)	Address	Site Number
GRIFFITH, INDIANA	INDIANA 46319	IND 010360265
City	State Zip	

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID NOS.

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	
FLAMMABLE LIQUID NOS	FLAMMABLE 2-3-0	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 6 0 5 0 0

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS XXXX 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 J E MATT

DATE: 4-21-81 J.E.MATT, SAFETY & SECURITY SUPV.
(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) _____ DATE: 0 4 / 2 1 / 8 1
(Authorized Signature)

(2) _____ DATE: ___ / ___ / ___
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ DATE: 4/21/81
ized Signature)

UCTIONS: TO 125R T-63 4/21/81 JPM

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS OUTSIDE ILLINOIS: 800 / 424-8802

OR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001148

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0343020

Authorization Number 9 9 7 1 4 4
ILD-006220123

0 3 1 0 0 6 0 0 0 7 G
Generator Number

TO BE COMPLETED BY WASTE GENERATOR

3M COMPANY — (Company Name)
6850 SOUTH HARLEM AVENUE — Address
BEDFORD PARK, ARGO, — City
ILLINOIS — State
60501 — Zip

WASTE HAULER(S)

MR. FRANK — Hauler Name
201 WEST 155TH STREET — Hauler Address
S. HOLLAND, ILLINOIS
S.W.H. Registration Number 0 0 7 9 0 2 1
ILD-069506160

Hauler Name
Hauler Address
S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE — (Facility Name)
P. O. BOX 190 — Address
9 1 8 0 8 9 0 2
Site Number
GRIFFITH, INDIANA — City
INDIANA — State
46319 — Zip
IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID (NOS.)
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
FLAMMABLE LIQUID NOS.	FLAMMABLE
	2-3-0

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 5 0 0

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS XXX TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-27-81

J.E.MATT, SAFETY & SECURITY SUPV.
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) _____ (Authorized Signature) DATE: 04 27 81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 4/27/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 124 R 4/27/81 T-63 97M

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

001149

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

0343019
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 7 1 4 4 (8–13)
ILD-006220123

3M COMPANY (Company Name) | 6850 SOUTH HARLEM AVENUE (Address)

BEDFORD PARK, ARGO (City) | ILLINOIS (State) | 60501 (Zip)

0 3 1 0 0 6 0 0 0 7 G (14 – Generator Number – 24)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH STREET (Hauler Address) | SOUTH HOLLAND, ILLINOIS

S.W.H. Registration Number 0 0 7 9 0 0 9 (25–31)
ILD-069506160

Hauler Name | Hauler Address

S.W.H. Registration Number (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE P. O. BOX-190 (Facility Name) | Address

9 1 8 0 8 9 0 2 (39–46) Site Number

GRIFFITH, INDIANA (City) | INDIANA (State) | 46319 (Zip)

IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID (NOS)

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
FLAMMABLE LIQUID (NOS)	FLAMMABLE
	2-3-0

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 XXX 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: 5-1-81

J.E. Matt

J.E.MATT, SAFETY & SECURITY SUPV. (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: 0 5 0 1 8 1 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 5 1 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 124E 5/1/81 T-63 JTM

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001150

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

0343015

Authorization Number 997144

3M COMPANY (Company Name) | 6850 S. HARLEM AVE. (Address) | ILD-006220123

BEDFORD PARK, ARGO, (City) | ILLINOIS (State) | 60501 (Zip)

03100600007G Generator Number

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | S.W.H. Registration Number 007902

SOUTH HOLLAND, ILLINOIS | ILD-069506160

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | P. O. BOX 190 (Address) | 91808902 Site Number

GRIFFITH, (City) | INDIANA (State) | 46319 (Zip) | IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID NOS

WASTE PHASE: LIQUID (Liquid, Gascous, Solid)

1995

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
FLAMMABLE LIQUID NOS	FLAMMABLE 2 - 3 - 0

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 (XXX TANK TRUCK) OPEN TRUCK OTHER (Specify)_____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-17-81

J.E.MATT, SAFETY & SECURITY SUPV. (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) C Bonecki (Authorized Signature) DATE: 06/17/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE 6/17/81

COMMENTS OR SPECIAL INSTRUCTIONS: J. Mueller TO 1272 6/22/81 T-63 JM

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001151

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0343014

Authorization Number 9 9 7 1 4 4

TO BE COMPLETED BY WASTE GENERATOR

3M COMPANY (Company Name) | 6850 S. HARLEM AVE. (Address) | ILD-006220123

BEDFORD PARK, ARGO, (City) | ILLINOIS (State) | 60501 (Zip)

0 3 1 0 0 6 0 0 0 7 G (Generator Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 2 1

S. HOLLAND, ILLINOIS | ILD-069506160

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | P. O. BOX 190 (Address) | 9 1 8 0 8 9 0 2 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID NOS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
FLAMMABLE LIQUID NOS	FLAMMABLE 2 - 3 - 0	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 5 5 0 0

1 GALLONS (Circle One) / 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS XX 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: 6-29-81

J.E.MATT, SAFETY & SECURITY SUPV. (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: 06/29/81

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 06/29/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 126R T-63 6/29/81 gpm

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001152

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

0343012

Authorization Number 9 9 7 1 4 4

3M COMPANY (Company Name)	6850 SOUTH HARLEM AVENUE (Address)	ILD-006220123
BEDFORD PARK, ARGO, (City)	ILLINOIS (State) 60501 (Zip)	0 3 1 0 0 6 0 0 0 7 G Generator Number

WASTE HAULER(S)

MR. FRANK (Hauler Name)	201 W. 155TH STREET (Hauler Address)	S.W.H. Registration Number 0 0 7 9 0 1 7
	S. HOLLAND, ILLINOIS	ILD-0 619 5 0 6 1 6 0
(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)	IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID NOS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE ____ LBS ____ TONS (circle one)
FLAMMABLE LIQUID NOS	FLAMMABLE 2-3-6	

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 XXX 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: 7-23-81

J.E.MATT, SAFETY & SECURITY SUPV.
(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: 0 7/ 2 3/ 8 1 (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: 07/23/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: 4 to 12SR T-63 7/23/81 JJM

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001153

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

0343011 (1–7)

Authorization Number 9 9 7 1 4 4 (8–13)

3M COMPANY (Company Name) | 6850 SOUTH HARLEM AVENUE (Address) | ILD-006220123

BEDFORD PARK, ARGO, (City) | ILLINOIS (State) | 60501 (Zip)

0 3 1 0 0 6 0 0 0 7 G (14–24 Generator Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH STREET (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 2 5 (25–31)

S. HOLLAND, ILLINOIS | ILD-619506160

(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 (Address) | 9 1 8 0 8 9 0 2 (39–46 Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID NOS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
FLAMMABLE LIQUID NOS	FLAMMABLE 2-3-0

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)

GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS XX TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-7-81

J.E.MATT, SAFETY & SECURITY SUPV. (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: 0 8 0 7 8 1 (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: 8/7/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: PO 125R T-63 8/7/81 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

001154

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

0343010

Authorization Number 997144

3M COMPANY (Company Name) | 6850 SOUTH HARLEM AVENUE (Address)

ILD-006220123

BEDFORD PARK, ARGO, ILLINOIS (City) | ILLINOIS (State) | 60501 (Zip)

0 3 1 0 0 6 0 0 0 7 G — Generator Number

WASTE HAULER(S)

MR. FRANK (Hauler Name) | ~~201~~ W. 155TH STREET (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 1 9

S. HOLLAND, ILLINOIS | ILD-619506160

(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) | IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID NOS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

UN# 1993
NA# 1993
D001

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE LIQUID NOS | HAZARD CLASS: FLAMMABLE 2 - 3 - 0 | 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 (XX) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-28-81 | J.E.MATT, SAFETY & SECURITY SUPV. (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: 0 8 2 8 8 1

(2) _____ (Authorized Signature) | DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) | DATE: 8/28/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 126R T-63 8/28/81 gpm

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001155

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

0343009

Authorization Number 997144

3M COMPANY	6850 SOUTH HARLEM AVENUE	ILD-006220123
(Company Name)	Address	
BEDFORD PARK, ARGO,	ILLINOIS 60501	03100600007G
City	State Zip	Generator Number

WASTE HAULER(S)

MR. FRANK	201 W. 155TH STREET	S.W.H. Registration Number 0079009
Hauler Name	Hauler Address	
	S. HOLLAND, ILLINOIS	IDL-619506160
Hauler Name	Hauler Address	S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE	P. O. BOX 190	IND- 918089028
(Facility Name)	Address	Site Number
GRIFFITH	INDIANA 46319	016360265
City	State Zip	

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID NOS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

UN# 1993
NA# 1993 D001

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)
FLAMMABLE LIQUID NOS	FLAMMABLE 2-3-0		

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 00 4500 (~~0 0 5 0 0 0~~) (1 GALLONS / 2 CU. YDS. (Circle One)) 1

METHOD OF SHIPMENT (Circle One) DRUMS (XX) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9-21-81 J.E.MATT, SAFETY & SECURITY SUPV. (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Donald H Ball (Authorized Signature) DATE: 09/21/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 9/21/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 126TK T-63 9/21/81 gpm

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001156

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0343008

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 9 9 7 1 4 4

3M COMPANY (Company Name) | 6850 SOUTH HARLEM AVENUE (Address) | IDL-006220123

BEDFORD PARK, ARGO (City) | ILLINOIS (State) | 60501 (Zip)

0 3 1 0 0 6 0 0 0 7 G (Generator Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH STREET (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 2 1

S. HOLLAND, ILLINOIS | IDD-619506160

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN C HEMICAL SERVICE (Facility Name) | P. O. BOX 190 (Address) | 9 1 8 0 8 9 0 2 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID NOS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

UN# - 1993

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: NA# - 1993

SHIPPING DESCRIPTION:	HAZARD CLASS:	
FLAMMABLE LIQUID NOS	FLAMMABLE 2-3-0	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: 005500

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS XX 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 J.E.MATT

DATE: 10-5-81

J.E.MATT, SAFETY & SECURITY SUPV. (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: 10/05/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 10/5/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 124E T-63 . 10/5/81 JEM

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

001157

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0334034

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 99714 4

3M COMPANY (Company Name) | 6850 SOUTH HARLEM AVENUE (Address) | ILD-006220123

BEDFORD PARK, ARGO (City) | ILLINOIS (State) 60501 (Zip) | 0 3 1 0 0 6 0 0 0 7 G (Generator Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH STREET (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 9

S. HOLLAND, ILLINOIS | ILD-619506160

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) | IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID NOS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

UN#-1993
NA#-1993

SHIPPING DESCRIPTION:	HAZARD CLASS:	
FLAMMABLE LIQUID NOS	FLAMMABLE 2-3-0	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: 0 0 5 0 0 0

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-16-81

J.E.MATT, SAFETY & SECURITY SUPV. (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: 10/16/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO_____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 10/16/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 1252 T-63 10/16/81 JJM.

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001158

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

0334029

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 7 1 4 4

3M COMPANY (Company Name) | 6850 S. HARLEM AVENUE (Address) | ILD-006220123

BEDFORD PARK, ARGO, (City) | ILLINOIS (State) | 60501 (Zip)

0 3 1 0 0 6 0 0 0 7 G (Generator Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH STREET (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 7

S. HOLLAND, ILLINOIS | IDL-619506160

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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) | IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID NOS

WASTE PHASE: LIQUID (Liquid, Gascous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
FLAMMABLE LIQUID NOS	FLAMMABLE 2-3-0	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 20,000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS XX TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-30-81

J.E.MATT, SAFETY & SECURITY SUPV. (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: 10/30/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: ___/___/___

COMMENTS OR SPECIAL INSTRUCTIONS: To 211x T-50 10/30/81 JEM

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

001159

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

0334030

Authorization Number 9 9 7 1 4 4 (8–13)

3M COMPANY (Company Name) | 6850 SOUTH HARLEM AVENUE (Address) | ILD-006220123

BEDFORD PARK, ARGO, (City) | ILLINOIS (State) | 60501 (Zip)

0 3 1 0 0 6 0 0 0 7 G (14 – Generator Number – 24)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH STREET (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 9 (25–31)

S. HOLLAND, ILLINOIS | ILD-619506160

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 (Address) | 9 1 8 0 8 9 0 2 (39 – Site Number – 46)

GRIFFITH, (City) | INDIANA (State) | 46319 (Zip) | IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID NOS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

UN# 1993
NA# 1993

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: D001

SHIPPING DESCRIPTION: FLAMMABLE LIQUID NOS. | HAZARD CLASS: FLAMMABLE 2-3-0 | 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: 005,000 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS XXX 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: 10-27-81 | J.E.MATT (Authorized Signature) | J.E.MATT, SAFETY & SECURITY SUPV.

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: 10 / 27 / 81 (54–59)

(2) _____ (Authorized Signature) DATE: ___ / ___ / ___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

D. Dufee (Authorized Signature) DATE: 10/27/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 142R T-63 10/27/81 gmm

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

001160

Hazardous Waste Manifest/Bill of Lading (Type Only)

Memorandum

Manifest No. 01447

Reference Manifest Number and submit Prepaid Freight Bill to Generator At

Received, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said company (the word company 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 own road or its own water line, 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 of said property, that every service to be performed hereunder shall be subject to all the conditions not prohibited by law, whether printed or written, herein contained, including the conditions on back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns.

	Name	Address	Phone	I.D. Number
Generator	3M	KNOXVILLE, IA	515-828-7000	E.P.A. IAD075846824 State
Transporter #1	MR. FRANK	S. HOLLAND, IL		E.P.A. ILD069506160 State
Transporter #2				E.P.A. State
Treatment/Storage/Disposal Facility	AMERICAN CHEMICAL SER	GRIFFITH, IN		E.P.A. IND016360265 State

Packages No.	Packages Kind	H.M.	DOT Proper Shipping Name — Hazard Class — UN/NA Number — Description	Waste Code	Hazardous Waste Characteristics
1	TT	X	WASTE FLAMMABLE LIQUID, NOS*FLAMMABLE LIQUID, UN 1993	D001	XX Ignitable ☐ Corrosive ☐ Reactive ☐ E.P. Toxic ☐ Listed ☐ Other
			5000 GAL		☐ Ignitable ☐ Corrosive ☐ Reactive ☐ E.P. Toxic ☐ Listed ☐ Other
			7U676690 35000 LBS.		☐ Ignitable ☐ Corrosive ☐ Reactive ☐ E.P. Toxic ☐ Listed ☐ Other
					☐ Ignitable ☐ Corrosive ☐ Reactive ☐ E.P. Toxic ☐ Listed ☐ Other
					☐ Ignitable ☐ Corrosive ☐ Reactive ☐ E.P. Toxic ☐ Listed ☐ Other
					☐ Ignitable ☐ Corrosive ☐ Reactive ☐ E.P. Toxic ☐ Listed ☐ Other

Generator Certification: This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and E.P.A.

D.K. [illegible] — Signature | TRAFFIC ANALYST — Title | 12/8/81 — Date

Transporter Certification: I hereby certify that I am an authorized representative of the above named transporter and that the waste(s) and quantity herein described have been accepted in good order for delivery to the above named TSDF.

[illegible] — Transporter #1 Signature | [illegible] — Title | 12-8-81 — Date

Transporter #2 Signature | Title | Date

TSD Facility Certification: I hereby certify that I am an authorized representative of the above named TSDF and that the waste(s) and quantity herein described have been received.

[illegible] — Signature | Unloader — Title | 12/9/81 — Date

For Accident and Spill Emergencies Call:
3M 612-733-6100
National Response Center 800-424-8802

Generator Comments / Special Instructions

Form 21074 White (original) - Generator Retain Green - TSD Facility Return to Generator/Generator Retain Canary - TSD Facility Retain, or to State Agency if Required
Pink - TSD Facility Retain Goldenrod - Transporter #2 Retain White - Transporter #1 Retain To 210 R. T-5A GEN 12/9/81 3M "Action" 200 Paper

001161

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0165875
1 7

Authorization Number 997253
8 13

LUDWIG INDUSTRIES (Company Name) | 1728 N DAMEN AVE (Address)

CHICAGO (City) | ILL (State) | 60647 (Zip)

0316000371 (14) Generator Number (24)

ILD005125558

WASTE HAULER(S)

(1) AMERICAN CHEMICAL c/o (Hauler Name) | 420 SO COLFAX AVE (Hauler Address)

S.W.H. Registration Number 0024002 (25 31)

IND016260265

(2) STRAUD TRUCKING (Hauler Name) | 12642 S KENTON. CRESTWOOD (Hauler Address)

S.W.H. Registration Number ILT000644910 (32 38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 So. COLFAX AVE (Address)

91808902 (39 46) Site Number

GRIFFITH (City) | IND (State) | (Zip)

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: CHLORINATED SOLVENTS

WASTE PHASE: SEMI - SOLID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: | HAZARD CLASS:

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: 5/7/81

(Authorized Signature)

WASTE HAULER*

24 PGR
25 TRI
2 TRI

1 METHOD OF SHIPMENT (Circle One) 5 (DRUMS) TANK TRUCK OPEN TRUCK (OTHER) VAC (Specify)

QUANTITY OF WASTE RECEIVED: 002805 (47 52)

(1 GALLONS / 2 CU YDS) (Circle One) (52)

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. Reynolds (Authorized Signature) DATE: 05/07/81 (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 C. Fuog (Authorized Signature) DATE: 5/12/81 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 5/7/81 PUMP 12 PGR TO #3 5/16/81 T-63 JTM
25 TRI TO #1 STILL T-63 7/28/81 JTM PUMP 12 PGR TO #3 5/19/81 T-63 JTM
PUMP 2 TRI TO #3 6/18/81 T-63 JTM

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001162

COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0165876
1 7

Authorization Number 8 997253 13

LUDWIG INDUSTRIES (Company Name) | 1728 N. DAMEN (Address)
CHICAGO (City) | ILL (State) | 60647 (Zip)

14 03160003711 G 24 Generator Number

WASTE HAULER(S)

(1) AMERICAN CHEMICAL (Hauler Name) | 420 So. COLFAX AVE (Hauler Address)
S.W.H. Registration Number 25 00244002 IND 016360265 31

(2) _____ (Hauler Name) | _____ (Hauler Address)
S.W.H. Registration Number 32 _____ 38

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 So. COLFAX AVE (Address)
39 918089002 46 Site Number

GRIFFITH (City) | IND (State) | _____ (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: CHLORINATED SOLVENTS

WASTE PHASE: SEMI - SOLID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: _____ HAZARD CLASS: _____

_____ _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-9-81 J. Ludwig (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 47 44 ____ 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) STRAND TRUCK (Authorized Signature) DATE: 54 __/__/__ 59

(2) [signature] (Authorized Signature) DATE: 12/9/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[signature] (Authorized Signature) DATE: 60 12/9/81 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

20 To B 3 T 63 6PM 12/1

On dock 12/9/81 6PM
~~To 125 K T-63 6PM 12/10/81~~
26 To 1B T-63 6PM 12/31/81

001163

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0238307

...MPLETED BY
...STE GENERATOR

Authorization Number 997830
ILD051937340
0316000182 G

Ludlow Corporation	11234 S. Forrestville	
(Company Name)	Address	
Chicago	Illinois	60628
City	State	Zip

Generator Number

WASTE HAULER(S)

Mr.Frank Inc.	201 W 155th St.	S.W.H. Registration Number 0079005
Hauler Name	Hauler Address	
	South Holland, Il.60477	ILD068506160
Hauler Name	Hauler Address	S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service	420 S. Colfax	91808902
(Facility Name)	Address	Site Number
Griffith, Indiana 46319		IND046360265
City	State Zip	

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvent waste

WASTE PHASE: liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Solvent waste N.O.S.	Flamable	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.

D001

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-6-81 Randall P. Fergus (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: 4 06 81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 4 6 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST 4GIT 4/6/81 T-50 JTM

IN ILLINOIS. 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001164

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0238309 (1–7)

...MPLETED BY
...STE GENERATOR

Authorization Number 997831 (8–13)

LUDLOW CORPORATION (Company Name) | 11234 S. FORRESTVILLE (Address)
CHICAGO (City) | ILLINOIS (State) | 60628 (Zip)

ILD051937340 (8–19)
0316000182 (14–24) Generator Number

WASTE HAULER(S)

MR. FRANK INC (Hauler Name) | 201 W. 155TH ST. (Hauler Address)
SOUTH HOLLAND, ILL. 60477

S.W.H. Registration Number 0079003 (25–31)
ILD069506160

Hauler Name | Hauler Address
S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE CO. (Facility Name) | 420 S. COLFAX (Address)
GRIFFITH, INDIANA (City) | IND. (State) | 46319 (Zip)

9180890Z (39–46) Site Number
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: SOLVENT WASTE LOW FLASH

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
SOLVENT WASTE NOS.	FLAMMABLE	——— LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000 (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: 9-11-81 Randall B Feigus (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) Graham Robertson (Authorized Signature) DATE: 09 11 81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 9 11 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 211K T-50 9/11/81 JM

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001165

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0238312

...PLETED BY
...ASTE GENERATOR

Authorization Number 997831

Ludlow Corporation (Company Name) | 11234 S.Forrestville Ave. (Address)
Chicago (City) | Illinois (State) | 60628 (Zip)

ILD051937340
0316000182
Generator Number

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address)
S.W.H. Registration Number 0079003

ILD069506160

(Hauler Name) | South Holland, Il. 60477 (Hauler Address)
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service Co. (Facility Name) | 420 S.Colfax (Address)
9180890Z Site Number

Griffith, Indiana (City) | IND. (State) | 46319 (Zip)
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvent waste low flash
WASTE PHASE: liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Solvent waste NOS	Flammable	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000

1 GALLONS / 2 CU. YDS (Circle One)

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: 12-3-81

Randall B. Fergus
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 12 03 81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ___

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE 12/3/81

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 211K T-50 GRM 12/3/81

SITE COPY - PART 3

001166

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

0251054
1 7

Authorization Number 997996 (8–13)

Long Chevrolet (Company Name) | 320 W Grand Ave (Address) | Elmhurst (City) | Illinois (State) | 60126 (Zip)

ILD045699964
0430350008 (14–24 Generator Number)

WASTE HAULER(S)

Amer. Chem. Serv. (Hauler Name) | 420 S. Colfax, Griffith Ind. (Hauler Address) | S.W.H. Registration Number 0024002 (25–31)

ILT000646810

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Amer. Chem. Serv. (Facility Name) | 420 Colfax (Address) | Griffith (City) | Indiana (State) | 46319 (Zip)

91808902 (39–46 Site Number)

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Paint Solvents

HAZARD CLASS: Flammable

(4100# Per DR)

WEIGHT FOR D.O.T. USE: 760 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

(50 gal Per DR) QUANTITY OF WASTE DELIVERED: 950 (47–52)

(1 GALLONS (Circle One) 2 CU. YDS.) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/3/81 F005 (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) Dora Alford-Davis (Authorized Signature) DATE: 02 03 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:

Michael Davis (Authorized Signature) DATE: 2/3/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 2/3/81 UNLOADED 2/4/81
PUMPED TO 12TH 2/4/81 T-63 Jim Murphy

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001167

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

0297208

Authorization Number 998473

London Chemical Co. (Company Name) | 240 Foster Ave (Address)
Bensenville (City) | Illinois (State) | 60106. (Zip)

ILD057837510
Generator Number 0431145014

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address)
S.W.H. Registration Number ILD 067526160

Hauler Name | Hauler Address
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Svc. (Facility Name) | P.O. Box 190 (Address)
IND 016360265 Site Number

Griffith (City) | Indiana (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvent 495 WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid NOS
HAZARD CLASS: Flammable Liquid
WEIGHT FOR D.O.T. USE 35055 ~~36420~~ (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 04500
(1 GALLONS, 2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK. OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/20/81 John M. Lawless (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE 04 27 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 4-27-81

COMMENTS OR SPECIAL INSTRUCTIONS: 1 TO #1 STILL 4/27/81 T-63 gpm

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001168

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0510604
1 7

Authorization Number 998473
8 13

TO BE COMPLETED BY WASTE GENERATOR

London Chemical Co. (Company Name) | 240 Foster Ave (Address) | 312 766 5902 (Phone Number) | 0 4 3 9 1 4 0 0 1 4 (Generator Number) 6 14 24

Bensenville (City) | Illinois (State) | 60106 (Zip) | I L D 0 5 7 8 3 7 5 1 0 (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 9 25 31

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 32 38

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Svc. (Facility Name) | P.O. Box 190 (Address) | 9 1 8 0 8 9 0 2 39 46 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 3 1 2 7 6 8 3 4 0 0 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

(Alternate (Facility Name)) | (Address) | 39 46 (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvent | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid | HAZARD CLASS: Flammable Liquid | U N 1 9 9 3 (UN or NA Number) | F 0 0 3 (EPA HW Number)

WEIGHT FOR D.O.T. USE 28,400 (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) (2 CU. YDS.) (Circle One) 1 53

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) | DATE: 11/4/81

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: 11/04/81 54 59

(2) _____ (Authorized Signature) | DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY* | HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) | DATE: 11/4/81 65

COMMENTS OR SPECIAL INSTRUCTIONS _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS, 217 / 782-3637 | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 1A & 1B T-63 EPM 11/4/81

001169

COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0121676 (1–7)

Authorization Number 997830 (8–13)

LITTEL FUSE INC. (Company Name) | 800 E. NORTHWEST HWY (Address)
DES PLAINES (City) | IL (State) | 60016 (Zip)

03106300006 (14–24) Generator Number

WASTE HAULER(S)

(1) STRAND TRUCKING (Hauler Name) | 13642 S. KENTON (Hauler Address) CRESTWOOD, IL.
S.W.H. Registration Number 0024001 (25–31)
ILT0006468 10

(2) C/O AMERICAN CHEMICAL (Hauler Name) | (Hauler Address)
S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVE (Address)
GRIFFITH (City) | IND. (State) | 46319 (Zip)
91808902 (39–46) Site Number
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: DIRTY DEGREASER / DIRTY COMP: CLEANER
HAZARD CLASS: NON-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: 5-1-81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 002640 (47–52) (1 GALLONS / 2 CU. YDS.) (Circle One) (53)

METHOD OF SHIPMENT (Circle One) 48 (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: 05/01/81 (54–59)

(2) [illegible] (Authorized Signature) DATE 05/01/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[illegible] (Authorized Signature) DATE: 5/1/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 5/1/81
TO #3 STILL 5/11/81 T-63 9AM

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

001170

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0375727

TO BE COMPLETED BY WASTE GENERATOR

SPECIAL WASTE HAULING MANIFEST

Authorization Number 197003

Litho-Strip (Company Name) | 7247 S. 78th Ave. (Address)
Bridgeview (City) | Ill. (State) | 60455 (Zip)
0316000013G Generator Number
Fed. EPA# ILD 010278281

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. So. Holland, Ill. (Hauler Address)
S.W.H. Registration Number 0079023
IL D 095716160

Hauler Name | Hauler Address
S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Savice (Facility Name) | 420 S. Colfax (Address)
Griffith (City) | Ind. (State) | 46319 (Zip)
91808902 Site Number
IND 016360205

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: | HAZARD CLASS: Flammable
WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 12000
1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/30/81 Arthur J. Wilhelmsen (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 01 30 81

(2) _____ (Authorized Signature) DATE: ___ ___ ___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ___

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 1 30 81

COMMENTS OR SPECIAL INSTRUCTIONS: To 125 E 1/30/81 T-63 Jim Murphy

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001171

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0068072

WASTE GENERATOR

Authorization Number 197003

Litho-Strip (Company Name) | 7247 S. 76th Ave. (Address)
Bridgeview (City) | Ill. (State) | 60455 (Zip)
0316000013 G (Generator Number)
Fed. EPA # ILD 010278281

WASTE HAULER(S)

(1) Mc. Frank Inc. (Hauler Name) | 201 W. 155th St. So. Holland, Ill. (Hauler Address)
S.W.H. Registration Number 0079023
ILD 069506160

(2) (Hauler Name) | (Hauler Address)
S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax (Address)
Griffith (City) | Ind. (State) | 46319 (Zip)
Site Number 918088902
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:
HAZARD CLASS: Flammable

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

UN1993

DATE: 5-1-81
Arthur J. Wilhelmsen (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004500 (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: 05/01/81 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.

_____ (Authorized Signature) DATE: 5/1/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 12th K 5/1/81 T-639 pm

IN ILLINOIS: 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001172

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0116082

WASTE GENERATOR

Authorization Number 197003

LitHo-Strip (Company Name) 7247 S. 78TH Ave Address
Bridgeview City IL State 60455 Zip

0316000013 Generator Number

WASTE HAULER(S)

(1) MR FRANK INC Hauler Name 201 W 155TH St Hauler Address So HOLLAND ILL S.W.H. Registration Number 0079009 ILD069706160

(2) Hauler Name Hauler Address S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERVICE (Facility Name) 420 S. COLFAX Address 9180890 Site Number
GRIFFITH City IND State 46319 Zip INDO63560G5

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE 10/7/81 (Authorized Signature) F005

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004800 (1 GALLONS, 2 CU. YDS.) (Circle One)

METHOD OF SHIPMENT: (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Donald W Burt (Authorized Signature) DATE: 10/07/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature) DATE: 10/7/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 126E T-63 10/7/81 JMM

IN ILLINOIS: 217 / 782 3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART 1 GENERATOR — PART 2 IEPA — PART 3 SITE — PART 4 HAULER — PART 5 IEPA — PART 6 GENERATOR

SITE COPY - PART 3

001173

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0068085

WASTE GENERATOR

Authorization Number 197003

Litho-strip Co (Company Name) 7247 S 78TH Ave (Address)
Bridgeview (City) ILL (State) 60455 (Zip)
0316000013 (Generator Number) G
Fed EPA ILD 010278281

WASTE HAULER(S)

(1) MR FRANK INC (Hauler Name) 201 W 155TH St (Hauler Address)
S.W.H. Registration Number 0079018

(2) _____ (Hauler Name) So HOLLAND ILL (Hauler Address)
S.W.H. Registration Number ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERVICE (Facility Name) 420 S COLFAX (Address)
9180890 2 (Site Number)
GRIFFITH (City) IND (State) 46319 (Zip)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: _____

HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/16/81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005000 (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: 10/16/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ (Authorized Signature) DATE: 10/16/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 125 x T-63 10/16/81 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

001174

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0116100

WASTE GENERATOR

Authorization Number 19 7003

Litho Strip (Company Name) 7247 S 78th Ave Address

Bridgeview City Ill. State 60455 Zip

0316000013 Generator Number

WASTE HAULER(S)

(1) MR FRANK Hauler Name 201 W 155th St. Hauler Address S.W.H. Registration Number 0-19009

(2) _____ Hauler Name So Holland Ill Hauler Address ILD 069506160 S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem Service (Facility Name) 4205 Colfax Address 918089462 Site Number

Griffith City Ind State 46319 Zip IND 046360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint + Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: _____ HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/4/81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED 004800 (1) GALLONS (2) CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Daniel W Bell (Authorized Signature) DATE: 11/04/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature) DATE: 11/4/81

COMMENTS OR SPECIAL INSTRUCTIONS: _____

782 3637 · 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* · OUTSIDE ILLINOIS 800 / 424-8802

PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

COPY - PART 3

To 124K T-63 GAL 11/4/81

001175

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0116083

WASTE GENERATOR

Authorization Number 197003

Litho Strip Co (Company Name) 7247 S. 78th Ave (Address)
Bridgeview (City) Ill (State) 60455 (Zip)
0316000013 (Generator Number)

WASTE HAULER(S)

(1) Mr. Frank (Hauler Name) 201 S 155th St (Hauler Address) S.W.H. Registration Number 0079021

(2) _____ (Hauler Name) So Holland Ill (Hauler Address) S.W.H. Registration Number ILD069506160

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) 4201 Conkey (Address)
Griffith (City) Ind (State) 46319 (Zip)
918008902 (Site Number)
IND 011360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paints & Solvents
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: _____
HAZARD CLASS: Flammable

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11-24-81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005000 (1 GALLONS / 2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Donald Buet (Authorized Signature) DATE: 11/24/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.

_____ (Authorized Signature) DATE: 11-24-81

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

To 124 F T-63 GRM 11/24/81

001176

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0122137

Authorization Number 97003

Litho Stop Co (Company Name) 7247 S. 18th Ave (Address)
Bridgeview (City) Ill (State) 60455 (Zip)
03160000013 G (Generator Number)

WASTE HAULER(S)

(1) Mr Frank (Hauler Name) 201 W 155 TH St (Hauler Address)
S.W.H. Registration Number 0079029

(2) _____ (Hauler Name) So Holland Ill (Hauler Address)
Ill 069506160 S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) 420 S Cicero (Address)
ILD 008902 (Site Number)
Griffith (City) Ind (State) 46319 (Zip)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paints & Solvents
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: _____
HAZARD CLASS: Flammable

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE 12-10-81 (Authorized Signature) DE005

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004800 (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) Don Ahlbelt (Authorized Signature) DATE: 12/10/81 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ (Authorized Signature) DATE: 12/10/81 (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

To 125 K T-63 6 P.M 12/10/81

001177

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 97436

TO:	FROM:
T/S/D FACILITY: AMERICAN CHEMICAL SERVICE	Generator: LEY EQUIPMENT COMPANY
E.P.A. ID Code No.: IND0-16360255	E.P.A. ID Code No.: EXEMPT
Address: 420 S. Colfax	Address: 550 Bonnewitz Avenue
Destination: Griffith Indiana 46319	Origin: Van Wert, Ohio 45891
Phone: 219-924-4370	Phone: 419-238-6742

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
2	WASTE PAINT THINNING COMPOUND	FLAMMABLE	NA-1142	F003	110 GL	FLAMMABLE

PLACARDS REQUIRED: FLAMMABLE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 THOMAS SOLVENT COMPANY E.P.A. ID No. MID-039993902
Address 5605 Planeview Drive
City Fort Wayne State In. Zip 46825 Phone 482-2638

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY To 122 X T-63 10/8/81 JMM

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature _____ Date _____

T/S/D F COPY

7 BLS (6 REV) REV 10/80

HAZARDOUS WASTE

001178

LEADER INDUSTRIES, INC.

2000 Dombey Rd. - Suite 14
Portage, Indiana 46368
219/762-8588

Wil. Bill
AURORA SEPKE

MANIFEST

No. 4923

Date 12/21/21

Billing Information

Customer [illegible] Tractor No. [illegible] Job No.

[illegible] Trailer No. [illegible] P.O. No.

[illegible] Permit No.

Carrier: [illegible] Driver [illegible]

Destination [illegible] Pick-Up ☐ Delivery ☐

	QUANTITY	UNIT	UNIT PRICE	AMOUNT
Charge to Customer				
Credit to Customer				
Demurrage Charge				
Other Charge(s)				
			Balance Due Debit ☐ Credit ☐ TOTAL:	

_____ Lbs/Gals _____ Net Weight _____ Gross Gals

_____ %BSW _____ Gross Gals _____ Net Gals

Transportation Manifest

QUANTITY	HM	DESCRIPTION (Insert Proper Shipping Name)	PLACARD CLASSIFICATION	GROSS	TARE	NET
45007 of		Ink & Paint Thinner	Flammable ☒			
		NOS	Corrosive ☐			
		1993	Drive Safely ☐			
			☐			
			☐			

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in pro for transportation according to the applicable regulations of the Department of Transportation.

Environmental Manifest

Loading Time — Arrival [illegible] Departure [illegible]
Shipper [illegible] Representative [illegible] Dat
Remarks

Travel Time — Departure [illegible] Arrival [illegible]
Carrier [illegible] Representative
Remarks Permit No.

Unloading Time — Arrival _____ Departure _____
Processor [illegible] Representativ
Remarks Permit No.

To 211R T-50 GK-64 12/2/57

EMERGENCY C

031-9/78
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FINANCE BUSINESS FORMS COMPANY
100 N. LA SALLE STREET - CHICAGO, ILLINOIS 60602
(312) 263-6522
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001179

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0380163

Authorization Number 997160

LAWTER CHEMICALS (Company Name) | 400 W. ROOSEVELT AVE Address
BENSENVILLE City | ILL State | 60106 Zip

ILD072 314 354
04341 40004 G
Generator Number

WASTE HAULER(S)

MR. FRANK Hauler Name | SO. HOLLAND ILL Hauler Address
S.W.H. Registration Number 0079023
ILD069 506 160

Hauler Name | Hauler Address
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERVICE (Facility Name) | 420 COLFAX Address
GRIFFITH City | IND State | Zip
91808902 Site Number
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: TANK TRUCK
HAZARD CLASS: Flamable Liquid
WEIGHT FOR D.O.T. USE 19,500 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 003000
1 GALLONS / 2 CU. YDS. (Circle One) 1
F003

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: 2/26/81
Robert B. Mathews (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: 02/26/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

BOB MACK (Authorized Signature) DATE: 02/27/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST ACIT TK T-50 2/26/81 Jim Mungle

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

001180

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0398932

APLETED BY
WASTE GENERATOR

Authorization Number 997160
ILD072314354

LAWTER CHEMICALS (Company Name) | 400 W. ROOSEVELT AVE Address
BENSENVILLE City | ILL State | 60106 Zip

0434140004 Generator Number

WASTE HAULER(S)

MR. FRANK Hauler Name | SO. HOLLAND, ILL Hauler Address
S.W.H. Registration Number 0079009
ILD069506160

Hauler Name | Hauler Address
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERVICE (Facility Name) | 420 COLFAX Address
GRIFFTH City | IND State | Zip
91808902 Site Number
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: TANK TRUCK
HAZARD CLASS: FLAMABLE LIQUID
WEIGHT FOR D.O.T. USE 24,050 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 004000
(1) GALLONS (Circle One) (2) CU. YDS: 7

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-23-81 (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Robert Perkins (Authorized Signature) DATE: 03 23 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 3/23/81

COMMENTS OR SPECIAL INSTRUCTIONS: 2200 GALS TO EAST ACIT T-50 3/23/81
1800 GALS TO WEST ACIT T-50 3/23/81

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

001181

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0334010

Authorization Number 997160

LETED BY
WASTE GENERATOR

Lawter Chemicals (Company Name) | 400 W Roosevelt Ave (Address)
Bensenville (City) | Illinois (State) | 60106 (Zip)

0434140004 Generator Number
ILD072314354

WASTE HAULER(S)

MR Frank Inc (Hauler Name) | South Holland IL (Hauler Address)
S.W.H. Registration Number 0079025
ILD069106160

Hauler Name | Hauler Address
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S Colfax Ave (Address)
Griffith (City) | IND (State) | 46319 (Zip)
9 1808902 Site Number
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid
HAZARD CLASS: 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

F003

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: 7-21-81
(Authorized Signature) F005

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 07/21/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 7/21/81

COMMENTS OR SPECIAL INSTRUCTIONS: To West Pit T-50 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

001182

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 1573-81

TO:	FROM:
T/S/D FACILITY AMERICAN CHEMICAL SERVICE	Generator LASUER INDUSTRIES
E.P.A. ID Code No. IND-[illegible]	E.P.A. ID Code No. EXEMPT
Address 420 S. Colfax	Address 102 S. Main Street
Destination Griffith Indiana	Origin Claypool, Indiana 46510
Phone 219-924-4370	Phone 219--566-2555

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5	WASTE PAINT THINNING COMPOUND	FLAMMABLE	NA-1142	F003	275 GL	FLAMMABLE

PLACARDS REQUIRED FLAMMABLE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature LaSuer Industries, Inc. Date September 30, 1981

TRANSPORTER #1 THOMAS SOLVENT COMPANY E.P.A. ID No. MID-039993902
Address 5005 Fishnoview Drive
City Fort Wayne, State IN Zip 46825 Phone 219-482-9630

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY TO 1262 T-63 10/8/81 879m

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date _____

HAZARDOUS WASTE

HAZARDOUS WASTE

T/S/D F COPY

7-81 S 6 (6 PLY) REV. 10/80

001183

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0261981

MPLETED BY
GENERATOR

Authorization Number 991976

Kiffer Nold Inc. 160 E. Illinois St
(Company Name) Address
Chicago Ill 60611
City State Zip

03160000777
Generator Number

WASTE HAULER(S)

Jan Gabe Morton W130 VALPO, IN
Hauler Name Hauler Address S.W.H. Registration Number

FED # IND 009 842 824

Hauler Name Hauler Address S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem Service 470 S. Colfax Ave 918054902
(Facility Name) Address Site Number
Griffith Indiana 46319 FED # IND 016 360 265
City State Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: HAZARD CLASS:

FLAMMABLE LIQUID N.O.S. 1993

WEIGHT FOR D.O.T. USE 2800 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 385

1 (GALLONS) (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-22-81 (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE: / /

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 6/22/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 1242 T-63 6/23/81 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

001184

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
GENERATOR

1 0261982 7

991976
Authorization Number 8 — 13

Kieffer Nolde Inc. (Company Name) — 160 E. Illinois st. (Address)

0316000777 (14) Generator Number

Chicago (City) — Ill. (State) — 60611 (Zip)

WASTE HAULER(S)

Land Sure RE (Hauler Name) — W130 Valpo, In (Hauler Address)

S.W.H. Registration Number 8423121 (25–31)
FED# Ind 009 842 824
ICC 2980

Hauler Name — Hauler Address

S.W.H. Registration Number (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Service (Facility Name) — 420 s. Colfax Ave. (Address)

91808902 (39–46) Site Number

Griffith (City) — Indiana (State) — 46319 (Zip)

FED# Ind 016 360 265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvents

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid — HAZARD CLASS: N.O.S. 1993

WEIGHT FOR D.O.T. USE 4,000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: (47–52) 550

1 GALLONS (Circle One)
2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/20/81 — (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) EMT C. Shirley (Authorized Signature) — 10 — DATE: 11/20/81 (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: 11/23/81 (40–45)

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

Unloaded at dock 11/23/81 GRM — TO 204 R T-50 GRM 12/7/81

SITE COPY - PART 3

001185

HAZARDOUS WASTE MANIFEST

MSO 22614
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Mr. Frank, Inc.
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND 005175492	International Harvester Company 2701 S. Coliseum Blvd., Fort Wayne, Indiana 46803	3-24-81
TRANSPORTER # 1	ILD 069506160	Mr. Frank, Inc. South Holland, Illinois	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service, Inc. P.O. Box 190, Griffith, Indiana 46319	3/25/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1	X	F017	Hazardous Waste, Liquid or Solid, N.O.S. Industrial Paint Residue	1263				5000 Gal.		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

D.O.T. Hazard Class - Code 07

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

J. F. Csulik 3-23-81
GENERATOR'S SIGNATURE DATE
219-461-5238

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 WEST AGIT R 3/25/81 T-50
TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

001186

HAZARDOUS WASTE MANIFEST

MSO 22614
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Mr. Frank, Inc.
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND 005175492	International Harvester Company 2701 S. Coliseum Blvd., Fort Wayne, Indiana 46803	3-25-81
TRANSPORTER # 1	ILD 069506160	Mr. Frank, Inc. South Holland, Illinois	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service, Inc. P.O. Box 190, Griffith, Indiana 46319	3/25/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1	X	F017	Hazardous Waste, Liquid or Solid, N.O.S. Industrial Paint Residue	1263				5000 Gal.		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

D.O.T. Hazard Class - Code 07

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes [X] No [ ]

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID [ ] COLLECT [ ] $

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.

J. F. Csutik 3-23-81
GENERATOR'S SIGNATURE DATE
219-481-5238

This is to certify acceptance of the hazardous waste shipment.

Robert Perkins 3-25-81
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

H. J. Adamowski 3/25/81
TSDF SIGNATURE DATE

3

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TRANSPORTER #2

001187

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

81-009-PA-01
MANIFEST DOCUMENT NUMBER

1434
SHIPPER NUMBER

Keene Products Inc.
NAME OF CARRIER (SCAC)

IN2088-0000-11
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND005130331	Keene Products Inc. Middlebury, In 46540 Hwy 13N P.O. Box 70 (219) 825-2161	6-23-81
TRANSPORTER # 1	IND005130331	Keene Products Inc. (Same as Above	6-23-81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Services Griffith, In 46319 4205 S. Colfax (219) 924-4370	6/23/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
18 Drums	X	F019	Compound, Lacquer Paint or Varnish Removing, Reducing or Thinning Liquid	NA 1142	Flamm-able	45°C	Gal.	990 gal.		

SPECIAL HANDLING INSTRUCTIONS

None

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

J. W. Keene 6-23-81
GENERATOR'S SIGNATURE DATE

UNLOADED AT DOCK 6/23/81

This is to certify acceptance of the hazardous waste shipment.

X _____ _____
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal

_____ 6/23/81
TSDF SIGNATURE DATE

TO 126R T-63 6/24/81 JMM

3

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TRANSPORTER #2

001188

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

81-022-PA01
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Keene Products, Inc.
NAME OF CARRIER (SCAC)

IN-2008-0000-11
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND005130331	Keene Products, Inc. Middlebury, IN 46540 HWY 13 N. P.O. Box 470 (219) 825-2161	
TRANSPORTER # 1	IND005130331	Keene Products, Inc. (Same as Above)	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Services Griffith, IN 46319 420 S. Calflex (219) 924-4370	10/9/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1 Drum	X	F017	Compound, Lacquer Paint or Varnish Removing, Reducing or Thinning Liquid	NA 1142	Flamable Liquid	45° C	8lb/ Gal	[illegible]		

SPECIAL HANDLING INSTRUCTIONS

NONE

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID (except when box at right is checked) ☐
Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

UNLOADED AT DOCK 10/9/81

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE

TO 124 I-63 10/12/81 9PM

10/7/81

60 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

001189

Rev. 3/81

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0012912

001190

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Keeler Brass Company	Mr. Frank, Inc.	American Chemical Service, Inc
Site Address	**Transporters Address**	**Facility Address**
2929 32nd St. Kentwood, MI 49508	201 W. 155th St. S. Holland, IL 60473	P.O. Box 190 420 S. COLFAX Griffith, INDIANA 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 247-4107	(312) 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MIDO57042434	ILD069506160	IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

WASTE INFORMATION

LOT NO	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Waste Paint	Flammable Liquid	UN1263	07	1	CT		X			~~55~~ 100	GAL	D001
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

Keep away from heat and flames

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: ① Robert Rusticus — Date Shipped MO. DAY. YEAR: 04 23 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. 1007902 7

Subsequent Transporter Vehicle I.D. No's

Transporter Signature: ② Gary Lyons — Date(s) Received: 4 23 81

Subsequent transporter(s) signature(s): ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: ④ [signature] — ☐ Accepted ☐ Rejected — Date Received: 4 23 81

Facility Site EPA I.D. Number: IND 013 161 016 5

Describe any significant discrepancies between manifest and shipment.

TO WEST AGCT T-50 4/23/81 JTM

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0011234

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Keeler Brass Company	Mr. Frank, Inc	American Chemical Sv.
Site Address	**Transporters Address**	**Facility Address**
2929 32nd St Kentwood MI 49508	801 W. 155th St. S. Holland, IL 60473	P.O Box 190. 420 S. Colfax Griffith Indiana 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 247-4107	(312) 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MI0057042434	IL0000506160	IND063602651

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Waste Paint	Flammable Liquid	UN1263	07	1	CT		X			01450	Gal	D001
2.													
3.													
4.													
5.													
6.													

COMMENTS — Include Safety precautions and special handling instructions.

Keep Away From heat and Flames

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① [signature] — Date Shipped MO. DAY YEAR: 10 12 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 007902 — Transporter Signature ② Robert [signature] — Date(s) Received: 10 12 81

Subsequent Transporter Vehicle I.D. No's — Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ [signature] — ☒ Accepted ☐ Rejected — Facility Site EPA I.D. Number IND063602651 — Date Received: 10 12 81

Describe any significant discrepancies between manifest and shipment.

To 204R T-50 10/12/81 [signature]

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0251086

Authorization Number 997997

TO BE COMPLETED BY WASTE GENERATOR

Kahle Chemical Corp. (Company Name) | 4250 Lee Ave (Address)
Gurnee (City) | Illinois (State) | 60031 (Zip)

09703500056 Generator Number

WASTE HAULER(S) Federal Id No. Ind-009842824

Landgrebe Motor Transport (Hauler Name) | 3009 S. Shields State Rd 130 Valparaiso Ind. (Hauler Address)
S.W.H. Registration Number ICC No. 2980 46MCR

Hauler Name | Hauler Address
S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 S. Colfax Ave (Address)
Griffith (City) | Indiana (State) | 46319 (Zip)
91808902 Site Number
Federal Id No. Ind-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Solvent NOS, Flammable Liquid, 3 | HAZARD CLASS:
WEIGHT FOR D.O.T. USE 6,455 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 000825
1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-26-81 | Richard Kahle (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) Curt Shirley / LMT (Authorized Signature) DATE: 6/26/81

(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 6/29/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK - 6/29/81
To 20/K T-50 6/30/81 JTM.

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001192

COMPLETED BY
SITE 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

0407114

Authorization Number 991114

Jovan Inc (Company Name) | 600 Eagle Dr (Address) | (312) 595-1660 (Phone Number) | 0434140005 (Generator Number) G
Bensenville (City) | Ill (State) | 60106 (Zip) | ILD051068419 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton Crestwood, Ill. (Hauler Address) | S.W.H. Registration Number 031/2003
597-2744 (Phone Number) | ILT000644810 (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) | 768-3400 (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)
(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME Organic Solvent | WASTE PHASE Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Nail Enamel Scrap Flammable Solvent | HAZARD CLASS: | UN or NA Number | EPA HW Number

WEIGHT FOR D.O.T USE 2277 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 275 (1) GALLONS (Circle One) (2) CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 5 Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Christine Bergmann (Authorized Signature) DATE 2/20/81

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 2/20/81

(2) (Authorized Signature) DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE 2-23-81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 2/23/81.
PUMPED TO WEST AGITR 2/24/81 T-50 Jim Murphy

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 | OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

001193

STATE OF IL

APLETED BY ENERATOR

ENVIRONMENTAL PROTECTION
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

Jovan Inc (Company Name) | 600 Eagle Dr (Address) | (312)595-1660 (Phone Number) | 0434 1483585 (14 Generator Number)

Bensenville (City) | Ill (State) | 60106 (Zip) | ILD051068419 (EPA Number)

WASTE HAULER(S)

Ecological Transfer (Hauler Name) | 13442 Kenton Crestwood, Ill. (Hauler Address) | S.W.H. Registration Number [redacted] (25 31)

LEASED by

(312)597-2744 (Phone Number) | ILT000646810 (EPA Number)

STAHL Trucking (Hauler Name) | 13442 KENTON (Hauler Address) | S.W.H. Registration Number 0311010 (32 38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | P.O. Box 190 (Address) | 91808902 (39 Site Number 46)

Griffith (City) | Indiana (State) | 46319 (Zip) | 768-3400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | 39 Site Number 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvent | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Nail Enamel Scrap	Flammable Solvent	NA1993	K023

WEIGHT FOR D.O.T. USE: 5168 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 660 (47 52) (1) GALLONS (2) CU. YDS. (Circle One) (53)

METHOD OF SHIPMENT (Circle One): (DRUMS) 12 (Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify): VAH

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Christine Bergman (Authorized Signature) DATE 6/10/81

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) Stahl (Authorized Signature) DATE: 6/10/81 (54 59)

(2) (Authorized Signature) DATE: / / (60)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael C. Burg (Authorized Signature) DATE: 6/11/81 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 6/11/81

TO 20 6/12/81 T-50 JM

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

001194

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0413586
1 7

Authorization Number 991114
8 13

.MPLETED BY GENERATOR

Jovan Inc. (Company Name) | 600 Eagle Dr. Address | (312)595-1660 Phone Number | 0434140005 G Generator Number 14 24

Bensenville City | IL State | 60106 Zip | ILD051068419 EPA Number

WASTE HAULER(S)

Ecological Transfer Hauler Name | 13642 Kenton Crestwood, IL. Hauler Address | S.W.H. Registration Number [illegible] 25 31

(312)597-2744 Phone Number | ILT000646810 EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number 0084001 32 38

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | P.O. Box 190 Address | 91808902 39 Site Number 46

Griffith City | Indiana State | 46319 Zip | 768-3400 Phone Number | IND016360265 EPA Number

Alternate (Facility Name) | Address | 39 Site Number 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvent | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Nail Enamel Scrap	Flammable Solvent	UN 1993	K878

WEIGHT FOR D.O.T. USE 1005 (LBS) TONS (circle one)

WEIGHT FOR E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 130 47 52 (1) GALLONS (2) CU. YDS. (Circle One) 53

METHOD OF SHIPMENT (Circle One) (DRUMS) 3 Number | TANK TRUCK | OPEN TRUCK | OTHER (Specify) UAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Christine Bergman (Authorized Signature) DATE: 8/7/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 8/7/81 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: 8/7/81 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 8/7/81
PUMPED TO 204 8/7/81

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

001195

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0006751
1 7

WASTE GENERATOR

Authorization Number 997001 (8–13)

JOANNA WESTERN MILLS CO. (Company Name) | 2141 S. JEFFERSON ST. (Address)

ILD 005 068 762

CHICAGO (City) | ILLINOIS (State) | 60616 (Zip)

0316000056 G (14 Generator Number 24)

WASTE HAULER(S)

(1) MR. FRANK INC. (Hauler Name) | 201 W 155TH ST. SOUTH HOLLAND (Hauler Address)

S.W.H. Registration Number 0079/018 (25–31)

ILD069506150

(2) _____ (Hauler Name) | _____ (Hauler Address)

S.W.H. Registration Number _____ (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX (Address)

9180890Z (39 Site Number 46)

GRIFFITH (City) | IND. (State) | 46319 (Zip)

IND. 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: ICC-DOT FLAMMABLE

HAZARD CLASS: FLAMMABLE B/L

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-17-81

J V Ba[illegible] (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED 005000 (47–52) (1 GALLONS, 2 CU. YDS.) (Circle One) (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Robert O Peters (Authorized Signature) DATE 03 17 81 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[illegible] (Authorized Signature) DATE: 3/17/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: PUMPED TO 125K T-63 3/17/81 Jim Murphy

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART 1 GENERATOR | PART 2 IEPA | PART 3 SITE | PART 4 HAULER | PART 5 IEPA | PART 6 GENERATOR

SITE COPY - PART 3

001196

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0279557
1 7

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997001
8 13

JOANNA WESTERN MILLS CO. 2141 S. JEFFERSON ST. TEL. (312) 226-3232
(Company Name) Address

CHICAGO ILLINOIS 60616
City State Zip

0316000056 G
14 Generator Number 24

ILD005068762

WASTE HAULER(S)

MR. FRANK INC. 201 W 155TH ST. S.W.H. Registration Number 0079023
Hauler Name Hauler Address 25 31

SOUTH HOLLAND ILL TEL. (312) 596-3877

Hauler Name Hauler Address S.W.H. Registration Number
ILD069503261 60
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SER. 420 S. COLFAX 91808902
(Facility Name) Address 39 Site Number 46

GRIFFITH INDIANA 46319 IND 016360265
City State Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: LACQUER BASE, LIQUID WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

UN 1263

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: HAZARD CLASS:

ICC DOT FLAMMABLE LIQUID WEIGHT FOR D.O.T. USE 36,000 (LBS) TONS (circle one)

FLAMMABLE LIQUID

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.
47 52 53

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-27-81 J.J.R. Thannick
(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) Tony Gerard DATE: 5/27/81
(Authorized Signature) 54 59

(2) DATE: / /
(Authorized Signature)

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:

T. Miller DATE: 5/27/81
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: TO 12TR 5/27/81 T-63 JTM

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001197

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

0279556

Authorization Number 997001

JOANNA WESTERN MILLS CO. 2141 S. JEFFERSON ST. TEL. # (312) 226-3232
(Company Name) Address

CHICAGO ILLINOIS 60616
City State Zip

0316000056 G
Generator Number

ILD 005068762

WASTE HAULER(S)

MR. FRANKS INC. 201 W 155TH ST. SOUTH HOLLAND ILL 60473
Hauler Name Hauler Address

S.W.H. Registration Number 0079023

TEL. # (312) 596-3377

Hauler Name Hauler Address

S.W.H. Registration Number ILD068506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE INC. 420 S. COLFAX
(Facility Name) Address

91808902
Site Number

GRIFFITH INDIANA 46319
City State Zip

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: LACQUER BASE LIQUID

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

UN 1263

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: ICC DOT FLAMMABLE LIQUID

HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 40,000 (LBS) TONS (circle one)

FLAMMABLE LIQUID

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-5-81 W. Butkowski
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] DATE: 05 05 81
(Authorized Signature)

(2) _____ DATE: ___/___/___
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature]
(Authorized Signature)

DATE: 5 5 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO: 125R T-63 5/5/81 gjm

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001198

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0279560

Authorization Number 997001

WESTERN MILLS CO. 2141 S. JEFFERSON ST. TEL (312) 226-3232
(Company Name) Address

CHICAGO ILLINOIS 60616
City State Zip

03160000556 G
Generator Number

ILD005068762

WASTE HAULER(S)

MR. FRANK INC. 201 W 155TH ST. S.W.H. Registration Number 0079/009
Hauler Name Hauler Address

SOUTH HOLLAND ILL. TEL. (312) 596-3377

Hauler Name Hauler Address S.W.H. Registration Number

ILD069506160

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SER. 420 S. COLFAX 9180890Z
(Facility Name) Address Site Number

GRIFFITH INDIANA 46319
City State Zip

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: LACQUER BASE, LIQUID UN 1263 WASTE 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:	
ICC DOT	FLAMMABLE LIQUID	WEIGHT FOR D.O.T. USE 36000 (LBS) TONS (circle one)
FLAMMABLE LIQUID	D001	

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 064500 (1) GALLONS (Circle One) (2) CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-1-81 (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: 10 / 1 / 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 10/1/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 125K T-63 10/1/81 JMM.

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001199

HAZARDOUS WASTE MANIFEST

7281
MANIFEST DOCUMENT NUMBER

5001
SHIPPER NUMBER

LANDGREBE
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER		JANCO PRODUCTS, INC. 219-255-3169 812 S. LOGAN STREET MISHAWAKA, IN 46544	
TRANSPORTER # 1	IND009842824	LANDGREBE TRUCKING 219-721-0095 VALPARISO, INDIANA	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	AMERICAN CHEMICAL SERVICE 219-924-4370 420 S. ~~EAGLE~~ COLFAX, GRIFFITH, INDIANA 46319	7/2/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
2 Drums		F001	Methylene Chloride	1593				1320		

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

Robert Janco 7-1-81
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.
Landgrebe 7-1-81
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.
Tim Lakeland 7-2-81
TSDF SIGNATURE DATE

UNLOADED AT DOCK 7/2/81 TO LA T-63 8/22/81 JMM

3

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TRANSPORTER #2

001200

E COMPLETED BY
TE 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

0367755
1 7

Authorization Number 9 9 7 2 5 1
ILD 042075978
13

& S Tin Mill Products (Company Name) | 3400 N. Powell Avenue (Address)
ranklin Park, (City) | Illinois (State) | 60131 (Zip)

0 3 1 6 0 0 0 3 7 3 G
14 Generator Number 24

WASTE HAULER(S)

American Chemical Service (Hauler Name) | 420 South Colfax Ave. (Hauler Address)
Griffith, Ind. 46319

S.W.H. Registration Number 9824002
25 31

(Hauler Name) | (Hauler Address)

~~IND 016360265~~ ILT000646810
S.W.H. Registration Number
32 38

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax Ave. (Address)
Griffith (City) | Indiana (State) | 46319 (Zip)

9 1 8 0 8 9 0 2
39 Site Number 46
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquids

HAZARD CLASS: DOT 172.101 Paint

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 47 2500 52

1 (GALLONS) (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK (OTHER) (Specify) VAH

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: 2-3-81 F005 Dominic E Tuvi (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Don Stone - Driver (Authorized Signature) DATE 54 02/03/81 59

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael O'Brien (Authorized Signature) DATE: 60 2/3/81 65

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 2/3/81 UNLOADED 2/4/81
PUMPED TO 127K 2/4/81 T-63 Jim Murphy

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001201

STATE OF ILLINOIS

MPLETED BY
E GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0367756

Authorization Number 997251
ILD 042075978

J & S Tin Mill Products (Company Name) | 3400 N. Powell Avenue (Address)
Franklin Park, (City) | Illinois (State) | 60131 (Zip)

0 3 1 6 0 0 0 3 7 3 G
Generator Number

WASTE HAULER(S)

American Chemical Service (Hauler Name) | 420 South Colfax Ave. (Hauler Address)
S.W.H. Registration Number 0024/001

STROUD TRUCKING (Hauler Name) | Griffith, Ind. 46319 CRESTWOOD, IL. (Hauler Address)
ILT 0006 46810
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax Ave. (Address)
9 1 8 0 8 9 0 2
Site Number

Griffith (City) | Indiana (State) | 46319 (Zip)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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 Liquids
HAZARD CLASS: DOT 172.101 Paint
WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 2 8 0 5 (47–52)
1 GALLONS (Circle One)
2 CU. YDS. (53)

50

METHOD OF SHIPMENT (Circle One): (DRUMS) TANK TRUCK OPEN TRUCK (OTHER) (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION.

DATE: 3/6/81 (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) William J. Lukowski (Authorized Signature) DATE: 03/06/81 (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:

M. C. McCue (Authorized Signature) DATE: 3/6/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 3/6/81
PUMPED TO 125E T-63 3/11/81 Jim Murphy

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001202

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0367757

MPLETED BY
GENERATOR

Authorization Number 9 9 7 2 5 1
ILD 042075978

J & S Tin Mill Products (Company Name) | 3400 N. Powell Avenue (Address)

Franklin Park, (City) | Illinois (State) | 60131 (Zip)

0 3 1 6 0 0 0 3 7 3 G
Generator Number

WASTE HAULER(S)

American Chemical Service (Hauler Name) | 420 South Colfax Ave. (Hauler Address)
Griffith, Ind. 46319

S.W.H. Registration Number 0 3 1 1 0 0 3
ILT 0006 46810

Hauler Name | Hauler Address

S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax Ave. (Address)

9 1 8 0 8 9 0 2
Site Number

Griffith (City) | Indiana (State) | 46319 (Zip)

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents 895

WASTE 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 Liquids

HAZARD CLASS: DOT 172.101 Paint

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: 35 DRUMS

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/20

Dominic Tuth
(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) L Pinkwell. (Authorized Signature) DATE: 3/20/81

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael Pinkwell
(Authorized Signature)

DATE: 3/20/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 3/20/81 PUMPED TO 124E 3/20/81
T-63 Jim Murphy

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001203

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

0367758
1 7

Authorization Number ~~9 0 7~~ 2 5 1 13
ILD 042075978

J & S Tin Mill Products (Company Name) | 3400 N. Powell Avenue (Address)
Franklin Park, (City) | Illinois (State) | 60131 (Zip)

0 3 1 6 0 0 0 3 7 3 G
14 Generator Number 24

WASTE HAULER(S)

American Chemical Service (Hauler Name) | 420 South Colfax Ave. (Hauler Address)
c/o
STAND TRUCKING (Hauler Name) | Griffith, Ind. 46319 CRESTWOOD, IL (Hauler Address)
ATTN: KEVIN VENTON

S.W.H. Registration Number 0 0 2 4 0 0 2
25 31

S.W.H. Registration Number ILT 000646810
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax Ave. (Address)
Griffith (City) | Indiana (State) | 46319 (Zip)

9 1 8 0 8 9 0 2
39 Site Number 46

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquids

HAZARD CLASS: DOT 172.101 Paint

WEIGHT FOR D.O.T. USE _____ (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 2 7 5 0
47 52

(1 GALLONS) (Circle One)
2 CU. YDS.
53

METHOD OF SHIPMENT (Circle One) 50 (DRUMS) TANK TRUCK OPEN TRUCK (OTHER (Specify) VAN)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-20-81

(Authorized Signature) FOR

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: 05/19/81
54 59

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO /

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 5/19/81
60 65

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 5/19/81
TO 142E T-63 5/21/81 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

001204

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0367760

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997251
ILD 042075978

J & S Tin Mill Products (Company Name) | 3400 N. Powell Avenue (Address)
Franklin Park, (City) | Illinois (State) | 60131 (Zip)

0316000373 Generator Number

WASTE HAULER(S)

American Chemical Service (Hauler Name) | 420 South Colfax Ave. (Hauler Address)
Griffith, Ind. 46319
S.W.H. Registration Number 0024/001
ILT 0006468 10

Hauler Name | Hauler Address
S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax Ave. (Address)
Griffith (City) | Indiana (State) | 46319 (Zip)
91808902 Site Number
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents
F017
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquids
HAZARD CLASS: DOT 172.101 Paint
WEIGHT FOR D.O.T. USE 17510 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 1870
1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) 34 (DRUMS) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-23-81 (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: 6/23/81

(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES 1 NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 6/23/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 6/23/81 TO 126R T-63 6/24/81 gpm.

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001205

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0367761

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997251
ILD 042075978

J & S Tin Mill Products (Company Name) 3400 N. Powell Avenue (Address)
Franklin Park, (City) Illinois (State) 60131 (Zip)

0316000373 Generator Number

WASTE HAULER(S)

American Chemical Service (Hauler Name) 420 South Colfax Ave. (Hauler Address)
Griffith, Ind. 46319
S.W.H. Registration Number 0024002
ILD042075978

(Hauler Name) (Hauler Address)
S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) 420 South Colfax Ave. (Address) 918089002 Site Number
Griffith (City) Indiana (State) 46319 (Zip) IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Flammable Liquids	DOT 172.101 Paint	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 3245 (1 GALLONS (Circle One) / 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/3/81 (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) James Batt (Authorized Signature) DATE: 8/3/81

(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 8/3/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 8/3/81 TO 124E T-63 8/5/81 gnm

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

001206

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

0434053 (1–7)

Authorization Number 997251 (8–13)

J & S Tin Mill Products Co. (Company Name) | 3400 No. Powell Ave. (Address) | 3124550261 (Phone Number 14) | 0316000373 (Generator Number 24) | G

Franklin Park, (City) | Illinois (State) | 60631 (Zip) | ILD042075978 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton Crestwood, Illinois (Hauler Address) | S.W.H. Registration Number 0024002 (25–31)

(312) 385-8440 (Phone Number) | ILT0006468 10 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

~~American Chemical Service~~ (Facility Name) | ~~420 South Colfax Ave.~~ (Address) | 9180890 2 (39 Site Number 46)

~~Griffith~~ (City) | ~~Indiana~~ (State) | ~~46319~~ (Zip) | ~~3127683400~~ (Phone Number) | ~~IND163602 65~~ (EPA Number)

Alternate (Facility Name) | Address | (39 Site Number 45)

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION	HAZARD CLASS	UN or NA Number	EPA HW Number
Flammable Liquid	DOT 172.101	UN1993	F005

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS OR GAL.

QUANTITY OF WASTE DELIVERED: 00035 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 37 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) Van

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Nancy O'Connor (Authorized Signature) DATE 10-6-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) James Ballis (Authorized Signature) DATE 10 6 81 (54–59)

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

Medical E. Bruce (Authorized Signature) DATE: 10/6/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 126 TK T-63 10/8/81 jm.

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

001207

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

0434054

Authorization Number 997251

J & S Tin Mill Products Co. (Company Name) | 3400 No. Powell Ave. (Address) | 3124550261 (Phone Number) | 0316000373 (Generator Number) | G

Franklin Park, (City) | Illinois (State) | 60631 (Zip) | ILD042075978 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton Crestwood, Illinois (Hauler Address) | S.W.H. Registration Number 0024002

(312) 385-8440 (Phone Number) | ILT0006468 10 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number ~~0024002~~

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

~~American Chemical Service~~ (Facility Name) | ~~420 South Colfax Ave.~~ (Address) | ~~91808902~~ (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND163602 65 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS		
Flammable Liquid	DOT 172.101	UN1993 (UN or NA Number)	F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE ____ LBS / ____ TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 2310 | 1 GALLONS (Circle One) 2 CU. YDS. | 1

METHOD OF SHIPMENT (Circle One): (DRUMS 42 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 Nancy O'Connor (Authorized Signature) DATE: 11-11-81

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) L Lindell (Authorized Signature) DATE: 11/11/81

(2) ____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature) DATE 11/11/81

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

Trailer at dock 11/11/81 ERM
To 125K T-63 ERM 11/12/81

001208

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

0434055

Authorization Number 9 0 7 2 5 1

J & S Tin Mill Products Co. (Company Name) | 3400 No. Powell Ave. (Address) | 3 1 2 4 5 5 0 2 6 1 (Phone Number) | 0 3 1 6 0 0 0 3 7 3 (Generator Number)

Franklin Park, (City) | Illinois (State) | 60631 (Zip) | I L D 0 4 2 0 7 5 9 7 8 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton Crestwood, Illinois (Hauler Address) | S.W.H. Registration Number 0311003

(312) 385-8440 (Phone Number) | I L T 0 0 0 6 4 6 8 1 0 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax Ave. (Address) | Site Number

Griffith (City) | Indiana (State) | 46319 (Zip) | 3127683400 (Phone Number) | I N D 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 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: DOT 172.101 | U N 1 9 9 3 (UN or NA Number) | F 0 0 5 (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: 1980 (1 GALLONS (Circle One) / 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One): (DRUMS) 36 (Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Nancy OConnor (Authorized Signature) DATE 12/9/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) _____ (Authorized Signature) DATE

(2) Gary Strand #161 (Authorized Signature) DATE 12 9 81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

Michael C. Butler (Authorized Signature) DATE 12/9/81

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

On dock 12/9/81 6PM
To 125 R T-63 6PM 12/10/81

001209

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		Ive	
TRANSPORTER # 1			
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DIS— POSAL FACILITY			
TSDF TREATMENT STORAGE OR DIS— POSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)

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

001210

HAZARDOUS WASTE MANIFEST

2-11-18-81-A-2
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

NAME OF CARRIER (SCAC) CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER		EOC	
TRANSPORTER # 1			
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			11/5/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
	X									

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 J Dullaart DATE 11/4/81 5

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To 124 K T-63 EFM 11/13/81

TSDF COPY

001211

HAZARDOUS WASTE MANIFEST

#1-11-16-81-A-1
MANIFEST DOCUMENT NUMBER

IND006421820
SHIPPER NUMBER

Mr. Franks, Inc.
NAME OF CARRIER (SCAC)

ILD067506160
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND006421820	IVC INDUSTRIAL COATINGS 317-636-4407 2245 VALLEY AVE INDIANAPOLIS IN 46218	11/16/81
TRANSPORTER # 1	ILD IND067506160	MR. FRANK INC. 312-596-3377 201 W. 155TH ST, SOUTH HOLLAND IL 60473	11/16/81
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	AMERICAN CHEMICAL SERVICE 219-924-4370 420 S. COLFAX AVE GRIFFITH IN. 46319	11/16/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
Transport	X	F005	FLAMMABLE LIQUID N.O.S.	1993			Gallons	5000		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES — FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
*Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency.

_____ 11/16/81
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

_____ 11-16-81
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

_____ 11/16/81
TSDF SIGNATURE DATE

3

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To 125 K T-63 GRN 11/16/81

TRANSPORTER #2

001212

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0303824 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number: 991216 (8–13)
ILD005245584

IOVITE CHEMICALS INC. (Company Name) | 1625 Oak St. (Address)
MATTESON (City) | ILLINOIS (State) | 60443 (Zip)
0311800001 G (14–24) Generator Number

WASTE HAULER(S)

Mr. Frank's Inc. (Hauler Name) | 201 W. 155 St., So. Holland, IL 60473 (Hauler Address) | S.W.H. Registration Number: 0079003 (25–31) ILD-069506160
Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 440 N. Colfax (Address)
Griffith (City) | IN. (State) | Zip
91808902 (39–46) Site Number
IND-0 6360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvents
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Tank Wagon
HAZARD CLASS: Combustible
I 305
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: 2800 GALLONS (circle One) / 2 CU. YDS. (52–53)

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: 7/1/81
(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: 07/01/81 (54–59)

(2) (Authorized Signature) DATE: (60–65)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE: YES ___ NO 12 81

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: ___/___/___

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGST T-50 7/2/81 gpm

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001213

HAZARDOUS WASTE MANIFEST

C1
MANIFEST DOCUMENT NUMBER

IND016520017
SHIPPER NUMBER

Strand Trucking
NAME OF CARRIER (SCAC)

ILT000646810
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND016520017	InterRoyal Corp., Royal Road, Michigan City, IN 219/872-9411	8/17/81
TRANSPORTER # 1	ILT000646810	Strand Trucking, 13642 S. Kanton Ave., Crestwood, IL 312/385-8440	8/17/81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Svc.,Inc., PO BX 190, Griffith, IN 219/924-4370	8/17/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
38 ~~55~~ steel drums		F005	Flammable liquid N.O.S.	1993				2090 gals		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

_____ 8/17/81
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

_____ _____
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

_____ 8/17/81
TSDF SIGNATURE DATE

TRAILER SPOTTED TO 8/17/81 TO 204E T-150 8/24/81 JPM

5

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TSDF COPY

001214

HAZARDOUS WASTE MANIFEST

MSO 24826
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Mr. Frank, Inc.
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND 005175492	International Harvester Company 2701 S. Coliseum Blvd., Fort Wayne, Indiana 46803	6/25/81
TRANSPORTER # 1	ILD 069506160	Mr. Frank, Inc. South Holland, Illinois	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service, Inc. P.O. Box 190, Griffith, Indiana 46319	6/25/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1	X	F017	Hazardous Waste, Liquid or Solid, N.O.S. Industrial Paint Residue	NA# 1263				~~2000~~ Gal. 4500		

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

D.O.T. Hazard Class - Code 07

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

J. F. Csutik 6-23-81
GENERATOR'S SIGNATURE DATE
219-461-5238

This is to certify acceptance of the hazardous waste shipment.
TRANSPORTER #1 SIGNATURE & DATE
TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.
TSDF SIGNATURE DATE

TO WEST AGR. T-50 6/25/81 JM

5

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TSDF COPY

001215

HAZARDOUS WASTE MANIFEST

MSO 18923
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

MR. FRANK, INC.
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND 005175492	INTERNATIONAL HARVESTER COMPANY 2701 S. Coliseum Blvd., Fort Wayne, Indiana 46803	12/1/81
TRANSPORTER # 1	IND XXXXXXX ILD 069506160	MR. FRANK, INC. South Holland, Illinois	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICE, INC. P. O. Box 190, Griffith, Indiana 46319	12/3/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1	X	F017	Waste Compound, Lacquer, Paint, or Varnish, Removing, Reducing, or Thinning, Liquid	NA# 1142			Gallon	5,000		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

D.O.T. HAZARD CLASS - CODE 07/ Industrial Paint Residue
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

J. F. Csulik 12-3-81
GENERATOR'S SIGNATURE DATE

219-46105238

This is to certify acceptance of the hazardous waste shipment.

12-3-81
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

12/4/81
TSDF SIGNATURE DATE

5

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To 204 R T-50 GKH 12/3/81

TSDF COPY

001216

STATE OF MICHIGAN

Rev. 3/81

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0002952

001217

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Integrated Metal Technology Inc	Rozema Industrial Waste, Inc.	American Chemical Services Inc.
Site Address	**Transporters Address**	**Facility Address**
17155 Van Wagoner Spring Lake, Michigan 49456	2900 Peach Ridge Road Walker, Michigan 49504	420 South Colfax Avenue Griffith, Indiana 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 842-2600	(616) 453-3600	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MID006025845	MIT000647082	IND 016 360 265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Waste Solvent, N.O.S.	Flammable	NA1993	07	1	TR		X			4000	Gal	D001
2.													
3.													
4.													
5.													
6.													

COMMENTS — Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: Jim Corbett
① M.I.T. Plant Engineer

Date Shipped MO. DAY YEAR: 09 29 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No.: No. 1 2184

Transporter Signature: ② Buck R

Date(s) Received: 9 29 81

Subsequent Transporter Vehicle I.D. No's:

Subsequent transporter(s) signature(s): ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: ④ [signature]

Facility Site EPA I.D. Number: IND016360265

☑ Accepted ☐ Rejected

Date Received: 9 29 81

Describe any significant discrepancies between manifest and shipment.

To 126R T-63 9/29/81 gpm.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0382273 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 991525 (8–13)

ENTAGLIO GAL SERVICE (Company Name) | 4900 N RIVER RD (Address) | EPA # IL D001570241 G (14–24 Generator Number)

SCHILLER PK (City) | ILL (State) | 60176 (Zip)

WASTE HAULER(S)

LAND GREBE (Hauler Name) | (Hauler Address) | S.W.H. Registration Number IND 009542824 (25–31)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | P.O. BOX 190 GRIFFITH INDIANA (Address) | 91808902 (39–46 Site Number)

(City) | (State) | (Zip) | EPA # IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

(19 Bbls)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: 55 gal DRUMS | 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: 1045 (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: 1/23/81 | (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: (54–59)

(2) Fred Koselke L.M.T. (Authorized Signature) DATE: 1/26/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) 1-23-81 DATE: 1/23/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: F. Dunfee 1/26/81

UNLOADED 1/26/81 PUMPED TO 123R 2/26/81

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

001218

07
D001
K078

INDUSTRIAL WASTE DISPOSAL MANIFEST

MICHIGAN DEPARTMENT OF NATURAL RESOURCES — ENVIRONMENTAL PROTECTION BUREAU

No. 113117

001219

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE: FACILITY NUMBER MID001868538

NAME Inmont Corporation

ADDRESS 5935 Milford - Detroit, Mi. 48210

PRODUCER ORDER NO. 348560 SHIPMENT DATE 04 (mo.) 21 (da.) 81 (yr.)

PERSON TO CONTACT L. Hojnowski PHONE 313-361-6500

B. DESCRIPTION OF WASTE (Mandatory) HAZARD CLASS: F

SHIPPING NAME: (DOT OR EPA) WASTE, SOLVENTS (NON TOXIC) NOS. UN1998

SIC CODE	PHYS. STATE	TYPE OF CONTAINER	QUANTITY	UNIT	WASTE TYPE	PERCENT SOLIDS
NONE	2	1	50000	2	30	05

CODES:

PHYSICAL STATE 1 = SOLID 2 = LIQUID 3 = GAS 4 = SLUDGE

CONTAINER TYPE 1 = 55 GAL. DRUM 2 = BULK TANK 3 = SELF CONTAINED UNITS 4 = OTHER (Specify)

UNIT 1 = CU.YDS. 2 = GALLONS 3 = POUNDS

WASTE TYPE (SEE INSTRUCTIONS) 99 = OTHER (Specify)

MAJOR COMPONENTS (GREATER THAN 1% CONCENTRATION)

	CONCENTRATION Upper %	Lower %
1. Hydrocarbon Solvents	60	50
2. Oxygenated "	50	
3. Water	02	
4.		
5.		
6.		

INDICATE IF THE WASTE CONTAINS ANY OF THE MATERIALS LISTED IN TABLE TWO.

PARAMETER NO.	CONCENTRATION
____-___-__ NONE	
____-___-__	
____-___-__	
____-___-__	

EMERGENCY SPILL INFORMATION

Fire Use Foam - Spill Use
Saw Dust or Sand & Pick Up

C. NAME OF HAULER Mr. Frank, Inc.

BUSINESS ADDRESS 201 W. 155th Street - S. Holland, Ill. 60473

NAME OF PROCESSOR American Chem

SITE ADDRESS 420 S. Colfax - Griffith Ind. 46319

D. GENERATOR CERTIFICATION:

THIS IS TO CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY THAT THE MATERIALS DESCRIBED IN I/B 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.

NAME & TITLE (please print)	SIGNATURE	DATE
COORDINATOR L. HOJNOWSKI	L. Hojnowski	4-21-81

Keep goldenrod copy for your records. Send pink copy to:

DEPARTMENT OF NATURAL RESOURCES, WATER QUALITY DIVISION, P.O. BOX 30028, LANSING, MI 48909

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER)

A. NAME MR FRANK INC

ADDRESS 201 W155TH ST SOUTH HOLLAND ILL

TELEPHONE NUMBER 596 3377 PICK-UP DATE 4 (mo.) 21 (da.) 81 (yr.)

B. HAULER JOB NUMBER 0079023 FACILITY NUMBER ILD069506106

C. VEHICLE LICENSE NO. 34071 STATE IL

D. HAULER CERTIFICATION:

THIS IS TO CERTIFY UNDER THE PENALTY OF PERJURY THE WASTE DESCRIBED IN PART I/B OF THIS MANIFEST OR IN THE ATTACHMENT WAS ACCEPTED BY ME FOR TRANSPORTATION TO THE PROCESSING FACILITY NAMED IN PART I/C.

NAME AND TITLE (please print)	SIGNATURE	DATE
MICHAEL MARTIN	Michael Martin	4-21-81

Keep canary copy for your records.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY)

FACILITY NUMBER IND011636026S

A. NAME AMERICAN CHEMICAL

ADDRESS 420 S. COLFAX GRIFFITH IND

TELEPHONE NUMBER 219-924-4370 ACCEPTANCE DATE 4 (mo.) 21 (da.) 81 (yr.)

B. PROCESS METHOD:

☐ INCINERATION ☑ RECLAMATION ☐ OTHER (Specify)

C. CERTIFICATION:

THE HAULER NAMED ABOVE DELIVERED THE WASTE DESCRIBED IN PART I/B OF THIS MANIFEST TO THIS PROCESING FACILITY. IT WAS ACCEPTABLE MATERIAL FOR PROCESSING UNDER THE TERMS OF FEDERAL, STATE, AND LOCAL REGULATIONS. I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

NAME AND TITLE (please print)	SIGNATURE	DATE
FDW/NFG.	FD Wilke	4-21-81

Keep green copy for your records. Send white copy to:

DEPARTMENT OF NATURAL RESOURCES, WATER QUALITY DIVISION, P.O. BOX 30028, LANSING, MI 48909

TO EAST ACTT 4/21/81 T-50 JAM

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 517-373-7660, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800-424-8802

R-4896 11/78

INDUSTRIAL WASTE DISPOSAL MANIFEST

MICHIGAN DEPARTMENT OF NATURAL RESOURCES — ENVIRONMENTAL PROTECTION BUREAU

Nº 14360 143600

001220

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE: FACILITY NUMBER MID001868538

NAME Inmont Corporation

ADDRESS 5935 Milford Avenue - Detroit, Mi. 48210

PRODUCER ORDER NO. 348560 SHIPMENT DATE 06 (mo.) 02 (da.) 81 (yr.)

PERSON TO CONTACT Larry Hojnowski PHONE 313-361-6500

B. DESCRIPTION OF WASTE (Mandatory) HAZARD CLASS: F

SHIPPING NAME: (DOT OR EPA) Waste Solvent NOS. NA1993

SIC CODE	PHYS. STATE	TYPE OF CONTAINER	QUANTITY	UNIT	WASTE TYPE	PERCENT SOLIDS
WOME	2	1-2	50000	2	36	05

CODES:

PHYSICAL STATE 1 = SOLID 2 = LIQUID 3 = GAS 4 = SLUDGE

CONTAINER TYPE 1 = 55 GAL. DRUM 2 = BULK TANK 3 = SELF CONTAINED UNITS 4 = OTHER (Specify)

UNIT 1 = CU.YDS. 2 = GALLONS 3 = POUNDS

WASTE TYPE (SEE INSTRUCTIONS) 99 = OTHER (Specify)

MAJOR COMPONENTS (GREATER THAN 1% CONCENTRATION) — CONCENTRATION Upper % / Lower %

1. Dirty Wash Solvent NA1993, F003 -07-
2.
3. - Flammable Liquid
4.
5.
6.

INDICATE IF THE WASTE CONTAINS ANY OF THE MATERIALS LISTED IN TABLE TWO.

PARAMETER NO. ____-___-___ CONCENTRATION

NONE

EMERGENCY SPILL INFORMATION

Fire - Use foam

Spill - use saw dust or sand & pick up

C. NAME OF HAULER Mr. Frank Inc.

BUSINESS ADDRESS 201 W. 155th Street - S. Holland, Ill 60473

NAME OF PROCESSOR American Chem

SITE ADDRESS 420 S. Colfax,- Griffith, Ind. 46319

D. GENERATOR CERTIFICATION:

THIS IS TO CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY THAT THE MATERIALS DESCRIBED IN I/B 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.

NAME & TITLE (please print)	SIGNATURE	DATE
L. Hojnowski Salvage Coordinator	L. Hojnowski	6-2-81

Keep goldenrod copy for your records. Send pink copy to:

DEPARTMENT OF NATURAL RESOURCES, WATER QUALITY DIVISION, P.O. BOX 30028, LANSING, MI 48909

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER)

A. NAME MR FRANK

ADDRESS SOUTH HOLLAND ILL

TELEPHONE NUMBER 5963377 PICK-UP DATE 6 (mo.) 2 (da.) 81 (yr.)

B. HAULER JOB NUMBER 0079025 FACILITY NUMBER 0695061160

C. VEHICLE LICENSE NO. 34068 STATE ILL

D. HAULER CERTIFICATION:

THIS IS TO CERTIFY UNDER THE PENALTY OF PERJURY THE WASTE DESCRIBED IN PART I/B OF THIS MANIFEST OR IN THE ATTACHMENT WAS ACCEPTED BY ME FOR TRANSPORTATION TO THE PROCESSING FACILITY NAMED IN PART I/C.

NAME AND TITLE (please print)	SIGNATURE	DATE
GARY DRUEN	Gary Druen	6-2-81

Keep canary copy for your records.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY)

A. NAME AMERICAN CHEMICAL FACILITY NUMBER IND 016360265

ADDRESS 420 So. COLFAX, GRIFFITH, IND.

TELEPHONE NUMBER 2199244370 ACCEPTANCE DATE 6 (mo.) 3 (da.) 81 (yr.)

B. PROCESS METHOD:

☐ INCINERATION ☐ RECLAMATION ☐ OTHER (Specify)

C. CERTIFICATION:

THE HAULER NAMED ABOVE DELIVERED THE WASTE DESCRIBED IN PART I/B OF THIS MANIFEST TO THIS PROCESING FACILITY. IT WAS ACCEPTABLE MATERIAL FOR PROCESSING UNDER THE TERMS OF FEDERAL, STATE, AND LOCAL REGULATIONS. I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

NAME AND TITLE (please print)	SIGNATURE	DATE
F. DUNFEE	F. Dunfee	6-3-81

Keep green copy for your records. Send white copy to:

DEPARTMENT OF NATURAL RESOURCES, WATER QUALITY DIVISION, P.O. BOX 30028, LANSING, MI 48909

To 124Z T-63 6/3/81 gm

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 517-373-7660, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800-424-8802

R-4896 11/78

STATE OF MICHIGAN

Rev. 3/81

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☒ Act 136 Waste (OTHER) MI 0000531

001221

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Inmont Corporation	Mr. Frank, Inc.	American Chemical Service, Inc.
Site Address	**Transporters Address**	**Facility Address**
5935 Milford Avenue Detroit, Michigan 48210	201 W. 155th Street South Holland, Ill. 60473	420 South Colfax Griffith, Ind. 46319
Phone Number	**Phone Number**	**Phone Number**
(313) 361-6553	(312 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
M I D 0 9 1 8 6 8 5 3 8	I L D 0 6 9 5 0 6 1 6 0	I N D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES / WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Waste, Solvent, N.O.S.	Flammable Liquid	NA 1993	0 7	1	CT		X			5 0 0 0	Gals.	F 0 0 3
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

Fire Use Foam - Spill Use Sawdust or Sand & Pickup - Eye & Skin Protection Should be Worn.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① Larry Hojnowski — Date Shipped MO. DAY YEAR: 06 16 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 609023 — Transporter Signature ② Michael D. Martin — Date(s) Received: 06 16 81

Subsequent Transporter Vehicle I.D. No's — Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ Robert D. Johnson — ☒ Accepted ☐ Rejected — Date Received: 6 16 81

Facility Site EPA I.D. Number

Describe any significant discrepancies between manifest and shipment. TO EAST AGIT, T-50 6/16/81 JPM

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

STATE OF MICHIGAN

Rev. 3/81

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☒ Act 136 Waste (OTHER)

MI 0000528

001222

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Inmont Corporation	Mr. Frank, Inc.	American Chemical Service, Inc.
Site Address	**Transporters Address**	**Facility Address**
5935 Milford Avenue Detroit, Michigan 48210	201 W. 155th Street South Holland, Ill. 60473	420 South Colfax Griffith, Ind. 46319
Phone Number	**Phone Number**	**Phone Number**
(313) 361-6553	(312 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
M I D 0 0 1 8 6 8 5 3 8	I L D 0 6 9 5 0 6 1 6 0	I N D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Waste, Solvent, N.O.S.	Flammable Liquid	NA 1993	0 7	1	CT		X			1 5 0 0 0	Gals.	F 0 0 3
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

Fire Use Foam - Spill Use Sawdust or Sand & Pickup - Eye & Skin Protection Should be Worn.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① [signature] — Date Shipped MO. DAY YEAR: 04 30 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 0079 021 — Transporter Signature ② [signature] — Date(s) Received: 04 30 81

Subsequent Transporter Vehicle I.D. No's — Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery. TO WEST AGIT T-50 4/30/81 JFM.

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 — ☒ Accepted ☐ Rejected — Date Received: 05 30 81

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☒ Act 136 Waste (OTHER)

MI 0000526

001223

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Inmont Corporation	Mr. Frank, Inc. A	American Chemical Service, Inc.
Site Address	**Transporters Address**	**Facility Address**
5935 Milford Avenue Detroit, Michigan 48210	201 W. 155th Street South Holland, Ill. 60473	420 South Colfax Griffith, Ind. 46319=
Phone Number	**Phone Number**	**Phone Number**
(313) 361-6553	(312 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MIDO01868538	ILD069506160	IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1. W	Waste, Solvent, NOQ.S.	Flammable Liquid	NA 1993	07	1	CT		XX			5000	Gals.	F003
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

Fire Use Foam - Spill Use Sawdust or Sand & Pickup - Eye & Skin Protection Should be Worn.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① Larry Ginowski — Date Shipped MO. DAY YEAR: 07 14 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 00179029

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② Michael Winterton — Date(s) Received: 07 14 81

Subsequent transporter(s) signature(s) ③ — Date(s) Received: 07 14 81

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ — Facility Site EPA I.D. Number — ☒ Accepted ☐ Rejected — Date Received: 07 15 81

Describe any significant discrepancies between manifest and shipment.

4000 TO 125R
1000 TO 126R
T-63 7/14/81 gtm

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☒ Act 136 Waste (OTHER) MI 0000527

001224

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Inmont Corporation	Mr. Frank, Inc.	American Chemical Service, Inc.
Site Address	**Transporters Address**	**Facility Address**
5935 Milford Avenue Detroit, Michigan 48210	201 W. 155th Street South Holland, Ill. 60473	420 South Colfax Griffith, Ind. 46319
Phone Number	**Phone Number**	**Phone Number**
(313) 361-6553	(312 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
M I D 0 0 1 8 6 8 5 3 8	I L D 0 6 9 5 0 6 1 6 0	I N D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.		Flammable											
2.	Waste, Solvent, N.O.S.	Liquid	NA 1993	0 7	1	CT		X			5 0 0 0	Gals.	F 0 0 3
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

Fire Use Foam - Spill Use Sawdust or Sand & Pickup - Eye & Skin Protection Should be Worn.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① Larry Rojnowski — Date Shipped MO. DAY YEAR: 07 28 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 00 79 02 9

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② Michael Morton — Date(s) Received: 07 28 81

Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

To West Agit I-50 7/28/81 jpn

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ — ☒ Accepted ☐ Rejected — Date Received: 07 29 81

Facility Site EPA I.D. Number

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

STATE OF MICHIGAN

Rev. 3/81

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☒ Act 136 Waste (OTHER) MI 0000530

001225

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Inmont Corporation ATTN: L. HOTNOWSKI	Mr. Frank, Inc.	American Chemical Service, Inc.
Site Address	**Transporters Address**	**Facility Address**
5935 Milford Avenue Detroit, Michigan 48210	201 W. 155th Street South Holland, Ill. 60473	420 South Colfax Griffith, Ind. 46319
Phone Number	**Phone Number**	**Phone Number**
(313) 361-6553	(312 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
M I D 0 0 1 8 6 8 5 3 8	I L D 0 6 9 5 0 6 1 6 0	I N D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Waste, Solvent, N.O.S.	Flammable Liquid	NA 1993	0 7	1	CT		X			4500 ~~5000~~	Gals.	F 0 0 3
2.													
3.													
4.													
5.													
6.													

COMMENTS — Include Safety precautions and special handling instructions.

Fire Use Foam - Spill Use Sawdust or Sand & Pickup - Eye & Skin Protection Should be Worn.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① Larry Hotnowski — Date Shipped MO. DAY YEAR: 08 11 81

TRANSPORTER 1 COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. 1 007901 9

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② Robert Perkins — Date(s) Received

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] — ☑ Accepted ☐ Rejected — Date Received 8 11 81

Facility Site EPA I.D. Number

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

To 124 K T-63 8/11/81 JM

STATE OF MICHIGAN

Rev. 3/81

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☒ Act 136 Waste (OTHER) MI 0000568

001226

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
INMONT CORP.	MR FRANK INC.	AM CHEM SERVICES INC.
Site Address	**Transporters Address**	**Facility Address**
5935 MILFORD AVE. DETROIT, MICH. 48210	201 W. 155TH ST. SOUTH HOLLAND ILL. 60473	420 So COLFAX GRIFFITH, IND. 46319
Phone Number	**Phone Number**	**Phone Number**
(313) 361 6553	(312 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MID001865538	140069506160	IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	WASTE SOLVENT N.O.S.	FLAMMABLE LIQUID	NA1993	07	1	CT		X			5000	GALS	F003
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

FIRE - USE FOAM
SPILL - USE SAWDUST/SAND & PICKUP .. WEAR EYE PROTECTION

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all *information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be* used in administrative and court proceedings.

Generator Signature ① C. Weber — Date Shipped MO. DAY YEAR: 08 25 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 1079029 — Transporter Signature ② Gary Miller — Date(s) Received

Subsequent Transporter Vehicle I.D. No's — Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

To 125x T-63 8/25/81 gpm

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 [illegible] — ☒ Accepted ☐ Rejected — Date Received 08 25 81

Facility Site EPA I.D. Number IND016360265

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☒ Act 136 Waste (OTHER) MI 0000529

001227

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Inmont Corporation	Mr. Frank, Inc.	American Chemical Service, Inc.
Site Address	**Transporters Address**	**Facility Address**
5935 Milford Avenue Detroit, Michigan 48210	201 W. 155th Street South Holland, Ill. 60473	420 South Colfax Griffith, Ind. 46319
Phone Number	**Phone Number**	**Phone Number**
(313) 361-6553	(312) 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
M I D 0 0 1 8 6 8 5 3 8	I L D 0 6 9 5 0 6 1 6 0	I N D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Waste, Solvent, N.O.S.	Flammable Liquid	NA 1993	0 7	1	CT		X			5 0 0 0	Gals.	F 0 0 3
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

Fire Use Foam - Spill Use Sawdust or Sand & Pickup - Eye & Skin Protection Should be Worn.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① A. Weber — Date Shipped MO. DAY YEAR: 09 08 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 aa29029 — Transporter Signature ② Michael D. Martin — Date(s) Received 090881

Subsequent Transporter Vehicle I.D. No's — Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ — ☒ Accepted ☐ Rejected — Date Received 090881

Facility Site EPA I.D. Number I N D 0 1 6 3 6 0 2 6 5

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY To 125X T-63 9/8/81 jrm.

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☒ Act 136 Waste (OTHER) MI 0070029

0012228

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Attn: L Hojnowski INMONT CORPORATION	MR. FRANK, INC.	AMERICAN CHEMICAL SERVICE, INC.
Site Address 5935 Milford Avenue Detroit, Mi. 48210	**Transporters Address** 201 W. 155th Street South Holland, Ill. 60473	**Facility Address** 420 South Colfax Griffith, Ind. 46319
Phone Number (313) 361-6553	**Phone Number** (313) 596-3377	**Phone Number** (219) 924-4370
Generator's Site EPA I.D. Number MID010685381	**Transporter's EPA I.D. Number** ILD069506160	**Facility Site EPA I.D. Number** IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	WASTE SOLVENT NOS.	FLAMMABLE LIQUID	NA 1993	017	1	CT.		X			5020	GALS.	F003
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

FIRE USE FOAM - SPILL USE SAWDUST OR SAND & PICK UP - EYE & SKIN PROTECTION SHOULD BE WORN.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① Larry Hojnowski

Date Shipped MO. DAY YEAR: 09 22 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 0079079

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② Robert Parker

Date(s) Received: 09 22 81

Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④

Facility Site EPA I.D. Number: IND016360265

☑ Accepted ☐ Rejected

Date Received: 9 22 81

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY TO 125E T-63 9/22/81 J7971

STATE OF MICHIGAN

Rev. 3/81

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☒ Act 136 Waste (OTHER) MI 0070025

001229

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
INMONT CORPORATION Attn: L Hojnowski	MR. FRANK, INC.	AMERICAN CHEMICAL SERVICE, INC.
Site Address	**Transporters Address**	**Facility Address**
5935 Milford Avenue Detroit, Mi. 48210	201 W. 155th Street South Holland, Ill. 60473	420 South Colfax Griffith, Ind. 46319
Phone Number	**Phone Number**	**Phone Number**
(313) 361-6553	(313) 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
M I D 0 0 1 0 6 8 5 3 8	I L D 0 6 9 5 0 6 1 6 0	I N D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	WASTE, SOLVENT, N.O.S.	FLAMMABLE LIQUID	NA 1993	07	1	CT		X			0 0 5 0 0 0	GALS	F 0 0 3
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

FIRE USE FOAM - SPILL USE SAWDUST OR SAND & PICK UP - EYE & SKIN PROTECTION SHOULD BE WORN.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① C. Weber

Date Shipped MO. DAY YEAR: 10 20 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 0079023

Transporter Signature ② Robert Rubens

Date(s) Received

Subsequent Transporter Vehicle I.D. No's

Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ [signature]

Facility Site EPA I.D. Number: I N D 0 1 6 3 6 0 2 6 5

☑ Accepted ☐ Rejected

Date Received: 10 20 81

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

To 124E T-63 10/20/81 JRM TSDF COPY

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☒ Act 136 Waste (OTHER) MI 0070024

001230

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
INMONT CORPORATION Attn: L Hojnowski	MR. FRANK, INC.	AMERICAN CHEMICAL SERVICE, INC.
Site Address	**Transporters Address**	**Facility Address**
5935 Milford Avenue Detroit, Mi. 48210	201 W. 155th Street South Holland, Ill. 60473	420 South Colfax Griffith, Ind. 46319
Phone Number	**Phone Number**	**Phone Number**
(313) 361-6553	(313) 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
M I D 0 0 1 0 6 8 5 3 8	I L D 0 6 9 5 0 6 1 6 0	I N D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	WASTE SOLVENT NOS.	FLAMMABLE LIQUID	NA1993	07	1	CT.		X			5000	GALS.	F003
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

FIRE USE FOAM - SPILL USE SAWDUST OR SAND & PICK UP - EYE & SKIN PROTECTION SHOULD BE WORN.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① Larry Hojnowski — Date Shipped MO. DAY YEAR: 10 06 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 007 9019 — Transporter Signature ② Gary Bruen — Date(s) Received: 10 06 81

Subsequent Transporter Vehicle I.D. No's — Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ — ☒ Accepted ☐ Rejected — Date Received: 10 6 81

Facility Site EPA I.D. Number: I N D 0 1 6 3 6 0 2 6 5

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

To 126 T-63 10/6/81 gpm

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☒ Act 136 Waste (OTHER) MI 0070026

001231

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
INMONT CORPORATION Attn: L Hojnowski	MR. FRANK, INC.	AMERICAN CHEMICAL SERVICE, INC.
Site Address	**Transporters Address**	**Facility Address**
5935 Milford Avenue Detroit, Mi. 48210	201 W. 155th Street South Holland, Ill. 60473	420 South Colfax Griffith, Ind. 46319
Phone Number	**Phone Number**	**Phone Number**
(313) 361-6553	(313) 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
M I D 0 0 1 0 6 8 5 3 8	I L D 0 6 9 5 0 6 1 6 0	I N D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	WASTE SOLVENTS NOS	FLAMMABLE LIQUID	NA1993	012	1	CT		X			005000	GALS.	F003
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

FIRE USE FOAM - SPILL USE SAWDUST OR SAND & PICK UP - EYE & SKIN PROTECTION SHOULD BE WORN.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① L. Hojnowski — Date Shipped MO. DAY YEAR: 11 03 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 007902 — Transporter Signature ② Robert Perkins — Date(s) Received: 11 03 81

Subsequent Transporter Vehicle I.D. No's — Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ — ☒ Accepted ☐ Rejected — Date Received: 11 03 81

Facility Site EPA I.D. Number: IND 0 1 6 3 6 0 2 6 5

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

To 125 R T-63 GRM 11/3/81

TSDF COPY

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☒ Act 136 Waste (OTHER) MI 0070027

001232

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Attn: L Hojnowski INMONT CORPORATION	MR. FRANK, INC.	AMERICAN CHEMICAL SERVICE, INC.
Site Address	**Transporters Address**	**Facility Address**
5935 Milford Avenue Detroit, Mi. 48210	201 W. 155th Street South Holland, Ill. 60473	420 South Colfax Griffith, Ind. 46319
Phone Number	**Phone Number**	**Phone Number**
(313) 361-6553	(313) 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
M I D 0 0 1 0 6 8 5 3 8	I L D 0 6 9 5 0 6 1 6 0	I N D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	WASTE DIRTY SOLVENT NOS.	FLAMMABLE LIQUID	NA1993	017	1	CT		X			005000	GALS.	F003
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

FIRE USE FOAM - SPILL USE SAWDUST OR SAND & PICK UP - EYE & SKIN PROTECTION SHOULD BE WORN.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: ① Larry Hojnowski — Date Shipped MO. DAY YEAR: 11 17 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. 1: 0079029

Subsequent Transporter Vehicle I.D. No's:

Transporter Signature: ② Robert Perkins — Date(s) Received: 11 17 81

Subsequent transporter(s) signature(s): ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: ④ — Facility Site EPA I.D. Number: IND016360265

☒ Accepted ☐ Rejected — Date Received: 11 17 81

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

To 126 R T-63 GRM 11/17/81

TSDF COPY

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☒ Act 136 Waste (OTHER) MI 0070028

001233

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Attn: L Hojnowski INMONT CORPORATION	MR. FRANK, INC.	AMERICAN CHEMICAL SERVICE, INC.
Site Address	**Transporters Address**	**Facility Address**
5935 Milford Avenue Detroit, Mi. 48210	201 W. 155th Street South Holland, Ill. 60473	420 South Colfax Griffith, Ind. 46319
Phone Number	**Phone Number**	**Phone Number**
(313) 361-6553	(313) 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MID010106853 8	ILD069506160	IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	WASTE SOLVENT NOS.	FLAMMABLE LIQUID	NA1993	07	1	CT		X			0055 00	GALS.	F003
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

FIRE USE FOAM - SPILL USE SAWDUST OR SAND & PICK UP - EYE & SKIN PROTECTION SHOULD BE WORN.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: ① Larry Hojnowski — Date Shipped MO. DAY YEAR: 12 01 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No.: No. 1 0079019 — Transporter Signature: ② Earl Bruen — Date(s) Received: 12 01 81

Subsequent Transporter Vehicle I.D. No's — Subsequent transporter(s) signature(s): ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: ④ — Facility Site EPA I.D. Number: IND016360265 — ☒ Accepted ☐ Rejected — Date Received: 12 1 81

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY To 126R T-63 GRM 12/1/81

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☒ Act 136 Waste (OTHER) MI 0070048

001234

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
INMONT CORP. - Attn: L. Hojnowski	MR. FRANK, INC.	AMERICAN CHEMICAL SERVICE, INC.
Site Address	**Transporters Address**	**Facility Address**
5935 Milford Avenue Detroit, Michigan 48210-1190	201 W. 155th Street South Holland, Ill 60473	420 South Colfax Griffith, Ind. 46319
Phone Number	**Phone Number**	**Phone Number**
(313) 361-6553	(312) 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
M I D 0 0 1 8 6 8 5 3 8	I L D 0 6 9 5 0 6 1 6 0	I N D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	WASTE, SOLVENT, N.O.S.	FLAMMABLE LIQ.	NA 1993	07	1	CT		X			0 0 5 0 0 0	Gals.	F 0 0 3
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

FIRE - USE FOAM.
SPILL - USE SAWDUST OR SAND & PICKUP.
EYE & SKIN PROTECTION SHOULD BE WORN.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① A. Weber — Date Shipped MO. - DAY. YEAR: 12/15/81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 00790225 — Transporter Signature ② Robert Parker — Date(s) Received: 12/15/81

Subsequent Transporter Vehicle I.D. No's — Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ — Facility Site EPA I.D. Number: IND 063602 65 — ☒ Accepted ☐ Rejected — Date Received: 12 18 81

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

To 211R 7-50 GRM 12/15/81

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

0344616

Authorization Number 997835

INMONT CORP (Company Name)	3030 W 51ST ST (Address)	ILL. # - ILD005019340
CHICAGO (City)	ILL (State)	60632 (Zip)

03160000 69 G
Generator Number

WASTE HAULER(S)

CHEMICAL WASTE (Hauler Name)	4601 W 138TH ST (Hauler Address)	S.W.H. Registration Number 0038008
		FED ILD 066190682
(Hauler Name)	(Hauler Address)	S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL CULTAK & C/O AR (Facility Name)	(Address)	91808902 Site Number
GRIFFITH (City)	IND (State)	(Zip) IND-016366265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY INK SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
WASTE SOLVENTS	FLAMMABLE	33,300 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 4900 (GALLONS) 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: 1/13/81 F003 (Authorized Signature) UN-1210

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) (Authorized Signature) DATE: 1/14/81

(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 1/14/81

COMMENTS OR SPECIAL INSTRUCTIONS: PUMPED TO WEST AGT T-50 1/14/81

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

001235

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

0389328
1 7

Authorization Number 997835 8 13

INMONT CORP (Company Name) | 3030 W 51ST ST Address
CHICAGO City | IL State | 60632 Zip

0316000069.
ILD # ILD005059340
14 Generator Number G 24

WASTE HAULER(S)

RAPID LIQUID WASTE Hauler Name | 4601 W. 138TH ST Hauler Address
S.W.H. Registration Number 0038013. 25 31
ILD 066190568.

Hauler Name | Hauler Address
S.W.H. Registration Number 32 38

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | CALFAX & C/O RR. Address
GRIFFITH City | IND. State | Zip
91808902. 39 Site Number 46
IND-016360265.

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PROCESS INK WASTE
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE INK
HAZARD CLASS: FLAM
WEIGHT FOR D.O.T. USE 35,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 5000 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: 2/16/81 T-50 (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) Jack Murphy S. Main (Authorized Signature) DATE: 2 16 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:

BOB Mauck (Authorized Signature) DATE: 2 16 81 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: To 205E 2/16/81 T-50 Jim Murphy

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001236

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

737 7400

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 627[illegible]
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

INMONT CORP (Company Name) | 3030 WEST 31ST ST (Address) | ILL
CHICAGO (City) | ILL (State) | 60632 (Zip) | 0 311 (14) Gener[illegible]

WASTE HAULER(S)

INDIANA HAZ WASTE (Hauler Name) | 11601 W. 13[illegible] ST (Hauler Address) | S.W.H. Registration Number (25) IL038 01
ILD. 066160967

Hauler Name | Hauler Address | S.W.H. Registration Number (32 — 38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | PLANT C/O RR (Address) | 91808902 (39 Site Number 46)
CANTON (City) | IND (State) | (Zip) | IND. 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIATHYL SOLVENTS F003 | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: DIATHYL SOLVENTS | HAZARD CLASS: FLAMMABLE | WEIGHT FOR D.O.T. USE 35,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 5000 (47 — 52) | (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: 3/11/81 | D H Dethrow (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) Wm E Jost (Authorized Signature) | DATE: 03/11/81 (54 — 59)

(2) (Authorized Signature) | DATE: / / (60 — 65)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Bob Mauck (Authorized Signature) | DATE: 03/11/81 (60 — 65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST 40TH K 3/11/81 T-50 Jim Murphy

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001237

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

0344639

737-7400

Authorization Number 992-835

INMONT CORP (Company Name) | 3030 W FIRST ST. (Address)

ILD 005093430

CHGO (City) | IL (State) | 60632 (Zip)

03160000069 G (Generator Number)

WASTE HAULER(S)

KEEN DISPOSAL WASTE (Hauler Name) | 7600 W 183RD ST (Hauler Address)

S.W.H. Registration Number 0038010

ILD-066190968

Hauler Name | Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | CULLOM & C/O R.R. (Address)

9180 Site Number

GRIFFITH (City) | IND (State) | Zip

IND. 016360-61

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY IND SOLVENTS F003

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
DIRTY SOLVENTS	Flammable

WEIGHT FOR D.O.T. USE 35,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 (GALLONS) 2 CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/20/81 (Authorized Signature)

UN 1210

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) Hull & Selby (Authorized Signature) DATE: 03/20/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 3/20/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST ACIT T-50 3/20/81 Jim Murphy

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001238

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

0510403 (1–7)

Authorization Number 997-835 (8–13)

~~ILL 0005059340~~

(Company Name)	Address	Phone Number	Generator Number
INMONT CORP	3030 W. 51ST ST.	737-7400	0316006069 (G, 14–24)

City	State	Zip	EPA Number
CHICAGO	ILL	60632	ILL 000505934O

WASTE HAULER(S)

Hauler Name	Hauler Address	S.W.H. Registration Number (25–31)
RAPID LIQUID	4601 W. 135TH ST	003808

Phone Number	EPA Number
785-6206	ILD 066190968

Hauler Name	Hauler Address	S.W.H. Registration Number (32–38)

Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number (39–46)
AMERICAN CHEMICAL	COLFAX & S/B R.R.	9180890 2

City	State	Zip	Phone Number	EPA Number
GRIFFITH	IND			IND. 016360265

Alternate (Facility Name)	Address	Site Number (39–46)

City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	~~EPA HW Number~~
DIRTY SOLVENTS	FLAMMABLE	UN1210	~~F003~~

WEIGHT FOR D.O.T. USE 33606 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 4800 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 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 9/14/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE 9/15/81 (54–59)

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

_____ (Authorized Signature) DATE 9/15/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 211K T-50 9/15/81 3PM

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

001239

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an Acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 00716

TO: American Chemical Service	FROM: National Can Corporation
T/S/D/F: American Chemical Service	Generator: W. H. Hutchinson & Son
E.P.A. ID Code No.: ILD 016360265	E.P.A. ID Code No.: ILD 060348851
Address: 720 South Wolfax	Address: 1031 North Cicero Avenue
Destination: Griffith, Indiana	Origin: Chicago, Illinois 60651
Phone: (219) 924-4370	Phone: (312) 626-8722

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
2 DRUMS	Paint Residues & Sludge Wastes					
9 TANKS	Flammable Liquid N.O.S.	Flammable Liquid	UN1993	F003 F005		Tank Truck Placards

PLACARDS REQUIRED: Flammable

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D/F _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name: William Miller - Plt. Mgr.
Phone: (312) 626-8722 494-0016

National Response Center: 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Trucker Inc. E.P.A. ID No. ILD-000000000
Address 251 W. 155th Street
City South Holland State Ill. Zip 60473 Phone (312) 596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL/FACILITY TO EAST ACRE 2/2/81 T-50

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D/F Signature Sam Murphy Date _____

HAZARDOUS WASTE

HAZARDOUS WASTE

T/S/D/F COPY

FORM 8700-22 (6-PLM)

001240

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0197594
1 7

Authorization Number 9 9 7 6 5 5
8 13

W. H. Hutchinson & Son (Company Name) | 1031 N. Cicero Avenue (Address) | ILD 060348851

Chicago (City) | Illinois (State) | 60651 (Zip)

0 3 1 6 0 0 0 3 8 5 G
14 Generator Number 24

WASTE HAULER(S)

(1) Mr. Franks Inc. (Hauler Name) | 201 W. 155th Street South Holland, IL (Hauler Address) | ILD-069506166

S.W.H. Registration Number 0 0 7 9 0 0 3
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 So. Kolfax P.O. Box 190 (Address) | IND 016360265

9 1 8 0 8 9 0 2
39 Site Number 46

Griffith (City) | Indiana (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Residues & Sludge Wastes

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Tank Truck, N.O.S. Flammable

HAZARD CLASS: Flammable

F003 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

F003
F005

DATE: 2/2/81 William Weller (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 002300 (47–52) ~~CU YDS~~ GALLONS (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS ~~TANK TRUCK~~ OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 02 02 81 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Bob Mauck (Authorized Signature) DATE 02/02/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: 1000 EAST ACIT R 2/2/81 T-50 Jim Murphy
1300 TO Dump BOX 2/2/81 T-50

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001241

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 09748

TO: American Chemical Service	FROM: [illegible]
T/S/D/F American Chemical Service	Generator W. W. Hutchinson & Son
E.P.A. ID Code No. ILD 016360205	E.P.A. ID Code No. ILD 000348851
Address 420 So. Kolfax	Address 1031 N. Cicero Avenue
Destination Griffith, Indiana	Origin Chicago, Illinois 60651
Phone (219) 924-4370	Phone (312) 626-8722

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
	Paint Residues	Flammable	UN 1993	F003		TANK TRUCK
		Liquid		F005		PLACARDS

PLACARDS REQUIRED FLAMMABLE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D/F _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name William Miller - Plt. Mgr.
Phone (312) 626-8722 494-5015

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency.

Generator Signature _____ Date 5/11/81

TRANSPORTER #1 Mr. Franks Inc. E.P.A. ID No. ILD 089506160
Address 201 W. 155th Street
City South Holland State IL Zip 60473 Phone (312) 596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL/FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D/F Signature _____ Date _____

T/S/D/F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

40 CFR 262.21

001242

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

0435889

Authorization Number 9 9 7 6 5 5

W. H. Hutchinson & Son (Company Name) | 1031 N. Cicero (Address) | 312/626-8722 (Phone Number) | 0 3 1 6 0 0 0 3 8 5 G (Generator Number)

Chicago (City) | Illinois (State) | 60651 (Zip) | I L D 0 6 0 3 4 8 8 5 1 (EPA Number)

WASTE HAULER(S)

Mr. Franks Inc. (Hauler Name) | 201 W. 155th Street, South Holland, IL (Hauler Address) | S.W.H. Registration Number 0 0 7 9 /00 4

312/ 596-3377 (Phone Number) | I L D [illegible] 5 0 6 1 6 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION - STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Kostax P.O. Box 190 (Address) | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 219/ 924-4370 (Phone Number) | I N D 013 6 0 2 6 5 (EPA Number)

None (Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Residues | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION	HAZARD CLASS	UN or NA Number	EPA HW Number
Tank Truck N.O.S. Flammable	Flammable	U N 1 9 9 3	F 0 0 3 F 0 0 5

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 001200 (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 William Miller (Authorized Signature) DATE 5/11/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Ronald Bridgewater (Authorized Signature) DATE 5 11 81 (54–59)

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO_____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature) DATE 5/11/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 2042 5/11/81 T-50 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

001243

HAZARDOUS WASTE MANIFEST

003
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	IND 078922762	Houba, Inc. P. O. Box 187 Culver, Indiana (219)842-3797 46511	June 15,19
TRANSPORTER # 1			
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 078922762	American Chem. Serv. 420 So.Colfax Griffith, Indiana 46319	6/18/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
12 Drums		D 001	SOLVENTS, N.O.S. Flammable Liquid	NA 1993			7.2#/gal	660gal		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges
_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE
UNLOADED 6/18/81 AT DOCK

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE
TO 204R T-50 6/19/81 9?3?

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

001244

HAZARDOUS WASTE MANIFEST

004
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Landgrebe Motor Transport, Inc.
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND 078922762	Houba, Inc. P.O. Box 187 Culver, Ind. 46511 (219)842-3797	
TRANSPORTER # 1	IND 009842824	Landgrebe P.O.Box 32 Valparaiso, Ind.46383 (219)462-4181	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	(219)924-4370 American Chem. Serv. 420 So. Colfax Griffith, Ind.46319	
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)
11 Drums		D 001	SOLVENTS, N.O.S. Flammable Liquid	NA 1993			7.2#/gal.	605gal		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collected

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE
UNLOADED AT DOCK 10/2/81

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE 10/2/81

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

To 204E T-50 10/13/81 JPM

TSDF COPY

001245

9370

HAZARDOUS WASTE MANIFEST

MANIFEST NUMBER 000641

GENERATOR	NAME: Home-Crest Corporation	EPA ID NUMBER: IND 990872806
	ADDRESS: 1002 Eisenhower Drive North Goshen, IN 46526	PHONE NUMBER: 219-533-9571
FIRST TRANSPORTER	NAME: Ashland Chemical Company	EPA ID NUMBER: IND 016621476
	ADDRESS: 1818 West Indiana Avenue South Bend, IN 46613	PHONE NUMBER: 219-233-0033
SECOND TRANSPORTER (if applicable)	NAME:	EPA ID. NUMBER:
	ADDRESS:	PHONE NUMBER:
TSD * FACILITY	NAME: American Chemical Service	EPA ID. NUMBER: IND 016360265
	ADDRESS: 420 South Colfax Griffith, IN 46319	PHONE NUMBER: 219-924-4370
ALTERNATE TSD * FACILITY	NAME:	EPA ID. NUMBER:
	ADDRESS:	PHONE NUMBER:

SHIPPING NAME/HAZARD CLASS	HAZARD I. D. NUMBER	QUANTITY	UNIT OF MEASURE	CONTAINER NUMBER	CONTAINER TYPE
Waste Solvent, NOS Solvent,	D001	[illegible]	Gal.	[illegible]	17E
Adhesive, gum lacquer, paint,				[illegible]	
Flammable				24	

EMERGENCY NOTIFICATION: IN THE EVENT OF ACCIDENT OR SPILL, CALL (606) 324–1133, (CHEMTREC (800) 424–9300)

SPECIAL HANDLING INSTRUCTIONS:

This is to certify that the above 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. Environment Protection Agency.

	NAME	SIGNATURE	DATE
GENERATOR REPRESENTATIVE	Steven A. Beggs	[signature]	3/2/81

This is to certify acceptance of the hazardous waste shipment described above.

	NAME	SIGNATURE	DATE
FIRST TRANSPORTER REPRESENTATIVE	[illegible]	[signature]	[illegible]

This is to certify acceptance of the hazardous waste shipment described above.

	NAME	SIGNATURE	DATE
SECOND TRANSPORTER REPRESENTATIVE	Frank Nash	[signature]	3/9/81

This is to certify acceptance of the hazardous waste described above for ☐ TREATMENT ☐ STORAGE ☐ DISPOSAL

	NAME	SIGNATURE	DATE
TSD * FACILITY REPRESENTATIVE	AMERICAN CHEM. SER.	BOB MAYER	3-9-81

* TREATMENT, STORAGE, DISPOSAL
UNLOADED 3/9/81 PUMPED TO 125K 3/10/81 T-63 Jim Myers

TSD * Facility copy

001246

9370

HAZARDOUS WASTE MANIFEST

MANIFEST NUMBER **002009**

GENERATOR	NAME: Home-Crest Corporation			EPA ID NUMBER: IND 990872806
	ADDRESS: 1002 Eisenhower Drive North	Goshen, IN	46526	PHONE NUMBER: 219-533-9571
FIRST TRANSPORTER	NAME: Ashland Chemical Company			EPA ID NUMBER: IND 016621476
	ADDRESS: 1818 West Indiana Avenue	South Bend, IN	46613	PHONE NUMBER: 219-233-0033
SECOND TRANSPORTER (if applicable)	NAME			EPA ID. NUMBER
	ADDRESS			PHONE NUMBER
TSD * FACILITY	NAME: American Chemical Service			EPA ID. NUMBER: IND 016360265
	ADDRESS: 420 South Colfax	Griffith, IN	46319	PHONE NUMBER: 219-924-4370
ALTERNATE TSD * FACILITY	NAME			EPA ID. NUMBER
	ADDRESS			PHONE NUMBER

SHIPPING NAME/HAZARD CLASS	HAZARD I.D. NUMBER	QUANTITY	UNIT OF MEASURE	CONTAINER NUMBER	CONTAINER TYPE
Waste solvent, NOS Solvent,	D001	605	Gal.	11	17E
Adhesive, gum lacquer, paint,					
Flammable					

EMERGENCY NOTIFICATION: IN THE EVENT OF ACCIDENT OR SPILL, CALL (606) 324–1133, (CHEMTREC (800) 424–9300)

SPECIAL HANDLING INSTRUCTIONS:

This is to certify that the above 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. Environment Protection Agency.

	NAME	SIGNATURE	DATE
GENERATOR REPRESENTATIVE	Steven A. Beggs		4/13/81

This is to certify acceptance of the hazardous waste shipment described above.

	NAME	SIGNATURE	DATE
FIRST TRANSPORTER REPRESENTATIVE			

This is to certify acceptance of the hazardous waste shipment described above.

	NAME	SIGNATURE	DATE
SECOND TRANSPORTER REPRESENTATIVE			

This is to certify acceptance of the hazardous waste described above for ☐ TREATMENT ☑ STORAGE ☐ DISPOSAL

	NAME	SIGNATURE	DATE
TSD * FACILITY REPRESENTATIVE	FOSTER DUNFEE	F Dunfee	4/14/81

* TREATMENT, STORAGE, DISPOSAL

Pumped to 124 R - 4/14/81 D T-63 gjm

TSD * Facility copy

001247

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 50346

001248

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
Holoubek Studios, Inc.	WIDE45129517	
4. P.O. BOX OR STREET ADDRESS: 4712 N. 125th. Street		
5. CITY, STATE, ZIP CODE: Butler, WI 53007	6. TELEPHONE NUMBER: 414) 781-4800	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
6/55 gal. drms.	330	Waste Flammable Liquids, NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	D001	2700
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Norbert Holoubek
16. NAME (Print): Norbert Holoubek
17. DATE SHIPPED M D Y: 2 /27 /81

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
ABC Services, Inc.	WID 076159839
20. P.O. BOX OR STREET ADDRESS: 5700 49th Ave.	
21. CITY, STATE, ZIP CODE: Kenosha, WI 53142	22. TELEPHONE NUMBER: (414)-657-6222

23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
Miles W Kaplan	MILES W KAPLAN	2 / 27 / 81

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IHD016360265
34. P.O. BOX OR STREET ADDRESS: Box 190	
35. CITY, STATE, ZIP CODE: Griffith, IN 46319	36. TELEPHONE NUMBER: ( )-

37. COMMENTS
UNLOADED AT DOCK 3/2/81
PUMPED TO 207E T-50 3/4/81 Jim Murphy

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
Bob Mauck	Bob Mauck	03/05/81

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY [ ]

HAZARDOUS WASTE FACILITY

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0323386 (1–7)

Authorization Number 997021 (8–13)

APLETED BY
GENERATOR

HENRY VALVE COMPANY (Company Name) | 3215 NORTH AVENUE (Address)
MELROSE PARK (City) | ILLINOIS (State) | 60160 (Zip)
0311860013 G (14–24) Generator Number

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 S. Colfax Ave. (Hauler Address)
S.W.H. Registration Number 0024002 (25–31)
Griffith, IN 46319
CLARA TRUCKING (Hauler Name) | WESTWOOD IL (Hauler Address)
ILT006146810
S.W.H. Registration Number 2624001 (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. Colfax Ave. (Address)
91808902 (39–46) Site Number
Griffith (City) | Indiana (State) | 46319 (Zip)
I.D.

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Chlorinated Solvent F001
WASTE 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 Chlorinated Solvent | HAZARD CLASS: Non-Hazardous
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: 00200 (47–52)
1 GALLONS (Circle One) / 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) DRUMS 40 / TANK TRUCK / OPEN TRUCK / OTHER (Specify) VAC

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2-25-81 (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: 2/25/81 (54–59)

(2) _____ (Authorized Signature) DATE: ____/____/____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 2/27/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: D

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 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

001249

.MPLETED BY
.L 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

0323386
1 7

Authorization Number 997021
8 13

HENRY VALVE COMPANY (Company Name) | 3215 NORTH AVENUE (Address)
MELROSE PARK (City) | ILLINOIS (State) | 60160 (Zip)
0 3 1 1 8 6 0 0 1 3 G
14 Generator Number 24

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 S. Colfax Ave. Griffith, IN 46319 (Hauler Address)
S.W.H. Registration Number 0 0 2 4 0 0 2
25 31
ILT006468 10

STRAND TRUCKING (Hauler Name) | CRESTWOOD, IL (Hauler Address)
S.W.H. Registration Number 0 0 2 4 0 2 1
32 38

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. Colfax Ave. (Address)
9 1 8 0 8 9 0 2
39 Site Number 46

Griffith (City) | Indiana (State) | 46319 (Zip)
IND 078 [illegible]

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Chlorinated Solvent F001
WASTE 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 Chlorinated Solvent
HAZARD CLASS: Non-Hazardous
WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 0 0 2 0 9 0
47 52
1 GALLONS (Circle One) 2 CU. YDS. ____ 53

METHOD OF SHIPMENT (Circle One) DRUMS 38 40 / TANK TRUCK / OPEN TRUCK / OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2-25-81
Richard F. Schuster (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) William J. Strand (Authorized Signature) DATE: 02/25/81
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.

Michael E. Bruce (Authorized Signature) DATE: 2/26/81
60 65

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 2/25/81 – UNLOADED 2/26/81 AT DOCK
PUMPED TO #1 STILL 4/29/81 T-63 gym

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

001250

COMPLETED BY
SITE 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

0323388 (1–7)

Authorization Number 997021 (8–13)

HENRY VALVE COMPANY (Company Name) | 3215 NORTH AVENUE (Address)
MELROSE PARK (City) | ILLINOIS (State) | 60160 (Zip)

0311860013 (14) Generator Number (24) G

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 So. Colfax Ave. Griffith, IN 46319 (Hauler Address)
S.W.H. Registration Number 0024002 (25–31)

ILT000646810

STRAND TRUCKING (Hauler Name) | CRESTWOOD, IL (Hauler Address)
S.W.H. Registration Number (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVIDE (Facility Name) | 420 So. Colfax Ave. (Address)
91808902 (39) Site Number (46)

Griffith (City) | Indiana (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE CHLOROTHENE VG

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
WASTE CHLOROTHENE VG	F001	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 001430 (47–52)

1 GALLONS (Circle One)
2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) 26 DRUMS | TANK TRUCK | OPEN TRUCK | OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11-11-81 | Richard F. Robinson (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) K Ford (Authorized Signature) DATE: 11/11/81 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael T. Burke (Authorized Signature) DATE 11/11/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

Trailer at dock 11/11/81 CBM
To 120 R T-63 GRM 11/12/81

SITE COPY - PART 3

001251

A-D-001
F-017

INDUSTRIAL WASTE DISPOSAL MANIFEST

MICHIGAN DEPARTMENT OF NATURAL RESOURCES — ENVIRONMENTAL PROTECTION BUREAU

No. 138457

001252

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE: FACILITY NUMBER MID-006025324

NAME Hastings MFG Co

ADDRESS 325 N. Hanover St, Hastings, MI 49058

PRODUCER ORDER NO. 33503 SHIPMENT DATE 06 (mo.) 10 (da.) 81 (yr.)

PERSON TO CONTACT Scott Doty PHONE 616/945-2491

B. DESCRIPTION OF WASTE (Mandatory) HAZARD CLASS: F

SHIPPING NAME: (DOT OR EPA) Paint & Solvents

SIC CODE	PHYS. STATE	TYPE OF CONTAINER	QUANTITY	UNIT	WASTE TYPE	PERCENT SOLIDS
3599	2	16	250	2	23	015

CODES: QUANTITY = NUMBER OF CONTAINERS

PHYSICAL STATE 1 = SOLID 2 = LIQUID 3 = GAS 4 = SLUDGE

CONTAINER TYPE 55 GAL. DRUM 2 = BULK TANK 3 = SELF CONTAINED UNITS 4 = OTHER (Specify)

UNIT 1 = CU.YDS. 2 = GALLONS 3 = POUNDS

WASTE TYPE (SEE INSTRUCTIONS) 99 = OTHER (Specify) UN-1263

MAJOR COMPONENTS (GREATER THAN 1% CONCENTRATION)

	CONCENTRATION Upper %	Lower %
1.		
2.		
3. Lab Analysis		
4.		
5. Attached		
6.		

INDICATE IF THE WASTE CONTAINS ANY OF THE MATERIALS LISTED IN TABLE TWO.

PARAMETER NO.	CONCENTRATION
___-___-___	
___-___-___	
___-___-___	
___-___-___	

EMERGENCY SPILL INFORMATION

C. NAME OF HAULER Rozema Industrial Waste

BUSINESS ADDRESS 2900 Peach Ridge, Walker, MI 49504

NAME OF PROCESSOR Liquid Disposal Inc

SITE ADDRESS ~~3901 Martin Rd, Utica, MI 48087~~

D. GENERATOR CERTIFICATION:

THIS IS TO CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY THAT THE MATERIALS DESCRIBED IN I/B 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.

NAME & TITLE (please print)	SIGNATURE	DATE
Scott Doty Chemist		6-10-81

Keep goldenrod copy for your records. Send pink copy to:

DEPARTMENT OF NATURAL RESOURCES, WATER QUALITY DIVISION, P.O. BOX 30028, LANSING, MI 48909

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER)

A. NAME Rozema Industrial Waste

ADDRESS 2900 Peach Ridge Rd, Walker Mich 49504

TELEPHONE NUMBER 616-453-3600 PICK-UP DATE 6 (mo.) 10 (da.) 81 (yr.)

B. HAULER JOB NUMBER 11243 FACILITY NUMBER MIT 000477032

C. VEHICLE LICENSE NO. 218-5 STATE Mich

D. HAULER CERTIFICATION:

THIS IS TO CERTIFY UNDER THE PENALTY OF PERJURY THE WASTE DESCRIBED IN PART I/B OF THIS MANIFEST OR IN THE ATTACHMENT WAS ACCEPTED BY ME FOR TRANSPORTATION TO THE PROCESSING FACILITY NAMED IN PART I/C.

NAME AND TITLE (please print)	SIGNATURE	DATE
Don VanEss Driver		6-10-81

Keep canary copy for your records.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY)

FACILITY NUMBER ~~MID006234071~~ IND 016360265

A. NAME ~~L~~ AMERICAN CHEMICAL Service

ADDRESS ~~4205~~ 420 S. Colfax, Griffith, IN. 46319

TELEPHONE NUMBER ~~(219)924-4320~~ ACCEPTANCE DATE 9 (mo.) 11 (da.) 81 (yr.)

B. PROCESS METHOD:

☑ INCINERATION ☐ RECLAMATION ☐ OTHER (Specify)

C. CERTIFICATION:

THE HAULER NAMED ABOVE DELIVERED THE WASTE DESCRIBED IN PART I/B OF THIS MANIFEST TO THIS PROCESING FACILITY. IT WAS ACCEPTABLE MATERIAL FOR PROCESSING UNDER THE TERMS OF FEDERAL, STATE, AND LOCAL REGULATIONS. I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

NAME AND TITLE (please print)	SIGNATURE	DATE
A DUFFEE		9/11/81

Keep green copy for your records. Send white copy to:

DEPARTMENT OF NATURAL RESOURCES, WATER QUALITY DIVISION, P.O. BOX 30028, LANSING, MI 48909

TO 2022 T-50 9/11/81 JM

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 517-373-7660, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800-424-8802

DISPOSAL SITE
AMERICAN CHEMICAL SERVICE
420 S. COLFAX
GRIFFITH, IN 46319 IND 016 360 265

R-4896 11/78

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0302802

. LETED BY
.. GENERATOR

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 7 0 0 4

HANDSCHY INDUSTRIES, INC. (Company Name) | 13601 S. ASHLAND AVE. (Address) | HANDSCHY INDUSTRIES, FEDEREAL #ILD005104443

RIVERDALE (City) | ILLINOIS (State) | 60627 (Zip)

0 5 1 2 5 8 0 0 0 1 G (Generator Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th ST. SOUTH HOLLAND (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 18

MR. FRANK INC. FEDERAL #ILD069506160

Hauler Name | Hauler Address | S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL FEDEREL #IND016360265

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVE. (Address) | 9 1 8 0 8 9 0 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASH INK | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: BULK LIQUID | HAZARD CLASS: FLAMMABLE LIQUID | WEIGHT FOR D.O.T. USE 4000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 005000 | 1. (GALLONS) 2. CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/10/81 | (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE: 2 11 81

(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 2 11 81

COMMENTS OR SPECIAL INSTRUCTIONS: To 112R 2/20/81 T-63 Jim Murphy

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001253

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0302804

...ETED BY
...GENERATOR

Authorization Number 9 9 7 0 0 4

HANDSCHY INDUSTRIES, INC. (Company Name) | 13601 S. ASHLAND AVE. (Address) | HANDSCHY IND. FEDERAL #ILD005104444

RIVEREDALE (City) | ILLINOIS (State) | 60627 (Zip)

0 3 1 2 5 8 0 0 0 1 G
Generator Number

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th ST. SOUTH HOLLAND (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0

MR. FRANK INC. FEDERAL #ILD069506160 (Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVE. (Address) | AMERICAN CHEMICAL FEDERAL #IND016360265

GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

Site Number 9 1 8 0 8 9 0

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASH INK 223

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: BULK LIQUID

HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 35,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004500

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/26/81

William A Lyon
(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 26 81

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 3/30/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 712E T-63 3/26/81 Jim Murphy

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001254

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

03U6 [illegible]
1 7

Authorization Number 9 9 7 0 0 4

HANDSCHY INDUSTRIES, INC. (Company Name) | 13601 S ASHLAND AVE. (Address) | HANDSCHY FEDERAL #ILD005104443 (13)

RIVERDALE (City) | ILLINOIS (State) | 60627 (Zip)

0 3 1 2 5 8 0 0 0 1 G
14 Generator Number 24

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th ST. SOUTH HOLLAND (Hauler Address) | S.W.H. Registration Number 0079029 (25 31)

MR. FRANK FEDERAL #ILD069506160

Hauler Name | Hauler Address | S.W.H. Registration Number (32 38)

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE AMERICAN CHEMICAL FEDERAL #IND016360265

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVE. (Address) | 9 1 8 0 8 9 0 2 (39 Site Number 46)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASH INK F303 | WASTE 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)
BULK LIQUID	FLAMMABLE LIQUD		

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 (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/15/81 | Frank Butler (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 04/15/81 (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:

[signature] (Authorized Signature) DATE: 04/15/81 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: F to 112R T-63 4/15/81 JBM

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

001255

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

: ED BY
.eRATOR

: 0323311
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 7 0 0 4

HANDSCHY INDUSTRIES, INC. (Company Name) | 13601 S. ASHLAND AVENUE (Address) | HANDSCHY IND. FEDERAL #ILD005104443

RIVERDALE (City) | ILLINOIS (State) | 60627 (Zip)

0 3 1 2 5 8 0 0 0 1 G
14 Generator Number 24

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th ST. SOUTH HOLLAND (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 2 1 (25–31)

MR. FRANK INC. FEDERAL #ILD069506160

Hauler Name | Hauler Address | S.W.H. Registration Number 32 — 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL FEDERAL #IND016360265

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVE. (Address) | 9 1 8 0 8 9 0 (39–46 Site Number)

GRIFFITH IN. (City) | INDIANA (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASH INK

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: BULK LIQUID

HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 5 5 0 0 (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: 10-12-81

William Olson
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Gary Owen
(Authorized Signature)

DATE: 10 12 81 (54–59)

(2) _____
(Authorized Signature)

DATE: ___ ___ ___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____
(Authorized Signature)

DATE: 10 12 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 1222 T-63 10/12/81 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

001256

STATE OF ILLINOIS

ED BY
RATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0302838
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 7 0 0 4
HANDSCHY IND. FEDERAL #ILD005104443 13

HANDSCHY INDUSTRIES, INC. (Company Name) | 13601 S. ASHLAND AVE. (Address)

RIVERDALE (City) | ILLINOIS (State) | 60627 (Zip)

0 3 1 2 5 8 0 0 0 1 G
14 Generator Number 24

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th ST. SOUTH HOLLAND (Hauler Address)

S.W.H. Registration Number 0079018
25 31

MR. FRANK INC. FEDERAL #ILD069506160 (Hauler Name) | (Hauler Address)

S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL FEDERAL #INDo16360265

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVE. (Address)

9 1 8 0 8 9 0
39 Site Number 46

GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASH INK

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: BULK LIQUID

HAZARD CLASS: FLAMMABLE LIQUID

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) 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: 10-16-81

(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: 10/16/81
54 59

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 10/16/81
60 65

COMMENTS OR SPECIAL INSTRUCTIONS: To 112X T-63 10/16/81 gm

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001257

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0302841

Authorization Number 9 9 7 0 0 4

_TED BY
_NERATOR

HANDSCHY INDUSTRIES, INC. (Company Name) | 13601 S. ASHLAND AVENUE (Address) | HANDSCHY IND. FEDERAL #ILD005104443

RIVERDALE (City) | ILLINOIS (State) | 60627 (Zip)

0 3 1 2 5 8 0 0 0 1 G
Generator Number

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th ST. SOUTH HOLLAND (Hauler Address) | S.W.H. Registration Number 0079025

MR. FRANK INC. FEDERAL #ILD069506160

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL FEDERAL #IND016360265

AM,ERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVENUE (Address)

9 18 0 8 9 0
Site Number

GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASH INK

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: BULK LIQUID

HAZARD CLASS: FLAMMABLE LIQUID

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: 0 0 5 0 0 0

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: 11-4-81

(Authorized Signature)
WILLIAM A. SPORT

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 11 04 81

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 11 4 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 211 K T-50 GRM 11/4/81

SITE COPY - PART 3

001258

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0302839

.LETED BY
.NERATOR

Authorization Number 9 9 7 0 0 4

HANDSCHY IND. FEDERAL #ILD005104443

HANDSCHY INDUSTRIES, INC. (Company Name) | 13601 S. ASHLAND AVENUE (Address)

0 3 1 2 5 8 0 0 0 1 G (Generator Number)

RIVERDALE (City) | ILLINOIS (State) | 60627 (Zip)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | XXXX 201 W. 155th ST. SOUTH HOLLAND (Hauler Address) S.W.H. Registration Number 0 0 7 0 1 8

MR. FRANK INC. FEDERAL #ILD069506160

(Hauler Name) | (Hauler Address) S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL FEDERAL #IND016360265

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVE. (Address)

9 1 8 0 8 9 0 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASH INK

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: BULK LIQUID

HAZARD CLASS: FLAMMABLE LIQUID

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: 0 0 5 0 0 0

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/28/81

William L Spare
WILLIAM L SPARE (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: 10/28/81

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 10/28/81

COMMENTS OR SPECIAL INSTRUCTIONS: 1 TO 210 X T-50 10/28/81 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

001259

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0302840

.LETED BY
.NERATOR

Authorization Number 9 9 7 0 0 4

HANDSCHY IND. FEDERAL #ILD005104443

HANDSCHY INDUSTRIES, INC.	13601 S. AHHLAND AVENUE	
(Company Name)	Address	
RIVERDALE	ILLINOIS	60627
City	State	Zip

0 3 1 2 5 8 0 0 0 1 G
Generator Number

WASTE HAULER(S)

MR. FRANK	201 W. 155th STREET SOUTH HOLLAND	S.W.H. Registration Number 0079025
Hauler Name	Hauler Address	

MR. FRANK INC. FEDERAL #ILD069506160

		S.W.H. Registration Number
Hauler Name	Hauler Address	

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL FEDERAL #IND016360265

AMERICAN CHEMICAL SERVICE	420 S. COLFAX AVENUE	
(Facility Name)	Address	
GRIFFITH	INDIANA	46319
City	State	Zip

9 1 8 0 8 9 0
Site Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASH INK

WASTE 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
BULK LIQUID	FLAMMABLE LIQUID	38000 (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 (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/5/81

William A. Sporl
WILLIAM A. SPORI
Authorized Signature

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Gary Owen
(Authorized Signature)
DATE: 11 05 81

(2) _____
(Authorized Signature)
DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____
(Authorized Signature)
DATE: 11/5/81

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 211K T-50 GKM 11/5/81

SITE COPY - PART 3

001260

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0302843

..LETED BY
..NERATOR

Authorization Number 9 9 7 0 0 4

HANDSCHY INDUSTRIES, INC. (Company Name) | 13601 S. ASHLAND AVENUE (Address) | HANDSCHY IND. FEDERAL #ILD005104443

RIVERDALE (City) | ILLINOIS (State) | 60627 (Zip)

0 3 1 2 5 8 0 0 0 1 G — Generator Number

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th ST. SOUTH HOLLAND (Hauler Address) | S.W.H. Registration Number I L D 0 6 9 5 0 6 1 6 0

MR. FRANK INC. FEDERAL #ILD069506160 (Hauler Name) | (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 1 8

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL FEDERAL #IN01630265

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVENUE (Address) | 9 1 8 - 0 8 9 0 Site Number

GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASH INK

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: BULK LIQUID

HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE _____ (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 4 8 0 0

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: 12-2-81

William Alpare (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) CE Milburn (Authorized Signature) DATE: 12 / 02 / 81

(2) _____ (Authorized Signature) DATE: 12 / 02 / 81

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 / 02 / 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 112K T-63 GRM 12/2/81

SITE COPY - PART 3

001261

COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0163994
1 7

Authorization Number 997248 8 13
NON HAZARDOUS
0316000 376 G
14 Generator Number 24

HANDSCHY INDUSTRIES (Company Name) 2525 N ELSTON AVE. Address
CHICAGO ILL. City ILLINOIS State 60647 Zip

WASTE HAULER(S)

(1) MR. FRANK INDUST. Hauler Name 201 W. 155TH ST Hauler Address S.W.H. Registration Number 0079001 25 31

(2) _____ Hauler Name _____ Hauler Address INDEPENDENT S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) 402 COLFAX Address 91808902 39 Site Number 46
GOLCONDA City IND State Zip TANK FARM

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: INK SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: COMBUSTIBLE

HAZARD CLASS: NON-HAZARDOUS

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: 10/12/91 X R. Ray Whearley FOR (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED 003 000 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) Jesse Bradley (Authorized Signature) DATE: 10/12/91 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:

X [illegible] (Authorized Signature) DATE 10/12/91 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: To 211K T-50 10/12/91 gbm

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

001262

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0164000

WASTE GENERATOR

Authorization Number 997248

HANDSCHY INDUSTRIES (Company Name) | 2525 NORTH ELSTON AVE. (Address)

CHICAGO (City) | ILLINOIS (State) | 60647 (Zip)

0316000 376 (Generator Number)

WASTE HAULER(S)

(1) MR. FRANK INDUSTRIES (Hauler Name) | 201 W. 155TH ST. (Hauler Address)

S.W.H. Registration Number 0079

ILD0695O6160

(2) _____ (Hauler Name) | _____ (Hauler Address)

S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address)

91808902 (Site Number)

GRIFFITH (City) | INDIANA (State) | _____ (Zip)

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: COMBUSTIBLE

F003

HAZARD CLASS: NON-HAZARDOUS

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/3/87

J. Ray Heatley (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 003000 (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) Michael Reiser (Authorized Signature) DATE 11/3/87

(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: 11/3/87

COMMENTS OR SPECIAL INSTRUCTIONS: To 210 R T-50 11/3/87

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

001263

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 001

TO:	FROM:
T/S/D FACILITY AMERICAN CHEMICAL SERVICE	Generator H&H EQUIPMENT COMPANY INC
E.P.A. ID Code No. IND0-16360255	E.P.A. ID Code No. EXEMPT
Address 420 S. Colfax	Address 16339 Lima Road
Destination Griffith Indiana	Origin Hunterstown, Indiana
Phone 219-924-4370	Phone 219-637-3177

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
2 DR	WASTE CLEANING SOLVENT	FLAMMABLE	NA-1142	F005	110 G1	FLAMMABLE

PLACARDS REQUIRED FLAMMABLE LIQUID

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date 7-29-81

TRANSPORTER #1 THOMAS SOLVENT COMPANY E.P.A. ID No. MID-03993902
Address 5605 Planeview Drive
City Fort Wayne State IN Zip 46825 Phone 219-482-9630

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date _____

To 126R T-63
10/8/81 JMM

T/S/D F COPY

7-BLS-0076-HLD
REV 10/80

001264

HAZARDOUS WASTE

HAZARDOUS WASTE

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)
60	X			1993				3300 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 11/20/85

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

To 143 R T-63 6PAL 11/23/81

TSDF COPY

001265

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	TND980675854		11/16/81
TRANSPORTER # 1	TNT1001447		11/18/81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	TND982		11/18/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
11	X		WASTE PAINT THINNER	1263				6556		
		D001	FLAMMABLE LIQUID							

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 11/20/81

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

To 125 R T-63 GRM 11/23/81

TSDF COPY

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			11-23-81
TRANSPORTER # 1			11-23-81
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)
02		D		1993						

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES — FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$_____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges
_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE 11-23-81 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 11/23/81 DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

Unloaded at dock 11/23/81 GRM To 125 K TG3 GRM 11/25/81

TSDF COPY

001267

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			11/24/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
90		D001	Paint Thinner Flammable Liquid	1263						

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged *creating a serious situation, call shipper's telephone number* or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES — FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collected

*Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE 11/24/81

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

Unload at dock 11/24/81 GRM
To 125 K T-63 GRM 11/25/81

001268

Guide
Division of General Motors Corporation
P.O. Box 2459, Anderson, Indiana 46011

ENVIRONMENTAL MANIFEST

GL-772

☐ HAZARDOUS ☐ NON-HAZARDOUS ☐ WASTE ☐ RECLAIMABLE MATL. No. 191

EMERGENCY INFORMATION

IMMEDIATE RESPONSE INFORMATION
GUIDE DIVISION, GENERAL MOTORS CORPORATION
2915 Pendleton Avenue—Post Office Box 2459
Anderson, IN 46011

Telephone (317) 646-

IN CASE OF EMERGENCY, NOTIFY:

SCALE INFORMATION

NET WT. _____

TRAILER NO. TRACTOR NO.

SHIPPING INFORMATION

D.O.T. SHIPPING DESCRIPTION	HAZARD CLASS	QUANTITY	CONTAINER TYPE	MATERIAL DESCRIPTION
		0		

MATERIAL DISPOSITION

☐ Reclamation ☐ Incineration ☐ Landfill ☐ Other (Specify)_____

ADDITIONAL INFORMATION:

CERTIFICATION

GENERATOR DATE SHIPPED_____ EPA IDENTIFICATION CODE NO._____
COMPANY NAME _____ STATE I.D. CODE NO._____
ADDRESS _____ PURCHASE ORDER_____
CITY _____ STATE_____ ZIP_____ PHONE_____

This is to certify that the above 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 EPA. Keep blue copy for your records.

Signature _____ Print Name_____ Date _____

TRANSPORTER EPA IDENTIFICATION CODE NO._____
COMPANY _____ STATE I.D. CODE_____
ADDRESS _____ JOB NO._____
CITY _____ STATE_____ ZIP_____ PHONE_____

This is to certify acceptance of the above materials for shipment. Keep Canary copy for your records. Appropriate placards were offered.

Signature _____ Print Name_____ Date Received _____

TREATMNT/DISPOSAL FACILITY EPA IDENTIFICATION CODE NO._____
COMPANY _____ STATE I.D. CODE_____
ADDRESS _____ JOB NO._____
CITY _____ STATE_____ ZIP_____ PHONE_____

This is to certify the acceptance of the above materials for treatment, storage, reclamation or disposal. Forward pink copy to generator.

Signature _____ Print Name_____ Date _____

This is to certify completion of treatment, storage, reclamation, or disposal in compliance with appropriate regulations. Keep green copy for your records. Forward white copy to generator. Processing of your invoice will begin upon receipt of signed copy of this manifest.

Signature _____ Print Name FDUNFEE Date Received 11/25/81

To 125R T-63 GKM 11/30/81

BLUE COPY—Guide File Copy (Plant Engineering)
CANARY COPY—Transporter Copy
PINK COPY—Return to Guide Div. upon acceptance of material. (Plant Engineering)
GREEN COPY—Disposer file copy
WHITE COPY—Return to Guide Div. after disposal. (Plant Engineering)

001269

Guide
Division of General Motors Corporation
P.O. Box 2459, Anderson, Indiana 46011

ENVIRONMENTAL MANIFEST

No. 192

GL-772 ☐ HAZARDOUS ☐ NON-HAZARDOUS ☒ WASTE ☐ RECLAIMABLE MATL.

EMERGENCY INFORMATION

IMMEDIATE RESPONSE INFORMATION
GUIDE DIVISION, GENERAL MOTORS CORPORATION
2915 Pendleton Avenue—Post Office Box 2459
Anderson, IN 46011

Telephone (317) 646-

IN CASE OF EMERGENCY, NOTIFY:

SCALE INFORMATION

NET WT.

TRAILER NO. TRACTOR NO.

SHIPPING INFORMATION

D.O.T. SHIPPING DESCRIPTION	HAZARD CLASS	QUANTITY	CONTAINER TYPE	MATERIAL DESCRIPTION

MATERIAL DISPOSITION

☐ Reclamation ☐ Incineration ☐ Landfill ☐ Other (Specify)

ADDITIONAL INFORMATION:

CERTIFICATION

GENERATOR DATE SHIPPED EPA IDENTIFICATION CODE NO.
COMPANY NAME STATE I.D. CODE NO.
ADDRESS PURCHASE ORDER
CITY STATE ZIP PHONE

This is to certify that the above 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 EPA. Keep blue copy for your records.

Signature Print Name Date

TRANSPORTER EPA IDENTIFICATION CODE NO.
COMPANY STATE I.D. CODE
ADDRESS JOB NO.
CITY STATE ZIP PHONE

This is to certify acceptance of the above materials for shipment. Keep Canary copy for your records. Appropriate placards were offered.

Signature Print Name Date Received

TREATMNT/DISPOSAL FACILITY EPA IDENTIFICATION CODE NO.
COMPANY STATE I.D. CODE
ADDRESS JOB NO.
CITY STATE ZIP PHONE

This is to certify the acceptance of the above materials for treatment, storage, reclamation or disposal. Forward pink copy to generator.

Signature Print Name Date

This is to certify completion of treatment, storage, reclamation, or disposal in compliance with appropriate regulations. Keep green copy for your records. Forward white copy to generator. Processing of your invoice will begin upon receipt of signed copy of this manifest.

Signature Print Name Date Received

BLUE COPY—Guide File Copy (Plant Engineering)
CANARY COPY—Transporter Copy
PINK COPY—Return to Guide Div. upon acceptance of material. (Plant Engineering)
GREEN COPY—Disposer file copy
WHITE COPY—Return to Guide Div. after disposal. (Plant Engineering)

ON Dock 12/1/81 GRM
To 125 K T-63 GRM 12/3/81

001270

Guide
Division of General Motors Corporation
P.O. Box 2459, Anderson, Indiana 46011

ENVIRONMENTAL MANIFEST

No. 193

GL-772 ☐ HAZARDOUS ☐ NON-HAZARDOUS ☐ WASTE ☐ RECLAIMABLE MATL.

EMERGENCY INFORMATION

IMMEDIATE RESPONSE INFORMATION
GUIDE DIVISION, GENERAL MOTORS CORPORATION
2915 Pendleton Avenue—Post Office Box 2459
Anderson, IN 46011

Telephone (317) 646-

IN CASE OF EMERGENCY, NOTIFY:

SCALE INFORMATION

NET WT. 36,280 POUNDS
TRAILER NO. TRACTOR NO.

SHIPPING INFORMATION 2A 2

D.O.T. SHIPPING DESCRIPTION	HAZARD CLASS	QUANTITY	CONTAINER TYPE	MATERIAL DESCRIPTION
COMPOUND POINT + THINNER LIQUID		80	DRUMS	COMPOUND POINT + THINNER

MATERIAL DISPOSITION

☐ Reclamation ☐ Incineration ☐ Landfill ☐ Other (Specify)

ADDITIONAL INFORMATION:

CERTIFICATION

GENERATOR DATE SHIPPED EPA IDENTIFICATION CODE NO.
COMPANY NAME Guide Div. STATE I.D. CODE NO. 00803734
ADDRESS 2915 PENDLETON AVE PURCHASE ORDER
CITY ANDERSON STATE IN ZIP 46016 PHONE 1142

This is to certify that the above 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 EPA. Keep blue copy for your records.

Signature Ryan Walker Print Name RYAN WALKER Date 12-3-81

TRANSPORTER EPA IDENTIFICATION CODE NO. INT 0789111416
COMPANY C. WARREN TRUCKING STATE I.D. CODE
ADDRESS Box 83 JOB NO. IND 170014472
CITY GREENTOWN STATE IN ZIP PHONE 3785

This is to certify acceptance of the above materials for shipment. Keep Canary copy for your records. Appropriate placards were offered.

Signature [illegible] Print Name [illegible] Date Received 12-3-81

TREATMNT/DISPOSAL FACILITY EPA IDENTIFICATION CODE NO.
COMPANY AMERICAN CHEMICAL STATE I.D. CODE
ADDRESS 420 So. Colfax JOB NO. IND 016 360260
CITY GRIFFITH STATE IN ZIP PHONE 838 6870

This is to certify the acceptance of the above materials for treatment, storage, reclamation or disposal. Forward pink copy to generator.

Signature Frank Price Print Name FRANK PRICE Date 12-3-81

This is to certify completion of treatment, storage, reclamation, or disposal in compliance with appropriate regulations. Keep green copy for your records. Forward white copy to generator. Processing of your invoice will begin upon receipt of signed copy of this manifest.

Signature Michael O'Brien Print Name MIKE BURBO Date Received 12/3/81

On dock 12/3/81 GRM 12/3/81 35 to 125R 45 to 125R 12/4/81

BLUE COPY—Guide File Copy (Plant Engineering)
CANARY COPY—Transporter Copy
PINK COPY—Return to Guide Div. upon acceptance of material. (Plant Engineering)
GREEN COPY—Disposer file copy
WHITE COPY—Return to Guide Div. after disposal. (Plant Engineering)

001271

Guide
Division of General Motors Corporation
P.O. Box 2459, Anderson, Indiana 46011

ENVIRONMENTAL MANIFEST

No. 195

GL-772

☐ HAZARDOUS ☐ NON-HAZARDOUS ☐ WASTE ☐ RECLAIMABLE MATL.

EMERGENCY INFORMATION

IMMEDIATE RESPONSE INFORMATION
GUIDE DIVISION, GENERAL MOTORS CORPORATION
2915 Pendleton Avenue—Post Office Box 2459
Anderson, IN 46011

Telephone (317) 646-

IN CASE OF EMERGENCY, NOTIFY:

SCALE INFORMATION

NET WT. 34 440#

TRAILER NO. TRACTOR NO.

SHIPPING INFORMATION

D.O.T. SHIPPING DESCRIPTION	HAZARD CLASS	QUANTITY	CONTAINER TYPE	MATERIAL DESCRIPTION
		56		

MATERIAL DISPOSITION

☐ Reclamation ☐ Incineration ☐ Landfill ☐ Other (Specify)

ADDITIONAL INFORMATION:

CERTIFICATION

GENERATOR DATE SHIPPED EPA IDENTIFICATION CODE NO.
COMPANY NAME STATE I.D. CODE NO.
ADDRESS PURCHASE ORDER
CITY STATE ZIP PHONE

This is to certify that the above 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 EPA. Keep blue copy for your records.

Signature Print Name Date

TRANSPORTER EPA IDENTIFICATION CODE NO.
COMPANY STATE I.D. CODE
ADDRESS JOB NO.
CITY STATE ZIP PHONE

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Signature Print Name Date Received

TREATMNT/DISPOSAL FACILITY EPA IDENTIFICATION CODE NO.
COMPANY STATE I.D. CODE
ADDRESS JOB NO.
CITY STATE ZIP PHONE

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Signature Print Name Date

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Signature Print Name Date Received

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CANARY COPY—Transporter Copy
PINK COPY—Return to Guide Div. upon acceptance of material. (Plant Engineering)
GREEN COPY—Disposer file copy
WHITE COPY—Return to Guide Div. after disposal. (Plant Engineering)

-2

On Dock 12/10/81 GRM
To 204R T-50 GRM 12/17/81

001272

Guide
Division of General Motors Corporation
P.O. Box 2459, Anderson, Indiana 46011

ENVIRONMENTAL MANIFEST

GL-772

☐ HAZARDOUS ☐ NON-HAZARDOUS ☐ WASTE ☐ RECLAIMABLE MATL.

No. 197

EMERGENCY INFORMATION

IMMEDIATE RESPONSE INFORMATION
GUIDE DIVISION, GENERAL MOTORS CORPORATION
2915 Pendleton Avenue—Post Office Box 2459
Anderson, IN 46011

Telephone (317) 646-

IN CASE OF EMERGENCY, NOTIFY:

SCALE INFORMATION

NET WT.

TRAILER NO. TRACTOR NO.

SHIPPING INFORMATION

D.O.T. SHIPPING DESCRIPTION	HAZARD CLASS	QUANTITY	CONTAINER TYPE	MATERIAL DESCRIPTION
		80		

MATERIAL DISPOSITION

☐ Reclamation ☐ Incineration ☐ Landfill ☐ Other (Specify)

ADDITIONAL INFORMATION:

CERTIFICATION

GENERATOR DATE SHIPPED EPA IDENTIFICATION CODE NO.
COMPANY NAME STATE I.D. CODE NO.
ADDRESS PURCHASE ORDER
CITY STATE ZIP PHONE

This is to certify that the above 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 EPA. Keep blue copy for your records.

Signature Print Name Date

TRANSPORTER EPA IDENTIFICATION CODE NO.
COMPANY STATE I.D. CODE
ADDRESS JOB NO.
CITY STATE ZIP PHONE

This is to certify acceptance of the above materials for shipment. Keep Canary copy for your records. Appropriate placards were offered.

Signature Print Name Date Received

TREATMNT/DISPOSAL FACILITY EPA IDENTIFICATION CODE NO.
COMPANY STATE I.D. CODE
ADDRESS JOB NO.
CITY STATE ZIP PHONE

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Signature Print Name Date

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Signature Print Name Date Received

BLUE COPY—Guide File Copy (Plant Engineering)
CANARY COPY—Transporter Copy
PINK COPY—Return to Guide Div. upon acceptance of material. (Plant Engineering)
GREEN COPY—Disposer file copy
WHITE COPY—Return to Guide Div. after disposal. (Plant Engineering)

On dock 12/16/81 GREM 12/17/81 GMW To 143 K T-63

001273

Guide
Division of General Motors Corporation
P.O. Box 2459, Anderson, Indiana 46011

ENVIRONMENTAL MANIFEST

No. 194

GL-772

☐ HAZARDOUS ☐ NON-HAZARDOUS ☐ WASTE ☐ RECLAIMABLE MATL.

EMERGENCY INFORMATION

IMMEDIATE RESPONSE INFORMATION
GUIDE DIVISION, GENERAL MOTORS CORPORATION
2915 Pendleton Avenue—Post Office Box 2459
Anderson, IN 46011

Telephone (317) 646

IN CASE OF EMERGENCY, NOTIFY:

SCALE INFORMATION

NET WT. ~~35,060~~#

TRAILER NO. 55417 TRACTOR NO. 2

SHIPPING INFORMATION

D.O.T. SHIPPING DESCRIPTION	HAZARD CLASS	QUANTITY	CONTAINER TYPE	MATERIAL DESCRIPTION
		75		

MATERIAL DISPOSITION

☑ Reclamation ☐ Incineration ☐ Landfill ☐ Other (Specify)

ADDITIONAL INFORMATION:

CERTIFICATION

GENERATOR DATE SHIPPED EPA IDENTIFICATION CODE NO.
COMPANY NAME STATE I.D. CODE NO.
ADDRESS PURCHASE ORDER
CITY STATE ZIP PHONE

This is to certify that the above 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 EPA. Keep blue copy for your records.

Signature Print Name Date

TRANSPORTER EPA IDENTIFICATION CODE NO.
COMPANY STATE I.D. CODE
ADDRESS JOB NO.
CITY STATE ZIP PHONE

This is to certify acceptance of the above materials for shipment. Keep Canary copy for your records. Appropriate placards were offered.

Signature Print Name Date Received

TREATMNT/DISPOSAL FACILITY EPA IDENTIFICATION CODE NO.
COMPANY STATE I.D. CODE
ADDRESS JOB NO.
CITY STATE ZIP PHONE

This is to certify the acceptance of the above materials for treatment, storage, reclamation or disposal. Forward pink copy to generator.

Signature Print Name Date 12/7/81

This is to certify completion of treatment, storage, reclamation, or disposal in compliance with appropriate regulations. Keep green copy for your records. Forward white copy to generator. Processing of your invoice will begin upon receipt of signed copy of this manifest.

Signature Print Name Date Received

BLUE COPY—Guide File Copy (Plant Engineering)
CANARY COPY—Transporter Copy
PINK COPY—Return to Guide Div. upon acceptance of material. (Plant Engineering)
GREEN COPY—Disposer file copy
WHITE COPY—Return to Guide Div. after disposal. (Plant Engineering)

ON DOCK 12/7/81 GRM

20-204 R T-50 12/5/81
55-204 R T-50 12/15/81
GRM

001274

Guide
Division of General Motors Corporation
P.O. Box 2459, Anderson, Indiana 46011

ENVIRONMENTAL MANIFEST

GL-772

☐ HAZARDOUS ☐ NON-HAZARDOUS ☐ WASTE ☐ RECLAIMABLE MATL. No. 196

EMERGENCY INFORMATION

IMMEDIATE RESPONSE INFORMATION
GUIDE DIVISION, GENERAL MOTORS CORPORATION
2915 Pendleton Avenue—Post Office Box 2459
Anderson, IN 46011

Telephone (317) 646-

IN CASE OF EMERGENCY, NOTIFY:

SCALE INFORMATION

NET WT.

TRAILER NO. TRACTOR NO.

SHIPPING INFORMATION

D.O.T. SHIPPING DESCRIPTION	HAZARD CLASS	QUANTITY	CONTAINER TYPE	MATERIAL DESCRIPTION

MATERIAL DISPOSITION

☐ Reclamation ☐ Incineration ☐ Landfill ☐ Other (Specify)

ADDITIONAL INFORMATION:

CERTIFICATION

GENERATOR DATE SHIPPED EPA IDENTIFICATION CODE NO.
COMPANY NAME STATE I.D. CODE NO.
ADDRESS PURCHASE ORDER
CITY STATE ZIP PHONE

This is to certify that the above 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 EPA. Keep blue copy for your records.

Signature Print Name Date

TRANSPORTER EPA IDENTIFICATION CODE NO.
COMPANY STATE I.D. CODE
ADDRESS JOB NO.
CITY STATE ZIP PHONE

This is to certify acceptance of the above materials for shipment. Keep Canary copy for your records. Appropriate placards were offered.

Signature Print Name Date Received

TREATMNT/DISPOSAL FACILITY EPA IDENTIFICATION CODE NO.
COMPANY STATE I.D. CODE
ADDRESS JOB NO.
CITY STATE ZIP PHONE

This is to certify the acceptance of the above materials for treatment, storage, reclamation or disposal. Forward pink copy to generator.

Signature Print Name Date

This is to certify completion of treatment, storage, reclamation, or disposal in compliance with appropriate regulations. Keep green copy for your records. Forward white copy to generator. Processing of your invoice will begin upon receipt of signed copy of this manifest.

Signature Print Name FDNFEE Date Received 12/14/81

ON DOCK 12/14/81 GRM
65 to 143R T-63 GRM 12/15/81
10 to 204R 12/15

BLUE COPY—Guide File Copy (Plant Engineering)
CANARY COPY—Transporter Copy
PINK COPY—Return to Guide Div. upon acceptance of material. (Plant Engineering)
GREEN COPY—Disposer file copy
WHITE COPY—Return to Guide Div. after disposal. (Plant Engineering)

001275

GUIDE DIVISION, GENERAL MOTORS CORPORATION
2915 Pendleton Ave., P. O. Box 2459, Anderson, Ind. 46011

NO. 83941

NON-PRODUCTIVE ONLY

ACCOUNTS PAYABLE DEBIT MEMORANDUM

1. CHARGE TO
ADAMS CENTER LANDFILL
4636 ADAMS CENTER ROAD
FT. WAYNE, IN 46806

2. SHIP TO
ADAMS CENTER LANDFILL, INC.
% AMERICAN CHEMICAL SERVICE, INC.
GRIFFITH, INDIANA

3. DATE _____
TERMS _____

4.
GUIDE DIV. PROPERTY ☐ YES ☐ NO
TO BE RETURNED ☐ YES ☐ NO
☐ SEND MATERIAL TO SHIPPING
☐ PLANT PROTECTION

PASS _____
NAME
WITH LISTED MATERIAL

5. MATERIAL VALUE

6. INBOUND TRANSPORTATION TO BE PAID BY
GUIDE DIVISION ☐ SUPPLIER ☐

7. OUTBOUND TRANSPORTATION TO BE PAID BY
GUIDE DIVISION ☐ SUPPLIER ☐

8. SHIP
COLLECT ☒ PREPAID ☐

9. Quantity To Be Returned	10. UNIT	11. PART NUMBER	DESCRIPTION	12. QUANTITY SHIPPED	13. WEIGHT	14. UNIT PRICE	15. AMOUNT
75	DRS		PAINT AND THINNER CHARGES TO BE NEGOTIATED LATER FOR TRANSPORTATION AND HANDLING				

A. RETURNED ON RECEIVING SLIP NO. _____
B. HAND CARRIED IN BY _____
APPROVED _____
C. WILL NOT BE RETURNED _____
APPROVED _____

SUB TOTAL
INBOUND TRANSPORTATION PAID BY GUIDE DIV.
OUTBOUND TRANSPORTATION PAID BY GUIDE DIV.
TOTAL

16. RECEIVING REPORT NO.

17. RECEIVED ON GUIDE DIVISION PURCHASE ORDER NO.

18.
TOOL NO.
WORK ORDER NO.

19. DEFECTIVE MATERIAL NOTICE NO.

20. CREDIT ACCOUNT
$ _____
$ _____
DEBIT ACCOUNT $ _____
$ _____

21. DATE SHIPPED		IF VIA P.P. or UPS AMOUNT AND ZONE	23. BILL OF LADING	24. NUMBER CONTAINERS	25. TOTAL WEIGHT	26. PREPAID ☐ COLLECT ☐
12-7-81	WARREN C &	SONS TRUCKING	32315	75 DRUMS	35,060#	

REQUESTED BY W. C. ROGERS

APPROVED BY D. E. WALTZ

DO NOT REPLACE UNTIL YOU RECEIVE OUR PURCHASE ORDER NUMBERED

GL-6

PACKING SLIP—3

001276

STATE OF MICHIGAN

Rev. 3/81

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER)

MI 0042238

0012777

GENERATOR COMPLETES — IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Guardsman Chemicals, Inc.	Mr. Frank	American Chemical Services
Site Address	**Transporters Address**	**Facility Address**
1350 Steele Street S.W. Grand Rapids, MI 49507	201 W. 155th Street S. Holland ILL.	420 S. Colfax Griffith, IN
Phone Number	**Phone Number**	**Phone Number**
(616) 452-5181	(312) 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MIDO060174381	ILD069506160	IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Haz. Waste Paint, N.O.S.	FLAMMABLE LIQ.	UN-1263	F	1	2		x			550	GALS.	K082
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

Contain and keep flame of ignited material away, pick up and transport to proper disposal location.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: W. C. Richards ① W. C. Richards

Date Shipped MO. DAY. YEAR: 05 14 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 0079021

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② Gary Lauer

Subsequent transporter(s) signature(s) ③

Date(s) Received: 05 14 81

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ T D Mufloe

Facility Site EPA I.D. Number

☐ Accepted ☐ Rejected

Date Received: 05 14 81

Describe any significant discrepancies between manifest and shipment.

To WEST AGIT T-50 5/14/81 JFM

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

STATE OF MICHIGAN

Rev. 3/81

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0042237

0012178

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Guardsman Chemicals, Inc.	Mr. Frank	American Chemical Services
Site Address	**Transporters Address**	**Facility Address**
1350 Steele Street S.W. Grand Rapids, MI 49507	201 W. 155th Street S. Holland ILL.	420 S. Colfax Griffith, IN
Phone Number	**Phone Number**	**Phone Number**
(616) 452-5181	(312) 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MIDO060174138	ILD0605061 60	IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form Solid	Form Liquid	Form Gas	Form Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Flammable Liquid	N.O.S.	UN-1263	F	1 X	2		x			55100	GALS	
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

Contain and keep flame or ignited material away, pick up and transport to proper disposal location.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① W. C. RICHARDS

Date Shipped MO. DAY. YEAR: 05 12 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. 1 0079021

Transporter Signature ②

Date(s) Received 05 12 81

Subsequent Transporter Vehicle I.D. No's

Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④

Facility Site EPA I.D. Number

☐ Accepted ☐ Rejected

Date Received

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY TO WEST AGIT - T-50 5/12/81 JJM

INDUSTRIAL WASTE DISPOSAL MANIFEST

MICHIGAN DEPARTMENT OF NATURAL RESOURCES — ENVIRONMENTAL PROTECTION BUREAU

No 86870

001279

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE: FACILITY NUMBER MID006017438

NAME Guardsman Chemicals, INC.

ADDRESS 1350 Steele Street SW Grand Rapids MI 49507

PRODUCER ORDER NO. _____ SHIPMENT DATE 04 (mo.) 20 (da.) 81 (yr.)

PERSON TO CONTACT W.C. Richards PHONE 452-5181

B. DESCRIPTION OF WASTE (Mandatory) HAZARD CLASS: F

SHIPPING NAME: (DOT OR EPA) Flammable Liquid N.O.S. UN-1263

SIC CODE	PHYS. STATE	TYPE OF CONTAINER	QUANTITY	UNIT	WASTE TYPE	PERCENT SOLIDS
	2	2	000550	2	23	10

CODES:

PHYSICAL STATE 1 = SOLID 2 = LIQUID 3 = GAS 4 = SLUDGE

CONTAINER TYPE 1 = 55 GAL. DRUM 2 = BULK TANK 3 = SELF CONTAINED UNITS 4 = OTHER (Specify) _____

UNIT 1 = CU.YDS. 2 = GALLONS 3 = POUNDS

WASTE TYPE (SEE INSTRUCTIONS) 99 = OTHER (Specify) _____

MAJOR COMPONENTS (GREATER THAN 1% CONCENTRATION)

	CONCENTRATION Upper %	Lower %
1. Mixed Solvents	60	30
2. Resin Solids	35	20
3. Misc. Pigments	35	20
4.		
5.		
6.		

INDICATE IF THE WASTE CONTAINS ANY OF THE MATERIALS LISTED IN TABLE TWO.

PARAMETER NO.	CONCENTRATION
01-5	< .6%
01-9	< 2%

EMERGENCY SPILL INFORMATION Contain and keep flame or ignited material away, pick up and transport to proper disposal location.

C. NAME OF HAULER Mr. Frank

BUSINESS ADDRESS 201 W 155th Street S. Holland Ill.

NAME OF PROCESSOR American Chemical Services

SITE ADDRESS Griffith, IN

D. GENERATOR CERTIFICATION:

THIS IS TO CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY THAT THE MATERIALS DESCRIBED IN I/B 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.

NAME & TITLE (please print)	SIGNATURE	DATE
W.C. Richards Chief Engineer	W.C. Richards	4-20-81

Keep goldenrod copy for your records. Send pink copy to:

DEPARTMENT OF NATURAL RESOURCES, WATER QUALITY DIVISION, P.O. BOX 30028, LANSING, MI 48909

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER)

A. NAME MR. FRANK, INC.

ADDRESS 201 W. 155TH ST SOUTH HOLLAND, ILL.

TELEPHONE NUMBER 312 596-3397 PICK-UP DATE 4 (mo.) 20 (da.) 81 (yr.)

B. HAULER JOB NUMBER 0079023 FACILITY NUMBER ILD069506460

C. VEHICLE LICENSE NO. 33387 STATE ILL.

D. HAULER CERTIFICATION:

THIS IS TO CERTIFY UNDER THE PENALTY OF PERJURY THE WASTE DESCRIBED IN PART I/B OF THIS MANIFEST OR IN THE ATTACHMENT WAS ACCEPTED BY ME FOR TRANSPORTATION TO THE PROCESSING FACILITY NAMED IN PART I/C.

NAME AND TITLE (please print)	SIGNATURE	DATE
ROBERT PERKINS (DRIVER)	Robert Perkins	4-20-81

Keep canary copy for your records.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY)

FACILITY NUMBER IND 016360255

A. NAME AMERICAN CHEMICAL

ADDRESS 420 S. COLFAX, GRIFFITH, IND.

TELEPHONE NUMBER _____ ACCEPTANCE DATE 4 (mo.) 20 (da.) 81 (yr.)

B. PROCESS METHOD:

☒ INCINERATION ☐ RECLAMATION ☐ OTHER (Specify) _____

C. CERTIFICATION:

THE HAULER NAMED ABOVE DELIVERED THE WASTE DESCRIBED IN PART I/B OF THIS MANIFEST TO THIS PROCESING FACILITY. IT WAS ACCEPTABLE MATERIAL FOR PROCESSING UNDER THE TERMS OF FEDERAL, STATE, AND LOCAL REGULATIONS. I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

NAME AND TITLE (please print)	SIGNATURE	DATE
F DUNFEE	F Dunfee	4/20/81

Keep green copy for your records. Send white copy to:

DEPARTMENT OF NATURAL RESOURCES, WATER QUALITY DIVISION, P.O. BOX 30028, LANSING, MI 48909

TO WEST 96IT T-50 4/20/81 JAM

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 517-373-7660, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800-424-8802

R-4896 11/78

STATE OF MICHIGAN

Rev. 3/81

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER)

MI 0042269

001280

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
GUARDSMAN CHEMICALS, INC.	MR. FRANK	AMERICAN CHEMICAL SERVICES
Site Address	**Transporters Address**	**Facility Address**
1350 STEELE AVE. S.W. GRAND RAPIDS, MI 49507	201 W. 155th STREET S. HOLLAND, IL.	420 S. COLFAX GRIFFITH, IN
Phone Number	**Phone Number**	**Phone Number**
616) 452-5181	312) 596-3377	219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
M I D 0 0 6 0 1 7 4 3 8	I L D 0 6 9 5 0 6 1 6 0	I N D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	HAZARDOUS WASTE PAINT, N.O.S.	FLAMMABLE LIQ.	UN-1263	0 7	1	2		X			1 5 0 0 0	GALS	K 0 8 2
2.													
3.													
4.													
5.													
6.													

COMMENTS — Include Safety precautions and special handling instructions.

CONTAIN AND KEEP FLAME OF IGNITED MATERIAL AWAY, PICK UP AND TRANSPORT TO PROPER DISPOSAL LOCATION.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: ① W. C. RICHARDS

Date Shipped MO. DAY YEAR: 0 8 1 3 8 1

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 0 0 7 9 0 2 5

Subsequent Transporter Vehicle I.D. No's

Transporter Signature: ② Robert Perkins

Date(s) Received: 0 8 1 3 8 1

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 Jim Murphy

Facility Site EPA I.D. Number

☒ Accepted ☐ Rejected

Date Received: 8 1 3 8 1

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

To 211R T-50 8/18/81 JM

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0042298

001281

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Guardsman Chemicals, Inc.	Mr. Frank	American Chemical Services
Site Address	**Transporters Address**	**Facility Address**
1350 Steele Street S.W. Grand Rapids, MI 49507	201 W. 155th Street S. Holland, IL.	420 S. Colfax Griffith, IN
Phone Number	**Phone Number**	**Phone Number**
(616) 452-5181	(312) 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MID006017438	ILD069506160	IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Hazardous Waste Paint, N.O.S.	Flammable Liquid	UN-1263	07	1	TR		X			005000	Gals	K082
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

Contain and keep flame of ignited material away, pick up and transport to proper disposal location.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: ① W. C. Richards — Date Shipped MO. DAY YEAR: 10 29 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in *administrative and court proceedings.*

Transporter Vehicle I.D. No. 1: 00790279

Subsequent Transporter Vehicle I.D. No's:

Transporter Signature: ② Robert Rickers — Date(s) Received: 10 29 81

Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ [illegible] — ☒ Accepted ☐ Rejected — Date Received: 10 29 81

Facility Site EPA I.D. Number: IND016360265

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

TO 210X T-50. 10/29/81 JTM

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0059551

001282

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Guardsman Chemicals, Inc.	Mr. Frank	American Chemical Services
Site Address	**Transporters Address**	**Facility Address**
1350 Steele Street SW Grand Rapids, MI 49507	201 W 155th Street S. Holland ILL	420 S. Colfax Griffith, IN
Phone Number	**Phone Number**	**Phone Number**
(616) 452-5181	312) 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MID006017438	ILD069506160	IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Haz. Waste Paint, N.O.S.	FLAMMABLE LIQ	UN-1263	017	1	TR		X			004500	GALS	K082
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

Contain and keep flame of ignited material away, pick up and transport to proper disposal location.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: W. C. Richards ① W. C. Richards — Date Shipped MO. DAY YEAR: 11 18 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 00790191 — Transporter Signature ② Robert Perkins — Date(s) Received: 11 18 81

Subsequent Transporter Vehicle I.D. No's — Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those [illegible] also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this [illegible] 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: 11 18 81

[illegible] significant discrepancies between manifest and shipment.

[illegible]LS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TO 210 R T-50 GKM 11/18/81 TSDF COPY

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0224943
1 7

...MPLETED BY
...ASTE GENERATOR

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997852
ILD 009668492 13

Guardian Packaging 475 N. Kirk
(Company Name) Address

Batavia IL 60510
City State Zip

0890100006
14 Generator Number 24

WASTE HAULER(S)

Mr. Frank Inc 201 W 155th St.
Hauler Name Hauler Address

S.W.H. Registration Number 0079023
25 31

South Holland IL. PO-2-6995
Hauler Name Hauler Address

S.W.H. Registration Number ILD069506160
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem Service
(Facility Name) Address

91808902
39 Site Number 46

Griffith IND. 46319 PO-2-6994
City State Zip

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WK Solvents F003 WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: HAZARD CLASS:

Flammable

WEIGHT FOR D.O.T. USE 37,000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000
47 52

1 GALLONS (Circle One)
2 CU. YDS
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: 6-10-81 E. Morrin Plant Manager
(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 DATE: 06 10 81
(Authorized Signature) 54 59

(2) DATE: / /
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 6/16/81
60 65

COMMENTS OR SPECIAL INSTRUCTIONS: To 1127 T-63 6/10/81 JJM

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001283

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0224944

..PLETED BY
WASTE GENERATOR

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997852

Guardian Packaging Corp (Company Name) 475 N. Kirk Rd (Address)
Batavia (City) IL (State) 60510 (Zip)

ILD 009668492
0890100006 (Generator Number)

WASTE HAULER(S)

Mr T-Rank Inc. (Hauler Name) 201 W. 155th St. (Hauler Address) S.W.H. Registration Number 0079025
DO-27103 ILD 069506160

South Holland (Hauler Name) IL. (Hauler Address) S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Service (Facility Name) Address 91808902 (Site Number)
Griffith (City) IND (State) 46319 (Zip) ILD 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvents E903 WASTE 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 37,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-16-81 Ed Moore Plant Manager (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Robert Graham (Authorized Signature) DATE: 06 16 81

(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

J D Miller (Authorized Signature) DATE: 6/16/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT T-50 6/16/81 gpm.

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001284

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0401846

...LETED BY
...ASTE GENERATOR

Authorization Number 997852

Guardian Dr/Aging — (Company Name) — 475 N. Kirk Rd — Address
ILD 009668492
Batavia — City — IL — State — 60510 — Zip
0890100006 — Generator Number

WASTE HAULER(S)

MR Frank Inc — Hauler Name — 201 W. 155th St. — Hauler Address
S.W.H. Registration Number 0079009
South Holland — Hauler Name — IL PO-27103 — Hauler Address
ILD 069506160
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem Service — (Facility Name) — Address
9180890 02 — Site Number
Griffith — City — IND — State — 46319 — Zip
ILD 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK Solvents
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: F003

SHIPPING DESCRIPTION:
HAZARD CLASS: Flammable
WEIGHT FOR D.O.T. USE 37000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 005000
(1) GALLONS (Circle One) (2) CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-16-81
E.D. Moore Plant Manager
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Donald H Buck (Authorized Signature) DATE: 06 17 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

T D Miller (Authorized Signature) DATE: 6 17 81

COMMENTS OR SPECIAL INSTRUCTIONS: To West Acit T-63 6/17/81 JPM

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001285

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0401847

...LETED BY WASTE GENERATOR

Authorization Number 997852

GUARDIAN PACKAGING CORP (Company Name) 475 N. KIRK Rd (Address)
BATAVIA (City) IL (State) 60510 (Zip)
ILD-009668492
0890100006 G (Generator Number)

WASTE HAULER(S)

MR. TRANK INC. (Hauler Name) 201 W. 155th St. (Hauler Address) S.W.H. Registration Number 0079004
South Holland (Hauler Name) IL. (Hauler Address) PO 27199 ILD-069506160 S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERVICE (Facility Name) 4110 S. COLFAX (Address) PO-2 7200 9 1808902 (Site Number)
GRIFFITH (City) IND. (State) 46319 (Zip) ILD-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK Solvent F003 WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: HAZARD CLASS: Flammable WEIGHT FOR D.O.T. USE 33000 (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 (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7.2.81 E. Donovan Plant Manage (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Ronald Brinkmann (Authorized Signature) DATE: 7 21 81 (54–59)

(2) (Authorized Signature) DATE: / / (54–59)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO /

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 7/2/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT T-50 7/2/81 JJM

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001286

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0486384
1 7

LETED BY
WASTE GENERATOR

Authorization Number 997852
8 13

Guardian Packaging Corp 475 N. Kirk Rd
(Company Name) Address Phone Number

ILD-009668492

089010000 6
14 Generator Number 24

Batavia IL. 60510
City State Zip

ILD009668492
EPA Number

WASTE HAULER(S)

Mr. Trank Inc. 201 W. 155th St.
Hauler Name Hauler Address

S.W.H. Registration Number 0079004
25 31

South Holland IL. 3125963377
Phone Number

ILD069506160
EPA Number

Hauler Name Hauler Address

S.W.H. Registration Number
32 38

Phone Number EPA Number

DESTINATION — DISPOSAL, STORAGE OR TREATMENT SITE

American Chem Service 410 So Colfax
(Facility Name) Address

9180890 2
39 Site Number 46

Griffith IND. 46319 3127683400 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address

39 Site Number 46

City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent

WASTE PHASE: 3 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

UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE [redacted] LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 00 0600
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 x [signature] (Authorized Signature) DATE: 7-10-81

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) [signature] (Authorized Signature) DATE: 7/10/81
54 59

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE: 7/10/81
60 65

COMMENTS OR SPECIAL INSTRUCTIONS: To West Agit, Tj-50 7/10/81 9 a.m.

IN ILLINOIS: 217 / 782-3637 *24 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

001287

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0486388 (1–7)

Authorization Number 997852 (8–13)

. LETED BY
.ASTE GENERATOR

Guardian Packaging Coop. | 475 N. Kirk Rd | 3128795850 | 08901000007 G
(Company Name) | Address | Phone Number (14) | Generator Number (24)

Batavia | IL | 60510 | ILD009668492
City | State | Zip | EPA Number

WASTE HAULER(S)

PO. 2. 7539

Mr. Frank Inc | 201 W. 155th St. | S.W.H. Registration Number 0079009 (25–31)
Hauler Name | Hauler Address

South Holland IL. | 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 Service | 410 So. Colfax | 91808902 (39–46)
(Facility Name) | Address | Site Number

Griffith | IND. | 46319 | 3127683400 | IND016360265
City | State | Zip | Phone Number | EPA Number

Alternate (Facility Name) | Address | PO-27538 | Site Number (39–46)

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent NOS | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Ink Solvent NOS | HAZARD CLASS: Flammable | F003

UN or NA Number | EPA HW Number

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED 005000 (47–52) (GALLONS) / 2 CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 10-12-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) _____ (Authorized Signature) DATE: 10/12/81 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

_____ (Authorized Signature) DATE 10/12/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 204K T-50 10/12/81 9:30

IN ILLINOIS: 217 / 782-3637 | *24 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

001288

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

0333670

Authorization Number 997148

GRAHAM PANIT & VARNISH (Company Name) | 4800 S. RICHMOND (Address)
CHICAGO (City) | ILLINOIS (State) | 60632 (Zip)

ILD 00 52 34 03
0 3 1 6 0 0 0 3 3 9 G
Generator Number

WASTE HAULER(S)

MR FRANK INC (Hauler Name) | 201 W. 155th St So Holland (Hauler Address) | S.W.H. Registration Number 0079009
ILD 069506116

Hauler Name | Hauler Address | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S COLFAX (Address) | 9186490 (Site Number)
GRIFFITH (City) | IND (State) | 46319 (Zip)
IND 016360261

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY PAINT SOLVENT F005 | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
FLAMMABLE	CLASS 1	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/10/81 | James Stutler (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) C Boucki (Authorized Signature) DATE: 06/10/81

(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 6/10/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST ACIT T-50 6/10/81 JSM

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PAR

001289

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

0333671
1 7

Authorization Number 9 9 7 1 4 8
8 13

GRAHAM PAINT (Company Name) | 4800 S. RICHMOND (Address)
ILD 005234034
CHICAGO (City) | ILLINOIS (State) | 60632 (Zip)
0 3 1 6 0 0 0 3 3 9 G
14 Generator Number 24

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 701 W 155thst (Hauler Address)
S.W.H. Registration Number 0079023
25 31
ILD 069560160

Hauler Name | Hauler Address
S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S COLFAX (Address)
9180902
39 Site Number 46
GRIFFITH (City) | IND (State) | 46319 (Zip)
IMD 016340265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY PAINT SOLVENT
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE
HAZARD CLASS: CLASS 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: 2 5 0 0 0
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: 9/11/91
(Authorized Signature) K079

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 9 / 11 / 91
54 59

(2) _____ (Authorized Signature) DATE: / / _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 9 / 11 / 91
60 65

COMMENTS OR SPECIAL INSTRUCTIONS: To 203X T-50 9/11/91

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

001290

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 11

TO:	FROM:
T/S/D/F American Chemical	Generator Grabill Cabinet Co., Inc.
E.P.A. ID Code No. IND0-163600265	E.P.A. ID Code No. IND 000421441
Address 420 S. Colfax	Address P.O. Box 40
Destination Griffith, IND. 46319	Origin Grabill, IND 46741
Phone 219 924-4370	Phone 219 627-2181

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
6	55 Gal. Drums			F005		
	Waste Paint Thinning					
	Compound	Flammable Liquid			330 gl.	

HAZARDOUS WASTE

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D/F _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency.

Generator Signature [illegible] Date 3-24-81

TRANSPORTER #1 [illegible] E.P.A. ID No. [illegible]
Address [illegible]
City [illegible] State IN Zip [illegible] Phone [illegible]

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature [illegible] Date [illegible]

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL/FACILITY Pumped to 125K 3/20/81 T-63

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D/F Signature [illegible] Date [illegible]

COPY

YELLOW COPY

001291

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

TO: T/S/D/F	FROM: Generator
E.P.A. ID Code No.	E.P.A. ID Code No.
Address	Address
Destination	Origin
Phone	Phone

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D/F _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency.

Generator Signature _____ Date _____

TRANSPORTER #1 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL/FACILITY TO 1425 T-63 6/3/81 JM

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D/F Signature _____ Date 6-3-81

HAZARDOUS WASTE

HAZARDOUS WASTE

T/S/D/F COPY

001292

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 2

TO: T/S/D/F	FROM: Generator Geab.11 Cabinet Co Inc
E.P.A. ID Code No.	E.P.A. ID Code No. IND 005481441
Address	Address
Destination	Origin
Phone	Phone

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	Cut Dust					
	Wet Paint Sl					
	(Combustible)	Flammable				

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

$_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D/F _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency.

Generator Signature _____ Date 4/

TRANSPORTER #1 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date 4-6-81

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL/FACILITY TO 12TR 4/14/81 T-63 JMM

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D/F Signature _____ Date _____

COPY

001293

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 4

TO: T/S/D/F	FROM: Generator Gatell Oil Co. & Co. Inc.
E.P.A. ID Code No.	E.P.A. ID Code No.
Address	Address P.O. Box 40
Destination	Origin Gatell, La.
Phone	Phone 211 627-2131

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
8	Gas Oil Drums	F 003			432	
	Waste Heat					
	Treating Company	Hazardous				
		Liquid				

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D/F _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency.

Generator Signature Gatell Oil Co. Inc. Date 7-14-81

TRANSPORTER #1 _____ E.P.A. ID No. _____
Address _____
City _____ State LA Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date 7-16-81

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL/FACILITY TO 126E T-63 10/8/81 gpm

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D/F Signature _____ Date _____

T/S/D/F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

001294

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0383388

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 991562
ILT 0694834 82

Glidden Paint (Company Name) | 1833 S. Normal (Address)
Chicago (City) | Illinois (State) | 60616 (Zip)

0316000181 (Generator Number)

WASTE HAULER(S)

Mr Frank & Co (Hauler Name) | 201 W. 155th St (Hauler Address)
S.W.H. Registration Number 0079004
ILD 069506160

(Hauler Name) | South Holland, Ill 60473 (Hauler Address)
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 S. Colfax Ave. (Address)
9180890 2 (Site Number)
Griffith (City) | Indiana (State) | 46319 (Zip)
IND 016360625

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic solvents F005 | WASTE PHASE: Liquid (Liquid, Gascous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Organic solvents	FLAMMABLE	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 00 3000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-5-81 | William C Smith (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Ronald Bridgewater (Authorized Signature) DATE: 6 5 81

(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 6 5 81

COMMENTS OR SPECIAL INSTRUCTIONS: To 123R 6/5/81 TJ-63 jm

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001295

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

0383389

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991562
ILT 064983492

Glidden Paint (Company Name) | 1833 S. Normal (Address)
Chicago (City) | Illinois (State) | 60616 (Zip)

031600 0181 G (Generator Number)

WASTE HAULER(S)

Mr Frank & Co (Hauler Name) | 201 W. 155th st (Hauler Address)
S.W.H. Registration Number 0079005
ILD 069506160

(Hauler Name) | South Holland Ill 60473 (Hauler Address)
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 4120 S. Colfax (Address)
91808902 (Site Number)
Griffith (City) | IND (State) | 46319 (Zip)
IND 016360025
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic solvents
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
Organic solvents	Flammable

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000

(1) GALLONS (Circle One)
CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)_____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-1-81 William R Smith (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 7/1/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO_____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 7/1/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 123R T-63 7/1/81 gpm.

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001296

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0383390

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 991562
ILT 0699 83492

Glidden Paint (Company Name) | 1833 S. Normal (Address)
Chicago (City) | Illinois (State) | 60616 (Zip)
0316000181 G (Generator Number)

WASTE HAULER(S)

Mr. Frank & Co (Hauler Name) | 201 W. 155th St (Hauler Address)
S.W.H. Registration Number 0079004
ILD 069506160

(Hauler Name) | South Holland Ill 60473 (Hauler Address)
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 S. Colfax (Address)
91808902 (Site Number)
Griffith (City) | IND (State) | 46319 (Zip)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic solvents
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Organic 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: 003000 W.R.S.
(1) GALLONS (Circle One)
CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-4-81
William R Smith KDS (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) Graham Robertson (Authorized Signature) DATE: 08 04 81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 8/4/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 123R T-63 8/4/81 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

001297

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

0383384

Authorization Number 991562
ILT 0699834 92
031600018 1 G
Generator Number

Glidden Paint (Company Name) | 1833 S. Normal (Address)
Chicago (City) | Illinois (State) | 60616 (Zip)

WASTE HAULER(S)

~~D+J Waste~~ (Hauler Name) | (Hauler Address) | S.W.H. Registration Number ~~0024~~ ILD 069506160

MR. FRANK & CO (Hauler Name) | 201 W. 155St (Hauler Address) | S.W.H. Registration Number 0079005

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 S. Colfax Ave (Address) | 91808902 Site Number
Griffith (City) | IND (State) | 46319 (Zip) | IND 0163602 5

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Organic 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: 3000 GALS.

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: 2-5-81 | William R Smith (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: 02/05/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 2/5/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 123 R 2/5/81 T-63 / Jim Murphy

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001298

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

0383385

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991562

Glidden Paint (Company Name) | 1833 S. Normal (Address)
Chicago (City) | Illinois (State) | 60616 (Zip)

ILT 0699834 92
0316000181 Generator Number

WASTE HAULER(S)

Mr. Frank & Co (Hauler Name) | 201 W. 155th St (Hauler Address)
S.W.H. Registration Number 007900 H
ILD 069506160

(Hauler Name) | (Hauler Address)
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 S. Colfax Ave (Address)
91808902 Site Number
Griffith (City) | Indiana (State) | 46319 (Zip)
IND 016360 25

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvents
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Organic 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: ~~3000~~ 2700 gals
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: 2-2-81 William R Smith (Authorized Signature)

WASTE HAULER

KDT

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 02 81

(2) ____ (Authorized Signature) DATE: __ __ __

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 02 02 81

COMMENTS OR SPECIAL INSTRUCTIONS: To East Acft R T-50 3/2/81 Jim Murphy

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001299

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

0383387
1 7

Authorization Number 991562 (8–13)
ILT 069983492
0316000181 (14 Generator Number 24)

Glidden Paint — (Company Name)
1833 S. Normal — Address
Chicago — City
Illinois — State
60616 — Zip

WASTE HAULER(S)

MR. FRANK & Co — Hauler Name
201 W. 155th St — Hauler Address
S.W.H. Registration Number 0079005 (25–31)
ILD 069506160

Hauler Name
South Holland, Ill 60473 — Hauler Address
S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical — (Facility Name)
420 S. Colfax Ave — Address
9180902 (39–46 Site Number)
Griffith — City
Indiana — State
46319 — Zip
IND 01636025

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvents
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Organic 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: 003000 (47–52)
1 GALLONS (Circle One)
2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-14-81
William R Smith (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: 5 14 81 (54–59)

(2) _____ (Authorized Signature) DATE: ___ ___ ___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 5 14 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 123E T-63 5/14/81 jrm

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001300

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

0383386

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991562

Glidden Paint (Company Name) | 1833 S. Normal Address | ILT 069183492

Chicago City | Illinois State | 60616 Zip

031 6000 181 Generator Number

WASTE HAULER(S)

MR Frank & Co Hauler Name | 201 W. 155th St Hauler Address | S.W.H. Registration Number 0079009

South Holland, Ill 60473 | ILD 069506160

Hauler Name | Hauler Address | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 S. Colfax Ave Address | 91808902 Site Number

Griffith City | Indiana State | 46319 Zip | IND 01636025

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Organic 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: 004000

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.

UN 1993

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-3-81 | William R Smith (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: 04/03/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 4/3/81

SPECIAL INSTRUCTIONS: To 123R T-63 4/3/81 gpm

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS OUTSIDE ILLINOIS: 800 / 424-8802

OR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001301

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0383391
1 7

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 991562 (8-13)

Glidden Paint (Company Name) | 1883 S. [illegible] (Address)
Chicago (City) | Illinois (State) | 60616 (Zip)
ILT 069983492
03160001816 (14-24) Generator Number
ATTN: William Smith

WASTE HAULER(S)

MR Frank & Co (Hauler Name) | 201 W. 155th St (Hauler Address)
S.W.H. Registration Number 0079005 (25-31)
ILD 064506160

(Hauler Name) | South Holland, ILL 60473 (Hauler Address)
S.W.H. Registration Number (32-38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 S. Colfax (Address)
91808902 (39-46) Site Number
Griffith (City) | Indiana (State) | 46319 (Zip)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvents
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Organic Solvents	Flammable	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000 (47-52)

(1) GALLONS (Circle One) (2) CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-28-81 *William C. Smith (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Jim Bradley (Authorized Signature) DATE: 8/28/81 (54-59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 8 28 81 (60-65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 123X T-63 8/28/81 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

001302

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0383392

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 991562

Glidden Paint (Company Name) | 1833 S. Normal (Address)
Chicago (City) | Illinois (State) | 60616 (Zip)
ILT 0699834 92
03160001 81 G (Generator Number)
ATTN C. HARDY

WASTE HAULER(S)

Mr. Frank & Co (Hauler Name) | 201 W. 155th St (Hauler Address)
S.W.H. Registration Number 0079003
ILD 069506160

(Hauler Name) | S. Holland Ill 60473 (Hauler Address)
S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chem (Facility Name) | 420 S. Colfax (Address)
Griffith (City) | Indiana (State) | 46319 (Zip)
9180890 2 (Site Number)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvents
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Organic Solv.
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: 007600
(1) GALLONS (Circle One) (2) CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9/17/81
Carolyn L Hardy ENV C (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Jim Bradley (Authorized Signature) DATE: 9/17/81
(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: 9/17/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 723 E. I-63 9/22/81 gpm.

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001303

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

0383394

Authorization Number 991562 (13)

GLIDDEN C & R (Company Name) | 1833 S. NORMAL (Address)

CHICAGO (City) | IL. (State) | 60616 (Zip)

ILT 069983492

0 3 | 6 0 0 0 1 8 1 G (14–24) Generator Number

ATTN. NORBERT SCHWARZER

WASTE HAULER(S)

MR. FRANK & CO. (Hauler Name) | 201 W. 155 STREET (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 (25–31)

S. HOLLAND, IL. 60473 (Hauler Address)

ILD 069506160

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX (Address) | 9 1 8 0 8 9 0 2 (39–46) Site Number

GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

IND. 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: ORGANIC 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: 0 0 3 0 0 0 (47–52) | (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: 10/19/81 | M. Schwarz (Authorized Signature) | C073

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: 10/19/81 (54–59)

(2) _____ (Authorized Signature) DATE: ____/____/____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 10/9/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123K T-63 10/19/81 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

001304

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0200374

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 992782

Glidden Coatings (Company Name) | 1855 North LeClaire Ave. (Address) | 0316000037 Generator Number

Chicago (City) | Illinois (State) | 60639 (Zip) | ILD 069983492

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 S. Kenton, Crestwood, Ill (Hauler Address) | S.W.H. Registration Number 0311 EPA ILT 000646810

American Chemical Service, Inc. (Hauler Name) | P. O. Box 190, Griffith, IND. (Hauler Address) | S.W.H. Registration Number 0024001 EPA IND 01360265

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) | EPA. IND 01636026

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:	WEIGHT FOR D.O.T. USE
Waste Solvents	Flammable	Use 400* per drum — 3,200 (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 4 0 0 (47–52)

1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) 8 DRUMS | TANK TRUCK | OPEN TRUCK | OTHER (Specify) Van Trailer

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: x 10-28-81 | x Raymond J. Erin (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) James Butler (Authorized Signature) DATE: 10 28 81 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael O Burke (Authorized Signature) DATE: 10/28/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 10/28/81
TO 124 TK T-63 GRM 11/6/81

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

001305

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0383395

TO BE COMPLETED BY WASTE GENERATOR

I

Authorization Number 991562

GLIDDEN C & R (Company Name) | 1833 S. NORMAL (Address)
CHICAGO (City) | IL. (State) | 60616 (Zip)
ILT 069983492
03160001816 (Generator Number)
ATTN: NORBERT SCHWARZER

WASTE HAULER(S)

MR. FRANK & CO. (Hauler Name) | 201 W. 155 STREET (Hauler Address)
S. HOLLAND, IL. 60473
S.W.H. Registration Number 0079005
ILD-069506160

Hauler Name | Hauler Address
S.W.H. Registration Number

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX (Address)
GRIFFITH (City) | INDIANA (State) | 46319 (Zip)
91808902 (Site Number)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: ORGANIC 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: 003000
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: 11/6/81 Norbert Schwarzer (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 Geiger (Authorized Signature) DATE: 11 6 81

(2) _____ (Authorized Signature) DATE: ___ ___ ___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 11 6 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 123R T-63 GRM 11/6/81

SITE COPY - PART 3

001306

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

0383396

Authorization Number 991562

GLIDDEN C & R (Company Name) | 1833 S. NORMAL (Address)
CHICAGO (City) | IL. (State) | 60616 (Zip)

ILT 1800 12080
03160000181 G (Generator Number)
ATTN. NORBERT SCHWARZER

WASTE HAULER(S)

MR. FRANK & CO. (Hauler Name) | 201 W. 155 STREET (Hauler Address)
S. HOLLAND, IL 60473
S.W.H. Registration Number 0679001
ILD 069506160

S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX (Address)
GRIFFITH (City) | INDIANA (State) | 46319 (Zip)
91808902 (Site Number)
IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: ORGANIC SOLVENT
HAZARD CLASS: FLAMMABLE
WEIGHT FOR D.O.T. USE: G LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002800
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: 12-16-81
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE: 12/16/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 12/16/81

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

To 123 Fm T-63 GRM 12/16/81

SITE COPY - PART 3

001307

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0323575

MPLETED BY
WASTE GENERATOR

Authorization Number 9 9 7 0 1 8

J.A. GITS PLASTIC CORP. (Company Name) | 200 W. CENTRAL AVENUE P.O. BOX 7070 | ILD005246491
ROSELLE (City) | ILLINOIS (State) | 60172 (Zip)
0 4 3 4 8 2 0 0 0 2 G — Generator Number

WASTE HAULER(S)

MR FRANK INC. (Hauler Name) | 201 W. 155 St. SOUTH HOLLAND, IL (Hauler Address)
S.W.H. Registration Number 0 0 7 9 0 0 5

(Hauler Name) | (Hauler Address)
ILD069506160
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 W. COLFAX (Address)
9 1 8 8 8 9 0 2 — Site Number

GRIFFITH (City) | INDIANA (State) | 46319 (Zip)
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: LIQUID | 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: 2000 (47–52)

1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-23-81 F003 John Liddicoat (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: 01 23 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: 1 12 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 125E 1/23/81 T-68 Jim Murphy

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE

001308

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

0323577

Authorization Number 997018

J.A. GITS PLASTIC CORP. (Company Name) | 200 W. Central Ave.--P.O. Box 72070 (Address) | ILD005246491

Roselle (City) | Illinois (State) | 60172 (Zip)

043482000 2 G (Generator Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155 st. (Hauler Address) | S.W.H. Registration Number 0079005

ILD069506160

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 W. Colfax (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
Liquid	Flammable
	UN 1993

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 1500

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: 3-10-81 F003 (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: 31 10 81

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO /

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Bob Mauck (Authorized Signature) DATE: 31 10 81

COMMENTS OR SPECIAL INSTRUCTIONS: To 125R T-63 3/10/81 Jim Murphy

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001309

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0323579

...MPLETED BY
WASTE GENERATOR

Authorization Number 997018

J.A. GITS PLASTIC CORP. (Company Name) | 200 W. CENTRAL AVE.-P.O. BOX 72070 (Address) | ILD005246491

ROSELLE (City) | ILLINOIS (State) | 60172 (Zip)

0 4 3 4 8 2 0 0 0 2 G
Generator Number

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155 ST. SOUTH HOLLAND, IL (Hauler Address)

S.W.H. Registration Number 0 0 7 9 1 0 0 4

ILD069506160

Hauler Name | Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 W. COLFAX (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: 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: LIQUID

HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 2 5 0 0

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-24-81 F003 (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Ronald Bridgewater (Authorized Signature) DATE: 04/24/81

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 4/24/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 1/24E 4/24/81 T-63 JRM

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001310

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0323581

Authorization Number 9 9 7 0 1 8

COMPLETED BY WASTE GENERATOR

J.A. GITS PLASTIC CORP. (Company Name) | 200 W. CENTRAL AVENUE P.O. BOX 72070 (Address) | ILD005246491
ROSELLE (City) | ILLINOIS (State) | 60172 (Zip)
0 4 3 4 8 2 0 0 0 2 6 — Generator Number

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) | 201 W. 155 ST. SOUTH HOLLAND, IL (Hauler Address)
S.W.H. Registration Number 0 0 7 9 0 0 5

ILD069506160

(Hauler Name) | (Hauler Address)
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVENUE (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: PAINT SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
LIQUID	FLAMMABLE	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 1 6 0 0 (47–52)

1 GALLONS (Circle One) / 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-15-81 F003 (Authorized Signature) F011

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 15 81 (54–59)

(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES: NO:

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 6 15 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 1125 TR 6/15/81 9781 T-63

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001311

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0323582

Authorization Number 997018

COMPLETED BY WASTE GENERATOR

J.A. GITS PLASTIC CORP. (Company Name)	200 W. CENTRAL AVENUE P.O. BOX 72070 (Address)	ILD005246491
ROSELLE (City)	ILLINOIS (State) 60172 (Zip)	04-34820002 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 00795 ILD069506160
(Hauler Name)	(Hauler Address)	S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name)	420 S. COLFAX AVENUE (Address)	918089024 (Site Number)
GRIFFITH (City)	INDIANA (State) 46319 (Zip)	IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
LIQUID	FLAMMABLE	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 007300 (3000 min) (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: 7-21-81

F003

Katherine B. Nake (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) J Bradley (Authorized Signature) DATE: 7/21/81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 7/21/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 126R T-63 7/21/81 JTM

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001312

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0323584
1 7

...MPLETED BY
WASTE GENERATOR

Authorization Number 9 9 7 0 1 8
8 13

J.A. GITS PLASTIC CORP. (Company Name) | 200 W. CENTRAL AVENUE (Address) P.O. BOX 72070 | ILD005246491
ROSELLE (City) | ILLINOIS (State) | 60172 (Zip)
0 4 3 4 8 2 0 0 0 2 G
14 Generator Number 24

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) | 201 W. 155th ST (Hauler Address) SOUTH HOLLAND, IL | S.W.H. Registration Number 0 0 7 9 0 0 5 ILD069506160
25 31

Hauler Name | Hauler Address | S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 W. COLFAX AVENUE (Address) | 9 1 8 0 8 9 0 2 Site Number
39 46

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
LIQUID	FX FLAMMABLE	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 (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-10-81

F003

John Kauffman (Authorized Signature) F003

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Jim Bradley (Authorized Signature) DATE: 8 / 10 / 81
54 59

(2) (Authorized Signature) DATE: / /
54 59

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 8 / 10 / 81
60 65

COMMENTS OR SPECIAL INSTRUCTIONS: To 125E T-63 8/10/81 JGM.

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

001313

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0469571

Authorization Number 997018

...MPLETED BY
...STE GENERATOR

J.A. Gits Plastic Corpl (Company Name) | 200 W. Central Avenue P.O. Box 72070 (Address) | 3125292051 (Phone Number) | 0434820002 (Generator Number) G

Roselle (City) | Illinois (State) | 60172 (Zip) | ILD005246491 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 165th st. South Holland ,Ill (Hauler Address) | S.W.H. Registration Number 0079003

5963377 (Phone Number) | 69506160 ILD0XXXXXXX (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 W. Colfax Avenue (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 7683400 (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: | HAZARD CLASS: | UN or NA Number | EPA HW Number

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002000 (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 X [signature] (Authorized Signature) DATE: 9-15-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 09/15/81

(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

[signature] (Authorized Signature) DATE: 9/15/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 126 T-63 9/15/81 9pm

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

001314

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0469573

Authorization Number 9 9 7 [illegible] 1 8

COMPLETED BY WASTE GENERATOR

J. A. Gits Plastic Corp. | 200 Central Avenue | 3125292051 | 0 4 3 4 8 2 0 0 2 (G)
(Company Name) | Address | Phone Number | Generator Number

Roselle, | P.O. Box 72070 | Illinois | 60172
City | | State | Zip

I L D O 0 5 2 4 6 4 9 1
EPA Number

WASTE HAULER(S)

Mr. Frank Inc. | 201 W. 165th St. South Holland, IL | S.W.H. Registration Number 0 0 7 9 0 0 [illegible]
Hauler Name | Hauler Address

5 9 6 3 3 7
Phone Number

I L D O 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 | 420 W. Colfax Avenue | 9 1 8 0 8 9 0 2
(Facility Name) | Address | Site Number

Griffith | Indiana | 46319 | 7 6 8 3 4 0 0 | I N D O 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: Paint Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: | HAZARD CLASS: | UN or NA Number | EPA HW Number

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 3,000 | 1 GALLONS (Circle One) 2 CU. YDS

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 John Buddenhagen (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) Michael Fagan (Authorized Signature) | DATE: 10/28/81

(2) ____ (Authorized Signature) | DATE: ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

T Rundle (Authorized Signature) | DATE: 10/28/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 125th T-63 10/28/81 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

001315

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0469576

Authorization Number 997018

APLETED BY
ASTE GENERATOR

J.A. GITS PLASTIC CORP (Company Name) | 200 W. CENTRAL (Address) | 312-529-2051 (Phone Number) | 0 4 3 4 8 2 0 0 0 2 G (Generator Number)

XXXXXX ROSELLE (City) | ILLINOIS (State) | 60172 (Zip) | I L D 0 0 5 2 4 6 4 9 1 (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 0 1

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 (Facility Name) | 420 S. Colfax Ave. (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: 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: Liquid | HAZARD CLASS: Flammable | UN or NA Number | EPA HW Number

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 003000 | 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 John Riddebrandt (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) Michael Gaffa (Authorized Signature) DATE: 12/9/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature) DATE: 12/9/81

COMMENTS OR SPECIAL INSTRUCTIONS: [illegible]

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 126 K T-63 6 [illegible] 12/9/81

001316

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

045922(

Authorization Number 992393

TO BE COMPLETED BY WASTE GENERATOR

Gibraltar Chemical Works (Company Name) | 2300 W. 41st St. (Address) | 3125236622 (Phone Number) | 03160000815 G (Generator Number)

Chicago (City) | Ill (State) | 60609 (Zip) | ILD046550158 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 S. Kenton, Crestwood, IL 60445 (Hauler Address) | S.W.H. Registration Number 0311

3123858440 (Phone Number) | ILI000646810 (EPA Number)

American Chemical Service (Hauler Name) | 420 S. Colfax (Hauler Address) | S.W.H. Registration Number 0024802

Griffith, Ind. 46319 | 2199244370 (Phone Number) | IND016360265 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax (Address) | 91808902 (Site Number)

Griffith (City) | Ind (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION	HAZARD CLASS	UN or NA Number	EPA HW Number
Waste Solvents	Flammable Liquid	UN1993	F005

WEIGHT FOR D.O.T. USE: 2000 (LBS / TONS circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 200 (1 GALLONS / 2 CU. YDS. Circle One)

METHOD OF SHIPMENT (Circle One) (DRUMS 4 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) Box Trailer

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Joan S. Gerail (Authorized Signature) DATE: 10/9/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) James Batten (Authorized Signature) DATE: 10/9/81

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

Michael O'Brien (Authorized Signature) DATE: 10/9/81

COMMENTS OR SPECIAL INSTRUCTIONS UNLOAD SPOTTED 10/9/81
To 125 T-63 10/13/81 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

001317

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 25180

001318

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Geuder, Paeschke & Frey Co.
2. EPA IDENTIFICATION NO.: WIDO 06080741
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: P.O. Box 502, 324 N. 15th Street
5. CITY, STATE, ZIP CODE: Milwaukee, WI 53201
6. TELEPHONE NUMBER: (414) 272-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Bulk Tank	1,975	Waste Flammable Liquid, NOS	Flammable Liquid	UN 1993	1. Solid 3. Mixture 2. Liquid [2]	D001	14,216
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): Scott Lassa
17. DATE SHIPPED: M D Y 3 / 23 / 81

TRANSPORTER SECTION

18. COMPANY NAME: ABC Services, Inc.
19. EPA IDENTIFICATION NO.: WIDO 76159839
20. P.O. BOX OR STREET ADDRESS: 5700 49th Avenue
21. CITY, STATE, ZIP CODE: Kenosha, WI 53142
22. TELEPHONE NUMBER: (414) 657-6222
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Miles W Kaplan
25. NAME (Print): Miles W KAPLAN
26. Date Accepted: M / D / Y 3 23 81

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: INDO 16360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax Avenue
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: TO 125K T-63 3/24/81 Jim Murphy

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: FDunfee
39. NAME (Print): EDUNFEE
40. Date Accepted: M D Y 3 24 81

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME: NONE
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

HAZARDOUS WASTE MANIFEST

STD-81-027
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

THOMAS SOLVENT COMPANY
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND004557815	General Electric Company, 1701 College Street Fort Wayne, IN 46804 (219)426-7431	
TRANSPORTER # 1	MID039993902	Thomas Solvent Company, 5605 Planeview Drive Fort Wayne, IN (219)482-9638	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service, 420 South Colfax, Griffith, IN (219)924-4370	6/3/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1@ 55 gal.bbl.	07	F003	Waste Buthyl Alcohol	NA1120	Flammable Liquid		6.8 lb. per gal.	2365 gal.		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges
_____ (Signature of Consignor)

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE

5

UNLOADED AT DOCK 6/3/81 TO #2 SILO 8/3/81 T-63 gmm

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

001319

HAZARDOUS WASTE MANIFEST

STD-81-043
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

THOMAS SOLVENT COMPANY
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND004557815	General Electric Company, 1701 College Street Fort Wayne, IN 46804 (219)426-7431	
TRANSPORTER # 1	MID039993902	Thomas Solvent Company, 5605 Planeview Drive Fort Wayne, IN (219)482-9638	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service, 420 South Colfax, Griffith, IN (219)924-4370	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
6B 55gal.bbl.	07	F003	Waste Buthyl Alcohol	NA1120	Flammable Liquid		6.81b. pergal.	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

6

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

FILE COPY

001320

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 29812

001321

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
General Electric	WID0006121347	* Part # H-4765
4. P.O. BOX OR STREET ADDRESS: 4769 West Electric Avenue		
5. CITY, STATE, ZIP CODE: Milwaukee, Wisconsin	6. TELEPHONE NUMBER: (414) [illegible]	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1	125	Waste Oil, N.O.S.	Combustible Liquid	NA1270	1. Solid 3. Mixture [2] 2. Liquid	D001	1165
					1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): J. T. Ellit
17. DATE SHIPPED M O Y: 12/18/81

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
ABC Services Inc.	WID076159839
20. P.O. BOX OR STREET ADDRESS: 5700 49th Street	
21. CITY, STATE, ZIP CODE: Kenosha, Wisconsin 53142	22. TELEPHONE NUMBER: (414) 657-8222

23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M D Y
[signature]	Kip Nelson	12/18/81

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Services, Inc.	IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax Avenue	
35. CITY, STATE, ZIP CODE: Griffith, Indiana	36. TELEPHONE NUMBER: (219) 924-4370

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M D Y
[signature]		12 22 81

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

On dock Gmd 12/22/81

To 204 Tk -750 Gmd 12/28/81

HAZARDOUS WASTE MANIFEST

STD-81-016
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

THOMAS SOLVENT COMPANY
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND004557815	General Electric Company, 1701 College Street Fort Wayne, IN 46804 (219)743-7431	
TRANSPORTER # 1	MID039993902	Thomas Solvent Company, 5605 Planeview Drive Fort Wayne, IN (219)482-9638	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service, 420 South Colfax, Griffith, IN (219)924-4370	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
55 gal.bbl.	07	F003	Waste Buthyl Alcohol	NA1120	Flammable Liquid		6.8 lb. per gal.	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 _____

6

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

FILE COPY

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 001

GARRET

TO: T/S/D FACILITY	FROM: Generator
E.P.A. ID Code No.	E.P.A. ID Code No. N/A
Address	Address 802 S. King Street
Destination	Origin 46738
Phone	Phone 219-357-4161

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	Waste Xylene	Flammable Liquid		U-239		Flammable

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____

National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date 5/5/81

TRANSPORTER #1 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY To 142E T-63 6/3/81 JTM

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature _____ Date _____

T/S/D F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

001323

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

TO: T/S/D FACILITY	AMERICAN CHEMICAL SERVICE
E.P.A. ID Code No.	IND0-16360265
Address	420 S. Colfax
Destination	Griffith Indiana
Phone	219-924-4370
FROM: Generator	GARRETT TUBULAR PRODUCTS
E.P.A. ID Code No.	EXEMPT
Address	802 E. King Street
Origin	Garrett, Indiana
Phone	219-357-4161

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1 DRS	WASTE XYLENE	FLAMMABLE	UN-1307	U-239	55 G1	FLAMMABLE

PLACARDS REQUIRED FLAMMABLE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

$_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____
(Signature of Consignor)

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____

National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 THOMAS SOLVENT COMPANY E.P.A. ID No. MID-039993902
Address 5605 Planeview Drive
City Fort Wayne State IN Zip 46825 Phone 219-482-9630

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY To 122X T-63 10/8/81 jpm

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature _____ Date _____

HAZARDOUS WASTE

T/S/D F COPY

HAZARDOUS WASTE

001324

HAZARDOUS WASTE MANIFEST

0100
1 MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

STRAUD 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	[illegible]	[illegible]	8/12/81
TRANSPORTER # 1	[illegible]	[illegible]	8/12/81
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	[illegible]	[illegible]	9/1/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
55 DM		F003	[illegible] *	1993						
13		F001	1,1,1 [illegible]	7551						
			* MEK-ISOPROPYL							

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.

Ed [illegible] 8/12/81
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.
[illegible] 8/13/81
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.
[illegible] 9/1/81
TSDF SIGNATURE DATE

5

29 DRUMS TO 109K T-63 8/13/81 JPM

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

13 DRS TO 120X T-63 9/4/81 JPM.

TSDF COPY

001325

HAZARDOUS WASTE MANIFEST

0101
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

STRAND TRUCKING / AMERICAN CHEM
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND000915060	GCI INC. PH: (219) 637-5520 14520 LIMA Rd Ft WAYNE INDIANA 46818	SHIPPED 10/13/81
TRANSPORTER # 1	ILD000646810	STRAND TRUCKING 312-385-8440 13642 S KENTON AVE. CRESTWOOD ILL 60445	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICE 219-924-4370 P.O. Box 190 GRIFFITH, INDIANA 46319	10/13
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # - or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
12		F005	WASTE SOLVENTS *	1993						
3		F001	1,1,1 TRICHLOROETHANE	2831						
			* MEK - ISOPROPYL							

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES — FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

Richard McConnell 10/13/81
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE

UNLOADED 10/15/81 To 109R-T-43 10/21/81 9:30 AM

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

001326

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

0411535 (1–7)

Authorization Number 99521 6 (8–13)

H.A. Framburg & Co. | 941 German Dr. | 547-5757 | 0310150019 G (14–24)
(Company Name) | Address | Phone Number | Generator Number

Bellwood | IL. | 60104 | ILD001225554
City | State | Zip | EPA Number

WASTE HAULER(S)

LYNWOOD SUPPLY CO, INC. | 1950 OLD PORTER RD. PORTER, IND. 46304 | S.W.H. Registration Number 0980-0980 001 (25–31)
Hauler Name | Hauler Address

(219)762-4955 | IN 4527 -3040 -11
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 | 219-924-4370 | 39 Site Number 46
(Facility Name) | Address | Phone Number

GRIFFITH, INDIANA 46319 | 312-768-3400
City | State | Zip | Phone Number | EPA Number

SAFETY KLEEN CORP. | 1400 VIIA STREET | 39 Site Number 46
Alternate Facility Name | Address

ELGIN, ILLINOIS 60120 | 312- 697-8460
City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Trichloroethlene | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: | HAZARD CLASS: | UN or NA Number | EPA HW Number

WEIGHT FOR D.O.T. USE 6600 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED 550 (47–52) | 0 GALLONS (Circle One) 2 CU YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 10 Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X [signature] (Authorized Signature) DATE 12-23-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) X [signature] (Authorized Signature) DATE: 12 / 23 / 81 (54–59)

(2) N/A (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 / 15 / 82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 3/15/82
To 122K T-63 6PM 4.1.82

001327

STATE OF ILLINOIS 14R584 — 0352458

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 9980044

FLINT INK CORP (Company Name) | 2601 GARDNER RD (Address)
BROADVIEW (City) | IL (State) | 60153 (Zip)
0310300005 (Generator Number)
ILD 006537245

WASTE HAULER(S)

MR FRANK INC (Hauler Name) | 901 W 155th St (Hauler Address) | SOUTH HOLLAND
S.W.H. Registration Number 0079018
ILD 064506160

Hauler Name | Hauler Address
S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN ULTRA SER. (Facility Name) | 420 S. KOFAX (Address)
GRIFFIN (City) | INDIANA (State) | Zip
91808902 (Site Number)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK SOLVENTS | WASTE PHASE: LIQUID (Liquid / Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
FLAMMABLE LIQ	FLAMMABLE LIQUID N.O.S.

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: 203500 | 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: 10-28-81 4:15PM | Robert A Flynn Supt. (Authorized Signature) | HAZARDOUS Composite U220

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 28 81

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 10/28/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 10/28/81
TO 211TH 11/4/81 T-50 gtm

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001328

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

0315972
1 7

Authorization Number 9 9 86 38
8 13

Flexicon (Company Name) | 425 Fourth Street (Address)

0 8 9 0 2 5 0 0 0 2 G
14 Generator Number 24

East Dundee (City) | Illinois (State) | 60118 (Zip)

WASTE HAULER(S)

Landgrebe (Hauler Name) | 309 S. Shields, Chicago, Il. 60616 (Hauler Address)

Ind. S.W.H. Registration Number 0 0 9 8 4 2824
25 31

(Hauler Name) | (Hauler Address)

S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax Avenue (Address)

9 1 8 0 8 9 0 2
39 Site Number 46

Griffith (City) | Indiana (State) | 46310 (Zip)

IND 016360765

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Spent Ethyl Acetate/F003

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Flammable Liquid N.O.S.	UN or NA #1993	26,845# (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: ____ (47–52)

1 GALLONS 2 CU. YDS. (Circle One) 3.245 (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: 9/14/81

Harold C. Dawson (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) G. Henderson Jr 9-14-81 (Authorized Signature) DATE: 09/14/81 (54–59)

(2) ____ (Authorized Signature) DATE: ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Bob Mauck (Authorized Signature) DATE: 09/15/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 207x T-50 9/15/81 JTM

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001329

HAZARDOUS WASTE MANIFEST

001
MANIFEST DOCUMENT NUMBER

IND-064700883
SHIPPER NUMBER

Fisher-Calo Chemicals
NAME OF CARRIER (SCAC)

IN-9556-3040-11
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND-064700883	Fisher-Calo Chemicals & Solvent 1st Rd. Kingsbury, Ind.	8/27/81
TRANSPORTER # 1	"	" " "	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND-016360265	American Chemical 420 Colfax Griffth, Ind.	8/27/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
XXXXXXX XXXXXXX Tanker			Spent Solvent (Bottoms)	NA	Flammable			6,000 Gals.		

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

8/28/81 DATE

To 210 E J-50 8/28/81 9am

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

001330

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

0248023 (1–7)

Authorization Number 997071 (8–13)

FEDERATED PAINT MFG. INC. (Company Name) | 1882 S. NORMAL (Address)
CHICAGO (City) | ILL (State) | 60616 (Zip)

0316000311 G (14–24) Generator Number

WASTE HAULER(S)

MR FRANK INC (Hauler Name) | 201 W 155 ST S. HOLLAND (Hauler Address) | S.W.H. Registration Number 0079021 (25–31)

ILD 069506160 S.W.H. Registration Number (32–38)

Hauler Name | Hauler Address

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. CALFAX AVE (Address) | 91 8089 02 (39–46) Site Number
GRIFFITH (City) | IND (State) | 46319 (Zip) | IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS | WASTE PHASE: LIQUIDS N.O.S. (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: PAINT 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 (47–52)

(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: 3-12-81 1005 Pete Zaleski. (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) C Bonucki (Authorized Signature) DATE: 03 12 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:

BOB Mauck (Authorized Signature) DATE: 03 12 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 142R 3/12/81 T-63 Jim Murphy

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001331

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0122805
1 7

Authorization Number 997071 13
ILD 021293717
0316000311 G
14 Generator Number 24

FEDERATED PAINT MFG INC (Company Name) 1882 S. NORMAL Address
CHICAGO City ILL State 60616 Zip

WASTE HAULER(S)

(1) MR FRANK INC Hauler Name 201 W 155ST S. HOLLAND Hauler Address
S.W.H. Registration Number 0079009 25 31
ILD069506160

(2) _____ Hauler Name _____ Hauler Address
S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) 420 S. CALFAX AVE Address
GRIFFITH City IND State 46319 Zip
91808902 39 Site Number 46
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS UN-1993
WASTE PHASE: LIQUID N.O.S. (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: PAINT SOLVENTS
HAZARD CLASS: FLAMMABLE

#905

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: 5-21-81
Peter C. Fuhrer (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004500 47 52
(1) GALLONS (2) CU. YDS. (Circle One) 1 53

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Michael Martin (Authorized Signature) DATE 05/21/81 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:

[illegible] (Authorized Signature) DATE 052181 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: TO 1422R T-43 5/21/81 9PM

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001332

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0122804

Authorization Number 997071
ILD021293717
0316000311 G
Generator Number

FEDERATED PAINT MFG. INC. (Company Name) 1882 S. NORMAL Address
CHICAGO City ILL State 60616 Zip

WASTE HAULER(S)

(1) MR FRANK INC Hauler Name 201 W 155 S.T. HOLLAND Hauler Address
S.W.H. Registration Number 0079009
ILD069506160

(2) Hauler Name Hauler Address
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) 430 S. CALFAX AVE. Address
GRIFFITH City IND State 46319 Zip
91800902 Site Number
IND 016 360 265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS 905
WASTE PHASE: LIQUIDS-N.O.S. (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: PAINT SOLVENTS
HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-5-81 Pete Farber Sr. (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004800 (1 GALLONS, 2 CU. YDS.) (Circle One)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Gary Owen (Authorized Signature) DATE: 05/05/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ (Authorized Signature) DATE: 5 5 81

COMMENTS OR SPECIAL INSTRUCTIONS: To 125 E 5/5/81 T-63 gpm

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART-1 GENERATOR PART-2 IEPA PART-3 SITE PART-4 HAULER PART-5 IEPA PART-6 GENERATOR

SITE COPY - PART 3

001333

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0122803

WASTE GENERATOR

Authorization Number 992071

FEDERATED PAINT MFG INC (Company Name) 1882 S. NORMAL Address

ILD 021293717

CHICAGO City ILL State 60616 Zip

0316000311 Generator Number

WASTE HAULER(S)

(1) MR FRANK INC Hauler Name 20W155ST S. HOLLAND Hauler Address S.W.H. Registration Number 007903

ILD 069506160

(2) _____ Hauler Name _____ Hauler Address S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) 420 S. CALSAY AVE Address 91808902 Site Number

GRIFFITH City IND State 46319 Zip

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS 995 WASTE PHASE: LIQUIDS N.O.S. (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: PAINT SOLVENTS HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-3-81 Pete Faulenski (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005000 (1) GALLONS 2 CU. YDS. (Circle One) _____

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Robert Reckamp (Authorized Signature) DATE: 04 03 81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.

_____ (Authorized Signature) DATE: 4/3/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 124E T-63 4/3/81 JMM

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001334

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

0323528 (1–7)

Authorization Number 997071 (8–13)
ILD 021213717

FEDERATED PAINT MFG. INC. (Company Name) | 1882 S. NORMAL (Address)
CHICAGO (City) | ILL (State) | 60616 (Zip)

0316000311 G (14–24) Generator Number

WASTE HAULER(S)

MR FRANK INC. (Hauler Name) | 201 W 155 ST S. HOLLAND (Hauler Address)
S.W.H. Registration Number 0079005 (25–31)
ILD 069506160

(Hauler Name) | (Hauler Address)
S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVE (Address)
GRIFFITH (City) | IND (State) | 46319 (Zip)
91808902 (39–46) Site Number
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS (1) WASTE PHASE: LIQUIDS N.O.S. (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 SOLVENTS	FLAMMABLE

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000 (47–52) (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: 7-16-81 Pete Fauber Jr. (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) J Bradley (Authorized Signature) DATE: 07 / 16 / 81 (54–59)

(2) _____ (Authorized Signature) DATE: ___ / ___ / ___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 7 16 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 124 Tk T-63 7/16/81 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

001335

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

0248022
1 7

Authorization Number 997071
8 13

FEDERATED PAINT MFG INC. (Company Name) 1882 S. NORMAL Address
CHICAGO City ILL State 60616 Zip

ILD021293717

031600031 1 G
14 Generator Number 24

WASTE HAULER(S)

MR FRANK INC. Hauler Name 201 W 155ST S. HOLLAND Hauler Address
S.W.H. Registration Number 007200 5
25 31
ILD 069506160

Hauler Name Hauler Address
S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) 420 S. CALFAX AVE Address
GRIFFITH City IND State 46319 Zip

9180890 2
39 Site Number 46
IND 016360765

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS
WASTE PHASE: LIQUIDS N.O.S. (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: PAINT 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: 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: 8-5-81
Pete Faulds (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: 08 05 81
54 59

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 8/5/81
60 65

COMMENTS OR SPECIAL INSTRUCTIONS: To 124 x T-63 8/5/81 gpm

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001336

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0323525

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997071
ILD 021293717

FEDERATED PAINT MFG. INC. (Company Name) 1882 S. NORMAL Address
CHICAGO City ILL State 60616 Zip

03160000311 G
Generator Number

WASTE HAULER(S)

MR FRANK INC. Hauler Name 201 W 155 ST S. HOLLAND Hauler Address
S.W.H. Registration Number ILD 007900 5

Hauler Name ____ Hauler Address ____
S.W.H. Registration Number ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) 420 S. COLFAX AVE Address
GRIFFITH City IND State 46319 Zip
Site Number 91808902
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS
WASTE PHASE: LIQUIDS N.O.S. (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: PAINT 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: 003000
1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-25-81
(Authorized Signature) Michael Pavela #078

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 Bradley (Authorized Signature) DATE: 8/25/81

(2) ____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE 8/25/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 725K T-63 8/25/81 jpm

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001337

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0122810

WASTE GENERATOR

Authorization Number 997071
ILD021293717

FIDERATED PAINT MFG INC (Company Name) 1882 S. NORMAL (Address)
CHICAGO (City) ILL (State) 60616 (Zip)

0316000311 G (Generator Number)

WASTE HAULER(S)

(1) MR FRANK INC (Hauler Name) 201 W. 155ST S. HOLLAND (Hauler Address) S.W.H. Registration Number 007900
ILD 069506160

(2) _____ (Hauler Name) _____ (Hauler Address) S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) 420 S. COLFAX AVE (Address) 91808902 (Site Number)
GRIFFITH (City) IND (State) 46319 (Zip)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS WASTE PHASE: LIQUIDS N.O.S. (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: PAINT SOLVENTS HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9-15-81 Pete Faulds Sr. (Authorized Signature) F078

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 003000 (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) Jim Bradley (Authorized Signature) DATE: 09/15/81 (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:

Rumpca (Authorized Signature) DATE: 9/15/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 126R T-63 9/15/81 gsm

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

001338

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0122808

WASTE GENERATOR

Authorization Number 997071

FEDERATED PAINT MFG INC. (Company Name) 1882 S. NORMAL Address
CHICAGO City ILL State 60616 Zip
ILD021293717
0316000311 Generator Number

WASTE HAULER(S)

(1) MR FRANK INC. Hauler Name 201 W 155ST S. HOLLAND Hauler Address
S.W.H. Registration Number 0079001
ILD 069506160

(2) Hauler Name Hauler Address S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) 420 S. CALFAX AVE Address
GRIFFITH City IND State 46319 Zip
91808902 Site Number
IND 063606265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS
WASTE PHASE: LIQUIDS N.O.S. (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: PAINT SOLVENTS
HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
DATE: 10-15-81
Pete Faubel Jr. (Authorized Signature) KC

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 003000 (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) Jim Bradley (Authorized Signature) DATE: 10/15/81 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ (Authorized Signature) DATE: 10/15/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: 1 CO CO
TO 126E T-63 10/15/81 JFM

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

001339

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0122811

Authorization Number 997071

ILD021293717

0316000311 G

FEDERATED PAINT MFG. INC. (Company Name) 1882 S. NORMAL Address
CHICAGO City ILL State 60616 Zip
Generator Number

WASTE HAULER(S)

(1) MR FRANK INC Hauler Name 201 W 155 ST S. HOLLAND Hauler Address
S.W.H. Registration Number 0079022

ILD069506160

(2) Hauler Name Hauler Address
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) 420 S. COLFAX AVE Address
GRIFFITH City IND State 46319 Zip
91808902 Site Number

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS WASTE PHASE: LIQUIDS N.O.S. (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: PAINT SOLVENTS. HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-27-81 Pete Franke Sr (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 003000 (1 GALLONS / 2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE 10 27 81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[signature] (Authorized Signature) DATE: 10 27 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 126E T-63 10/27/81 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

001340

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0323534
1 7

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997071 (13)
ILD002193717

FLORATTO PAINT MFG INC (Company Name) | 1882 S. NORMAL (Address)
CHICAGO (City) | ILL (State) | 60616 (Zip)

0316000311 (14) G (24)
Generator Number

WASTE HAULER(S)

MR FRANK INC (Hauler Name) | 2010 W 55ST S. IDLAND (Hauler Address)
S.W.H. Registration Number 0079003 (25–31)
ILD 069506160

(Hauler Name) | (Hauler Address)
S.W.H. Registration Number (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVE (Address)
91808902 (39–46) Site Number
IND 016360265

(City) | (State) | (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS
WASTE PHASE: LIQUIDS N.O.S. (Liquid, Gascous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: PAINT 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: 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: 11-10 81 | Pete Faulds Sr. (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) _____ (Authorized Signature) DATE: 11 | 10 | 81 (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: 11 | 10 | 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

To 126K T-63 62MI 11/10/81

SITE COPY - PART 3

001341

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 14380

001342

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Faustel Inc
2. EPA IDENTIFICATION NO.: WID [illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 13801 W Silver Spring Rd
5. CITY, STATE, ZIP CODE: Butler Wi 53007
6. TELEPHONE NUMBER: (414)-781-9770

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
13-55 gal drums	715	Spent Paint + solvent	ORM-F	NA 1133	1. Solid 3. Mixture 2. Liquid [2]	D001	5746
		Hazardous waste			1. Solid 3. Mixture 2. Liquid [ ]		
		N.O.S.			1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: George Sarecki
16. NAME (Print): George Sarecki
17. DATE SHIPPED: M D Y 12/18/81

TRANSPORTER SECTION

18. COMPANY NAME: ABC Services Inc
19. EPA IDENTIFICATION NO.: WID [illegible]
20. P.O. BOX OR STREET ADDRESS: Stop 47 2nd Ave
21. CITY, STATE, ZIP CODE: Kenosha WI 53142
22. TELEPHONE NUMBER: (414)657-1021
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Kip Nelson
25. NAME (Print): K. P Nelson
26. Date Accepted: M 12 D 20 Y 81

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: Hammond Chemical Co.
33. EPA IDENTIFICATION NO.: IND [illegible]
34. P.O. BOX OR STREET ADDRESS: 430 So. Calhoun Ave.
35. CITY, STATE, ZIP CODE: Gary Ind. 46319
36. TELEPHONE NUMBER: (219)938-4377
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: Lisa Williams
39. NAME (Print)
40. Date Accepted: M 12 D 22 Y 81

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

On dock 12/24/81 GMW
To 204 R T-50 GMW 12/25/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0165814

WASTE GENERATOR

FEDERAL 702

ETHYL/ FEDERAL (Company Name) | 3600 W PRATT (Address)
CHICAGO (City) | ILL (State) | 60645 (Zip)

Authorization Number 992250

0316000374 Generator Number

WASTE HAULER(S)

(1) AMERICAN CHEMICAL (Hauler Name) | 426 S COLFAX AVE GRIFFITH IND (Hauler Address)
S.W.H. Registration Number 0024001

(2) STRONG TRUCKING (Hauler Name) | EASTWOOD (Hauler Address)
S.W.H. Registration Number ILT 0006468 10

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | SAME AS ABOVE (Address)
91808907 Site Number

(City) | (State) | (Zip)
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: USED ACETONE
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: SOLVENTS
HAZARD CLASS: FLAMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/17/81 | R H Brown (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 000495 (1 GALLON / 2 GU. YDS.) (Circle One)

METHOD OF SHIPMENT (Circle One): (9) 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: 02/27/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.

[signature] (Authorized Signature) DATE: 2/17/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 2/17/81 UNLOADED 2/19/81
PUMPED TO 109E 2/23/81 T-63 Jim Murphy

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001343

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0165815

WASTE GENERATOR

Authorization Number 99725Q

ETHYL/FEDERAL (Company Name) | 3600 W PRATT (Address)

CHILAGO (City) | ILL (State) | 60645 (Zip)

03160003 74 G (Generator Number)

WASTE HAULER(S)

(1) AMERICAN CHEMICAL C/O (Hauler Name) | 420 S COLFAX AVE GRIFFITH IND (Hauler Address)

IND 016360265 S.W.H. Registration Number 6024002

(2) STROUD TRUCKING (PESTWOOD, IL (Hauler Name / Hauler Address)

ILT 0006416110 S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | SAME AS ABOVE (Address)

918089002 Site Number

(City) | (State) | (Zip)

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: USED ACETONE

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: SOLVENTS WOOD | HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/30/81 | R H Brun (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 00285 (1 GALLONS / 2 CU YDS) (Circle One)

METHOD OF SHIPMENT (Circle One) 7 (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 Schuster (Authorized Signature) DATE: 04/30/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature) DATE: ___/___/___

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 4/30/81 TO 125E 5/5/81 T-6397

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

001344

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0165816

Authorization Number 9 8 9 7 2 5 0 3

ETHYL PRODUCTS COMPANY (Company Name) — 3600 W. PRATT AVE Address

0 3 1 6 0 0 0 3 7 4 G
Generator Number

CHICAGO City — ILLINOIS State — 60645 Zip

WASTE HAULER(S)

IND 016360265

(1) AMERICAN CHEMICAL Hauler Name — 420 S. COLFAX AVE. GRIFFITH IND Hauler Address — S.W.H. Registration Number 0 0 2 4 0 0 1

(2) STRAND TRUCKING Hauler Name — CRESTWOOD, ILLINOIS Hauler Address — I L T 000646810 S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMCIAL (Facility Name) — SAME AS ABOVE Address — 9 1 8 0 8 9 0 2 Site Number

City — State — Zip — IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: USED ACETONE

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: SOLVENTS

HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/11/81 — Sharon L Cruse (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 00066D — (1 GALLONS / 2 CU. YDS.) (Circle One)

METHOD OF SHIPMENT (Circle One) 12 (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) James Batten (Authorized Signature) — DATE: 8/14/81

(2) _____ (Authorized Signature) — DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

M. Cook (Authorized Signature) — DATE: 8/18/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 109E T-63 8/12/81 gnm

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

001345

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0165818

WASTE GENERATOR

Authorization Number 997250

ETHYL PRODUCTS COMPANY (Company Name) | 3600 W. PRATT AVE (Address)

CHICAGO (City) | ILLINOIS (State) | 60645 (Zip)

0316000374 G (Generator Number)

WASTE HAULER(S)

(1) AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX AVE. GRIFFITH IND. (Hauler Address) | S.W.H. Registration Number 0024002 ILT000646810

(2) STRAND TRUCKING (Hauler Name) | CRESTWOOD , ILLINOIS (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | SAME AS ABOVE (Address) | 918089002 (Site Number)

(City) | (State) | (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: USED ACETONE

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: SOLVENTS

HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/9/81 Steven L Cruse (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 00412 (1 GALLONS / 2 CU. YDS.) (Circle One)

METHOD OF SHIPMENT (Circle One) (8 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) James Ballay (Authorized Signature) DATE: 10/9/81

(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 D Burge (Authorized Signature) DATE 10/13/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED TRAILER SPOTTED 10/9/81 TO 1098 T-63 10/13/81

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001346

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0165819

WASTE GENERATOR

Authorization Number 997250

ETHYL PRODUCTS COMPANY (Company Name) | 3600 W. PRATT AVE. (Address)

CHICAGO (City) | ILLINOIS (State) | 60645 (Zip)

0 3 1 6 0 0 0 3 7 4 G (Generator Number)

WASTE HAULER(S)

(1) AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX AVE. GRIFFITH IN (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 2 ILT000646810

(2) STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILLINOIS (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | SAME AS ABOVE (Address)

9 1 8 0 8 9 0 2 (Site Number)

IND 016360265

(City) | (State) | (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: USED ACETONE

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: SOLVENTS

HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/9/81 — Sharon L. Cruse (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 000275 — (GALLONS) CU. YDS. (Circle One)

METHOD OF SHIPMENT (Circle One) 5 (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) Stan Strom (Authorized Signature) DATE: 11/9/81

(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 T. Burke (Authorized Signature) DATE: 11/5/81

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

A-1 dock GRM 11/9/81
To 109 K T-63 GRM 11/10/81

001347

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

02870 (1–7)

Authorization Number 993234 (8–13)

ETHICON INC (Company Name) | 5001 W. 67TH ST (Address)
CHICAGO (City) | ILL (State) | 60638 (Zip)

031600 0260 G (14–24 Generator Number)
ILD 010300531

WASTE HAULER(S)

AMERICAL CHEMICAL SERVICE (Hauler Name) | GRIFFITH, IND (Hauler Address)
S.W.H. Registration Number ~~0351~~ 0024/002 (25–31)

STRAND TRUCKING (Hauler Name) | ILT 0006 46810 CRESTWOOD, IL (Hauler Address)
S.W.H. Registration Number ILT 0006 46810 (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 4020 S. COLFAX (Address)
GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

91808902 (39–46 Site Number)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: POLISHING SLUDGE WASTE HEXANE

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: DRUMMED | HAZARD CLASS: COMBUSTIBLE

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.

19

QUANTITY OF WASTE DELIVERED: 01045 (47–52)

1 GALLONS (Circle One) CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9-1-81

(Authorized Signature)

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.

(Authorized Signature) DATE: 9/1/81 (54–59)

(Authorized Signature) DATE: / /

TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Signature) DATE: 9/2/81 (60–65)

TRAILER SPOTTED 9/2/81

T-50 9/8/81 gpm

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS OUTSIDE ILLINOIS: 800 / 424-8802

PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001348

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0043285 (1–7)

TELEPHONE 312-376-9150

Authorization Number 998470 (8–13)

ENTERPRISE COMPANIES (Company Name) 2841 S. ASHLAND AVE. (Address)

CHICAGO (City) ILLINOIS (State) 60608 (Zip)

0316000145 G (14–24) Generator Number

USEP ILD 047907555

WASTE HAULER(S)

(1) MR. FRANK INC. (Hauler Name) 201 W 155TH ST. SOUTH HOLLAND ILLINOIS 60473 (Hauler Address)

S.W.H. Registration Number 0079018 (25–31) USEPA ILD 069506160

(2) _____ (Hauler Name) _____ (Hauler Address)

S.W.H. Registration Number _____ (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) 440 N COLFAX (Address)

GRIFFITH (City) INDIANA (State) _____ (Zip)

91808902 (39–46) Site Number

USEPA IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: SOLVENT CLEANING WASTE FROM PAINT MFG. K078 UN1993

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: XYLENE & MINERAL SPIRITS

HAZARD CLASS: IGNITABLE & TOXIC 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: 2/16/81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004500 (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: 02/16/81 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.

_____ (Authorized Signature) DATE: 02/16/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To #1 STILL 2/16/81 T-63 Jim Murphy

IN ILLINOIS: 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

SITE COPY - PART 3

001349

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

0436966
1 7

Authorization Number 998470
8 13

THE ENTERPRISE COMPANIES (Company Name) 2841 S. ASHLAND AVE. (Address) 3123769150 (Phone Number) 0316000145 G (14 Generator Number 24)

CHICAGO (City) ILLINOIS (State) 60608 (Zip)

ILD047907555 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) 201 W. 155TH ST. (Hauler Address) SOUTH HOLLAND ILL 60473

S.W.H. Registration Number 0079018 (25 31)

3125963377 (Phone Number)

ILD069506160 (EPA Number)

(Hauler Name) (Hauler Address)

S.W.H. Registration Number (32 38)

(Phone Number) (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SER. (Facility Name) 440 N COLFAX (Address)

91808902 (39 Site Number 46)

GRIFFITH (City) INDIANA (State) (Zip) 3127683400 (Phone Number) IND016360265 (EPA Number)

(Alternate (Facility Name)) (Address) (39 Site Number 46)

(City) (State) (Zip) (Phone Number) (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: SOLVENT CLEANING WASTE FROM PAINT MFG. K078

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION: XYLENE MINERAL SPIRITS

HAZARD CLASS: IGNITABLE-TOXIC FLAMMABLE LIQUID

UN or NA Number: UN1993

EPA HW Number:

WEIGHT FOR D.O.T. USE: 37000 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004500 (47 52) (1 GALLONS, 2 CU. YDS (Circle One)) (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: 3-30-81

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) (Authorized Signature) DATE: 03/30/81 (54 59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 3/31/81 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO #1 STILL T-63 3/30/81 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

001350

TO BE COMPLETED BY WASTE GENERATOR

TELEPHONE 312 376 9150

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0043288

Authorization Number 998470

ENTERPRISE COMPANIES (Company Name) 2841 S. ASHLAND AVE Address
CHICAGO City ILLINOIS State 60608 Zip
0316000145 G Generator Number
USEPA ILD047907555

WASTE HAULER(S)

(1) MR FRANK INC. Hauler Name 201 W 155TH ST. Hauler Address SOUTH HOLLAND ILLINOIS 60473
S.W.H. Registration Number 0079019
USEPA ILD 069506160

(2) _____ Hauler Name _____ Hauler Address
S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) 440 N. COLFAX Address
GRIFFITH City INDIANA State _____ Zip
91808902 Site Number
USEPA IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: SOLVENT CLEANING WASTE FROM PAINT MFG. K078 UN 1993

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: XYLENE-MINERAL SPIRTS

HAZARD CLASS: IGNITABLE - TOXIC FLAMMABE

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: 3/16/81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 00450 (1) GALLONS (2) CU. YDS. (Circle One) (1)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 03/16/81

(2) _____ (Authorized Signature) DATE: ____/____/____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ (Authorized Signature) DATE: 3/16/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 124R 3/16/81 T-63 Jim Murphy

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001351

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

0434206

Authorization Number 998470

ENTERPRISE COMPANIES (Company Name) 2841 S. ASHLAND AVE. (Address) 3123769150 (Phone Number) 0316000145 (Generator Number)

CHICAGO (City) ILLINOIS (State) 60608 (Zip)

ILD047907555 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) 201 W 155TH ST. (Hauler Address) S.W.H. Registration Number 0079029

SOUTH HOLLAND ILL 60473 312-59-63317 (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. SER. (Facility Name) 440 N. COLFAX (Address) 918089002 (Site Number)

GRIFFITH (City) INDIANA (State) (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: SOLVENT CLEANING WASTE FROM PAINT MFG. K078 WASTE 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
XYLENE MINERAL SPIRITS	TOXIC IGNITABLE FLAMMABLE LIQUID	UN1993	K078

WEIGHT FOR D.O.T USE: 36000 (LBS / TONS (circle one))

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 4500 (1 GALLONS / 2 CU. YDS. (Circle One))

METHOD OF SHIPMENT (Circle One) (DRUMS____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 6/1/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) Tony Trad (Authorized Signature) DATE: 6 1 81

(Authorized Signature) DATE: / /

STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO ✓

I CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE 6/1/81

INSTRUCTIONS TO #1 STILL T-63 jpm 6/1/81

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-2675

OR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

SITE COPY - PART 3

001352

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0436976 (1–7)

Authorization Number 998470 (8–13)

TO BE COMPLETED BY WASTE GENERATOR

ENTERPRISE COMPANIES (Company Name) | 2841 S. ASHLAND AVE (Address) | 3123769150 (Phone Number) | 0316000145 C (14 Generator Number 24)

CHICAGO (City) | ILLINOIS (State) | 60608 (Zip) | ILD047907555 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC (Hauler Name) | 201 W 155TH ST. SOUTH HOLLAND ILL 60473 (Hauler Address) | S.W.H. Registration Number 0079009 (25–31)

3125963377 (Phone Number) | ILD069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SER. (Facility Name) | 440 N COLFAX (Address) | 91808902 (39 Site Number 46)

GRIFFITH (City) | INDIANA (State) | (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39 Site Number 46)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: SOLVENT CLEANING WASTE FROM PAINT MFG. K078 | WASTE 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
XYLENE MINERAL SPIRITS	TOXIC IGNITABLE FLAMMABLE LIQUID	UN1993	K078

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 / CU. YDS (Circle One) | 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) | DATE: 5-18-81

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) _____ (Authorized Signature) | DATE: 05/18/81 (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 WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) | DATE: 5/18/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO #2 STILL 5/18/81 T-63 gtm

IN ILLINOIS: 217 / 782-3637 | *24 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

001353

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

0434207 (1–7)

Authorization Number 998470 (8–13)

ENTERPRISE COMPANIES 2841 S ASHLAND AVE. (Company Name / Address) 3123769150 (Phone Number) 0316000145 G (14 Generator Number 24)

CHICAGO (City) ILLINOIS 60608 (State / Zip) ILD047907555 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) 201 W 155TH ST, SO. HOLLAND ILL 60473 (Hauler Address) S.W.H. Registration Number 0079019 (25–31)

3125963377 (Phone Number) ILD069506160 (EPA Number)

Hauler Name / Hauler Address / S.W.H. Registration Number (32–38)

Phone Number / EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERVICE (Facility Name) 440 N. COLFAX (Address) 91808902 (39 Site Number 46)

GRIFFITH (City) INDIANA (State) (Zip) 3127683400 (Phone Number) IND016360265 (EPA Number)

Alternate (Facility Name) / Address / Site Number (39–46)

City / State / Zip / Phone Number / EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: SOLVENT CLEANING WASTE FROM PAINT MFG. K078 WASTE 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
XYLENE MINERAL SPIRITS	~~FLAMMABLE LIQUID~~	UN1993	K078

WEIGHT FOR D.O.T. USE 36000 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004500 (47–52) 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 (Authorized Signature) DATE: 6/8/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) David Hufsmith (Authorized Signature) DATE: 06 08 81 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature) DATE 6/8/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO #2 STILL T-63 6/8/81 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

001354

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0434219

Authorization Number 99-8470

TO BE COMPLETED BY WASTE GENERATOR

THE ENTERPRISE COMPANIES (Company Name) | 2841 S. ASHLAND AVE. (Address) | 3123769150 (Phone Number) | 03160001456 (Generator Number)

CHICAGO (City) | ILLINOIS (State) | 60608 (Zip) | ILD047907555 (EPA Number)

WASTE HAULER(S)

MR FRANK INC (Hauler Name) | 201 W 155TH ST. (Hauler Address) | S. HOLLAND ILL 60473 | 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 CHEM SERVICE (Facility Name) | 440 N COLFAX (Address) | 91808902 (Site Number)

GRIFFITH (City) | INDIANA (State) | 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: SOLVENT CLEANING WASTE FROM PAINT MFG K078 | WASTE 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
XYLENE MINERAL SPIRITS	FLAMMABLE LIQUID	UN 1993	K078

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000 (47–52) GALLONS (Circle One) / CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) 26032

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH 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: 7/31/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE 07/31/81 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

_____ (Authorized Signature) DATE 7/31/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: T.O. 126R T-63 7/26/81 gpm.

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

001355

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

0434224 (1–7)

Authorization Number 998470 (8–13)

THE ENTERPRISE COMPANIES (Company Name) 2841 S. ASHLAND AVE. (Address) ____ (Phone Number) 0316000145 G (14 Generator Number 24)

____ (City) ____ (State) ____ (Zip) ILD047907555 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) 201 W 155th STREET (Hauler Address) S. HOLLAND ILL 60473 — 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 SERVICE (Facility Name) 4500 S COLFAX (Address) 91808902 (39–46 Site Number)

GRIFFITH (City) INDIANA (State) ____ (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: SOLVENT CLEANING WASTE FROM PAINT MFG. WASTE 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
XZLENE MINERAL SPIRITS	FLAMMABLE ~~POISON~~	UN1993	K078

WEIGHT FOR D O T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS OR GAL.

QUANTITY OF WASTE DELIVERED: 004500 (47–52) (1 GALLONS / 2 CU. YDS. Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE-WRITTEN INFORMATION: ____ (Authorized Signature) DATE: 8/13/81

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) ____ (Authorized Signature) DATE: 08 13 81 (54–59)

(2) ____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

____ (Authorized Signature) DATE 8 13 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125R T-63 8/13/81 gam

IN ILLINOIS: 217 / 782-3637 *24 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

001356

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

0539381 (1–7)

Authorization Number 998470 (8–13)

THE ENTERPRISE COMPANIES (Company Name) | 2841 S. ASHLAND AVE (Address) | 3123769150 (Phone Number) | 0316000145 G (14 Generator Number 24)

City | State | Zip | ILD047907555 EPA Number

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W 155 ST. (Hauler Address) | S.W.H. Registration Number 0079009 (25–31)

3125763377 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. SER. (Facility Name) | 440 N. COLFAX (Address) | 91808902 (39 Site Number 46)

GRIFFITH (City) | INDIANA (State) | Zip | 3127683400 Phone Number | IND016360265 EPA Number

Alternate (Facility Name) | Address | 39 Site Number 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: SOLVENT CLEANING WASTE FROM PAINT MFG. (14) | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: XYLENE MINERAL SPIRITS | HAZARD CLASS: FLAMMABLE | UN 1993 (UN or NA Number) | K078 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 (47–52) 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: 10/2/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Donald H Bills (Authorized Signature) DATE 10/02/81 (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

N. Dreyer (Authorized Signature) DATE 10/2/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

001357

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0539342 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 998470 (8–13)

THE ENTERPRISE COMPANIES (Company Name) | 284 S. ISHLAND AVE (Address) | 3125419000 (Phone Number) | 0316000145 G (14 Generator Number 24)

CHICAGO (City) | ILLINOIS (State) | 60608 (Zip) | ILD047907555 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC (Hauler Name) | 201 W 155 ST So HOLLAND ILLINOIS (Hauler Address) | S.W.H. Registration Number 0079025 (25–31)

3125963377 (Phone Number) | ILD069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SER. (Facility Name) | 440 N. COLFAX (Address) | 91808902 (39–46 Site Number)

GRIFFITH (City) | INDIANA (State) | 46360 (Zip) | 3127683400 (Phone Number) | IND000686265 (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: SOLVENT CLEANING WASTE FROM PAINT MFG | WASTE 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
XYLENE MINERAL SPIRITS	FLAMMABLE	UN1993	K078

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 (47–52) | 1 GALLONS (Circle One) / 2 CU. YDS. | 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 11/23/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 11/23/81 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

_____ (Authorized Signature) DATE: 11/23/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 / 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

To IA : IB T-63 EPA 11/23/81

001358

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

0539343 (1–7)

Authorization Number 998470 (8–13)

THE ENTERPRISE COMPANIES (Company Name) | 2841 S. ASHLAND AVE (Address) | 3125419000 (Phone Number) | 0316000145 G (14 Generator Number 24)

CHICAGO (City) | ILLINOIS (State) | 60608 (Zip) | ILD047907555 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) | 201 W 155 ST (Hauler Address) | S.W.H. Registration Number 0079009 (25–31)

SO HOLLAND ILLINOIS | 3125963377 (Phone Number) | ILD069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SER. (Facility Name) | 440 N COLFAX (Address) | 91808902 (39–46 Site Number)

GRIFFITH (City) | INDIANA (State) | Zip | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | 39–46 Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: SOLVENT CLEANING WASTE FROM PAINT MFG. | WASTE 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
XYLENE MINERAL SPIRITS	FLAMMABLE	UN1993	K078

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. (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 12/4/81

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) Tom Berry (Authorized Signature) DATE 12/04/81 (54–59)

(2) ____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature) DATE 12/4/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3 To 120 R T-63 6PM 12/4/81

001359

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0539344

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 998470

THE ENTERPRISE COMPANIES (Company Name) 2841 S. ASHLAND AVE. (Address) 3125419000 (Phone Number) 0316000145 (Generator Number)

CHICAGO (City) ILLINOIS (State) 60608 (Zip) ILD047907555 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) 201 W 155TH ST. (Hauler Address) S.W.H. Registration Number 0079025

SO HOLLAND ILLINOIS 3125963377 (Phone Number) ILD069506160 (EPA Number)

Hauler Name ____ Hauler Address ____ S.W.H. Registration Number ____

Phone Number ____ EPA Number ____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SER. (Facility Name) 440 N. COLFAX (Address) 91808902 (Site Number)

GRIFFITH (City) INDIANA (State) ____ (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: SOLVENT CLEANING WASTE FROM PAINT MANUFACTURING WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: XYLENE MINERAL SPIRITS HAZARD CLASS: FLAMMABLE UN1993 (UN or NA Number) K078 (EPA HW Number)

WEIGHT FOR D.O.T. USE 38,500 TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 205000 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 ____ (Authorized Signature) DATE 12/14/81

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: 12/14/81

(2) ____ (Authorized Signature) DATE: ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

____ (Authorized Signature) DATE ____

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS, 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3 To 120 R T-63 GRM 12/14/81

001360

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

0350354 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997194 (8–13)

ENAMELED STEEL SIL (Company Name) | 45 (& W) FIDDLER (Address)

CHICO (City) | TEX (State) | 66641 (Zip)

0316000343 G (14–24) Generator Number

WASTE HAULER(S)

ENAMELED STEEL (Hauler Name) | ABOVE (Hauler Address) | S.W.H. Registration Number 0378001 (25–31)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER CHEM SERVICE (Facility Name) | 430 S. COLFAX (Address) | 91808903 (39–46) Site Number

GRIFFITH (City) | IND. (State) | 46319 (Zip) | IN0001636065

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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: FLAMABLE LIQUID | 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: 1000 (47–52) | (1 GALLONS / 2 CU. YDS.) (Circle One) (53)

21

METHOD OF SHIPMENT (Circle One): (DRUMS) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/20/81 | Ed Amen (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: 5/21/81 (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:

Tim Callahan (Authorized Signature) DATE: 5/21/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 1435 T-63 5/21/81 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

001361

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

0350355 (1–7)

Authorization Number 997164 (8–13)

ENAMELED STEEL SIGN CO (Company Name) | 4168 W. ADDISON (Address)
CHGO. (City) | ILL. (State) | 60641 (Zip)
0316000343 (14–24) Generator Number

WASTE HAULER(S)

ENAMELED STEEL (Hauler Name) | ABOVE (Hauler Address) | S.W.H. Registration Number 0378001 (25–31)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERVICE (Facility Name) | 420 So. CULFAX (Address) | 91808902 (39–46) Site Number
GRIFFITH (City) | IND. (State) | 46319 (Zip) | IND 016340765

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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: FLAMABLE LIQUID | 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: 550 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) 11 DRUMS | TANK TRUCK | OPEN TRUCK | OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/12/81 | (Authorized Signature) | F005

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) | DATE: 11/12/81 (54–59)

(2) (Authorized Signature) | DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) | DATE: 11/12/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

TO 125 R T-63 GRM 11/12/81

SITE COPY - PART 3

001362

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

0459228 (1–7)

Authorization Number 992395 (8–13)

ELSTON Paint & Supply Co. (Company Name) | 4181 N. ELSTON Address | 463-3320 Phone Number | 0316000814 (14–24) Generator Number

CHICAGO City | ILLINOIS State | 60618 Zip | 918089002 EPA Number

WASTE HAULER(S)

AMERICAN CHEMICAL Hauler Name | 420 S. COLFAX AVE BOX 190 Hauler Address | S.W.H. Registration Number 0024001 (25–31)

Strand Trucking | 3127683400 Phone Number | ILT0000646810 EPA Number

13672 KENTON Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

3153855440 Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVE Address | 918089002 (39–46) Site Number

GRIFFITH City | INDIANA State | 46319 Zip | 3127683400 Phone Number | 0316000814 EPA Number

Alternate (Facility Name) | Address | IND016360826 (39–46) Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: | HAZARD CLASS: FLAMMABLE | UN or NA Number K073 | 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: 000275 (47–52) (1) GALLONS (2) CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 5 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN.

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Richard M. Brown (Authorized Signature) DATE: 7-9-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Jim Batt (Authorized Signature) DATE: 7/9/81 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO /

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael O'Brien (Authorized Signature) DATE: 7/15/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 126R T-63 1/16/81 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

001363

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

0459230 (1–7)

Authorization Number 992395 (8–13)

ELSTON PAINT (Company Name) | 4181 N. ELSTON (Address) | 3124633320 (Phone Number) | 0316000814 (14–24) Generator Number

CHICAGO (City) | ILL (State) | 60618 (Zip) | EPA Number

WASTE HAULER(S)

AMERICAN CHEMICAL (Hauler Name) | GRIFFITH, IND. (Hauler Address) | S.W.H. Registration Number 0024002 (25–31)

Phone Number | EPA Number

STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILL. (Hauler Address) | S.W.H. Registration Number 0311 (32–38)

385-8440 (Phone Number) | ILT 0006468 10 EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX BOX 190 (Address) | 91808902 (39–46) Site Number

GRIFFITH (City) | IND. (State) | 46319 (Zip) | Phone Number | IND016360265 EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: LACQUER THINNER FLAMMABLE | HAZARD CLASS: | UN or NA Number | 1993 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: 000110 (47–52) (1) GALLONS (2) CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 2 Number) TANK TRUCK OPEN TRUCK (OTHER (Specify) VAN)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Philip Berg (Authorized Signature) DATE: 9-28-81

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) James Ratt (Authorized Signature) DATE: 9/28/81 (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

Michael F. Burge (Authorized Signature) DATE: 9/29/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 126K T-63 9/29/81 JMM

IN ILLINOIS: 217 / 782-3637 **24 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

001364

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

0459229 (1–7)

Authorization Number ____ (8–13)

ELSTON PAINT (Company Name) | 4181 N. ELSTON (Address) | 3124633320 (Phone Number) | 0316000814 (14–24 Generator Number) G

CHICAGO (City) | ILL (State) | 60618 (Zip) | EPA Number

WASTE HAULER(S)

STRAND Trucking / AMERICAN CHEM (Hauler Name) | 420 S COLFAX BOX 190 (Hauler Address) | S.W.H. Registration Number 0024001 (29–31)

3127843400 (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 (Facility Name) | 420 S COLFAX BO 190 (Address) | 91808902 (39–46 Site Number)

GRIFFITH (City) | IND (State) | 46319 (Zip) | 3127843400 (Phone Number) | INA0163607/65 (EPA Number)

Alternate (Facility Name) | Address | (39–46 Site Number)

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: | HAZARD CLASS: | UN or NA Number | EPA HW Number

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: 000100 (52–57) | 1 GALLONS (Circle One) / 2 CU. YDS. | 1 (63)

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 Martin Bogart (Authorized Signature) DATE: 12-3-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 12/03/81 (52–59)

(2) ____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

Michael Burns (Authorized Signature) DATE: 12/3/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 12/3/81 GRM
To 126R T63 GRM 12/8/81

001365

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 29808

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Elkhorn Webpress Inc.
2. EPA IDENTIFICATION NO.: WID063517890
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 550 E. Centralia
5. CITY, STATE, ZIP CODE: Elkhorn, Wisconsin 53121
6. TELEPHONE NUMBER: (414)-723-4018

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
2D Steel Drums	1,155	Waste Flammable Liquid, NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	D001	9,450
					1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Ralph Peters Jr.
16. NAME (Print): Ralph Peters, Jr.
17. DATE SHIPPED M D Y: 11 13 81

TRANSPORTER SECTION

18. COMPANY NAME: ABC Services
19. EPA IDENTIFICATION NO.: WID076159839
20. P.O. BOX OR STREET ADDRESS: 5700 49th Street
21. CITY, STATE, ZIP CODE: Kenosha, Wisconsin 53142
22. TELEPHONE NUMBER: (414) 657-6222
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Kip Nelson
25. NAME (Print): Kip Nelson
26. Date Accepted M 11 D 13 Y 81

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services, Inc.
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax Avenue
35. CITY, STATE, ZIP CODE: Griffith, Indiana
36. TELEPHONE NUMBER: 219)924-4370
37. COMMENTS:
Unloaded at dock 11/13/81 GKM
To 211 K T-50 GKM 11/18/81

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: Frank James Price
39. NAME (Print): FRANK JAMES PRICE
40. Date Accepted M 11 D 18 Y 81

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

001366

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER)

MI 0090701

001367

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
ELECTRO-VOICE Inc.	Mr. FRANK INC.	AMERICAN CHEMICAL SERVICE, INC.
Site Address	**Transporters Address**	**Facility Address**
600 Cecil St. P.O. Box 186 Buchanan, MI, 49107 - 0186	201 West 155 th, St. South Holland, IL 60473	P.O. Box 190 RXR. Griffith, IN, 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 695 - 6831	312) 596-3377	(312) 768 - 3400
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MI D 0 0 5 0 6 8 1 4 3	I L D 0 6 9 5 0 6 1 6 0	I N D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Methyl - ethyl - ketone	Flamable Liquid	UN 1193	0 7	1	CT		X			2 5 0 0	gal	F 0 0 5
2.													
3.													
4.													
5.													
6.													

COMMENTS — Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: ① D L Stanfield

Date Shipped MO. DAY YEAR: 0 9 3 0 8 1

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 0 0 7 9 - 0 2 7

Subsequent Transporter Vehicle I.D. No's

Transporter Signature: ② Ronald Bridgewater

Subsequent transporter(s) signature(s) ③

Date(s) Received: 0 9 3 0 8 1

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: ④ [signature]

Facility Site EPA I.D. Number: IND 0 1 6 3 6 0 2 6 5

☑ Accepted ☐ Rejected

Date Received: 9 3 0 8 1

Describe any significant discrepancies between manifest and shipment.

TO 125 T-63 9/30/81 jgm.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0090702

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
ELECTRO-VOICE, INC.	MR. FRANK INC.	AMERICAN CHEMICAL SERVICE, INC.
Site Address	**Transporters Address**	**Facility Address**
600 CECIL ST., P.O. BOX 186 BUCHANAN, MI 49107-0186	202 WEST 155th ST. SOUTH HOLLAND, IL 60473	P.O. BOX 190 GRIFFITH, IN 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 695-6831	(312) 596-3377	(312) 768-3400
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
M I D 0 0 5 0 6 8 1 4 3	I L D 0 6 9 5 0 6 1 6 0	I N D 0 0 5 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Trichloroethylene	ORM-A	UN 1710	09	38	DR		X			002090	GAL.	0 0 5 R
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① [signature] Date Shipped MO. DAY YEAR: 12 09 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 907901 5 — Transporter Signature ② [signature] — Date(s) Received: 12 09 81

Subsequent Transporter Vehicle I.D. No's — Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ [signature] ☑ Accepted ☐ Rejected — Facility Site EPA I.D. Number: I N D 0 0 5 3 6 0 2 6 5 — Date Received: 12 09 81

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY Unload at dock 12/9/81 6RM
To 122 R T-63 6RM 12/11/81

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

0496622 (1–7)

Authorization Number 992607 (8–13)

Ekco Products Inc.	777 Wheeling Rd.	312-459-1500	0314970015 (14) G (24)
(Company Name)	Address	Phone Number	Generator Number
Wheeling	IL	60090	ILD005184296
City	State	Zip	EPA Number

WASTE HAULER(S)

Mr. Franks	20160 155ST South Holland	S.W.H. Registration Number 0079/027 (25–31)
Hauler Name	Hauler Address	
	3125963377 Phone Number	ILD069506160 EPA Number
Hauler Name	Hauler Address	S.W.H. Registration Number (32–38)
	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service	P.O. Box 190	91808902 (39–46)
(Facility Name)	420 address S. Colfax Ave.	Site Number
Griffith	Indiana 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: Organic Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION:	HAZARD CLASS:	
Waste Solvents Flammable	1993 (UN or NA Number)	F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000 (47–52) (1) GALLONS (2) CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION C. A. Bain (Authorized Signature) DATE: 8-13-81

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) Ronald Bindas (Authorized Signature) DATE: 8/13/81 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

_____ (Authorized Signature) DATE: 8/13/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 124 R T-63 8/13/81 gmm

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

001369

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

0496626 (1–7)

Authorization Number 992607 (8–13)

Ekco Products Inc.	777 Wheeling Rd	312-459-1500	0314970015 (14 G 24)
(Company Name)	Address	Phone Number	Generator Number
Wheeling	ILL 60090		ILD005184296
City	State Zip		EPA Number

WASTE HAULER(S)

Mr. Franks	201 W. 155th St.		S.W.H. Registration Number 0079 005 (25–31)
Hauler Name	Hauler Address		
	South Holland, IL	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 Chemical Service	P.O. Box 190		91808902 (39–46)
(Facility Name)	420 Street S. Colfax Ave		Site Number
Griffith	Indiana 46319	3127683400	IND016360265
City	State Zip	Phone Number	EPA Number
Alternate (Facility Name)	Address		39 Site Number 46
City	State Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic 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:	1993 (UN or NA Number)	F005 (EPA HW Number)
Waste Solvents	Flammable		

WEIGHT FOR D.O.T. USE _____ (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000 (47–52) (1 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 _____ (Authorized Signature) DATE: 8-18-81

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) Jim Bradley (Authorized Signature) DATE: 8/18/81 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

_____ (Authorized Signature) DATE: 8/18/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 12/R T-63 8/18/81 gm

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

001370

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0496623 (1–7)

Authorization Number 992607 (8–13)

TO BE COMPLETED BY WASTE GENERATOR

Ekco Products Inc.	777 Wheeling Rd	312-459-1500	0314970015 (14–24)
(Company Name)	Address	Phone Number	Generator Number

Wheeling	ILL	60090	ILD005184296
City	State	Zip	EPA Number

WASTE HAULER(S)

AMERICAN CHEM ~~Mr. Franks~~	GRIFFITH INDIANA	0024001 ~~0079~~ (25–31)
Hauler Name	Hauler Address	S.W.H. Registration Number

		~~ILD069506160~~
	Phone Number	EPA Number

STRAND TRUCKING	CREST WOOD ILL	ILT0006468R (32–38)
Hauler Name	Hauler Address	S.W.H. Registration Number

385-8440	
Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service	P.O. Box 190	91808902 (39–46)
(Facility Name)	420 ~~St~~ Colfax Ave	Site Number

Griffith	Indiana	46319	312-768-3400	IND016360265
City	State	Zip	Phone Number	EPA Number

		(39–46)
Alternate (Facility Name)	Address	Site Number

City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Spent Trichlorethane WASTE 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:	2831 (UN or NA Number)	F001 (EPA HW Number)
Waste Solvent ~~XXXXXX~~	Toxic		

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: 002400 (47–52) (GALLONS) (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS) 48 Number TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 8-21-81

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) [signature] (Authorized Signature) DATE: 8/21/81 (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: 8/21/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 8/21/81.
TO DOCK T-63 9/1/81 gem.

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

001371

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

0496627 (1–7)

Authorization Number 992607 (8–13)

Ekco Products Inc.	777 Wheeling Rd	312-459-1500	0314970015 (14–24) G
(Company Name)	Address	Phone Number	Generator Number
Wheeling	ILL	60090	ILD005184296
City	State	Zip	EPA Number

WASTE HAULER(S)

Mr. Franks	201 W. 155th St.		S.W.H. Registration Number 0079 001 (25–31)
Hauler Name	Hauler Address		
	South Holland, IL	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 Chemical Service	P.O. Box 190		91808902 (39–46)
(Facility Name)	Address		Site Number
Griffith	420 S. Colfax Ave Indiana 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: Organic Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	1993 (UN or NA Number)	F005 (EPA HW Number)
Waste Solvents	Flammable		

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000 (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: 10-14-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 10/14/81 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 10/14/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 126R T-63 10/14/81 JPM

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

001372

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0344963

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 998170
ILD.0050958 23

ECONOMY FOLDING BOX (Company Name) | 2601 S. LASALLE ST. (Address)
CHICAGO (City) | IL (State) | 60616 (Zip)
02160005 12 G (Generator Number)

WASTE HAULER(S)

LANGREBE (Hauler Name) | 3900 S. SHIELDS AVE. CHIC. IL. 60616 (Hauler Address) | S.W.H. Registration Number ILL.2920

Hauler Name | Hauler Address | S.W.H. Registration Number 009824542

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. (Facility Name) | 420 S. COLFAX AVE. (Address) | 918088402 (Site Number)
GRIFFITH (City) | IND. (State) | 46319 (Zip) | IND.016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

F003

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 5000 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 10 QUANTITY OF WASTE DELIVERED: 000550 (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: 6-12-81 (James C. Law) (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: 6/12/81 (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: 6/15/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 6/15/81
PUMPED TO 20YR T-50 6/18/81 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

001373

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

0514993

Authorization Number 993640

CLEMCO INC (Company Name) | 999 LEE ST (Address) | 3125935050 (Phone Number) | 0314400081 G (Generator Number)

ELK GROVE (City) | ILL (State) | 60007 (Zip) | ILD043362441 (EPA Number)

WASTE HAULER(S)

LANDGREBE MOTOR TRAN. (Hauler Name) | CHGO. ILL. (Hauler Address) | S.W.H. Registration Number

3128423121 (Phone Number) | INDD098428224 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. SERV. (Facility Name) | 420 S. COLFAX (Address) | 9180890 02 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | 2199244370 (Phone Number) | INDD163602651 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE LIQ. NOS - FLAM.

HAZARD CLASS: UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE: 9600 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 1200 (47–52) (1) GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One): (DRUMS) 24 (Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION William Lankadt (Authorized Signature) DATE: 8-25-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) R. Gilliland (24) (Authorized Signature) DATE: 8/26/81 (58–59)

(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: 8/25/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 8/25/81

TO 112X T-63 8/28/81 gpm

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

SITE COPY - PART 3

001374

.TED BY
.RATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0144470
1 7

Authorization Number 997127
8 13

DUO-FAST CORPORATION (Company Name) | 3702 RIVER ROAD (Address)
FRANKLIN PARK, (City) | ILLINOIS (State) | 60131 (Zip)

0310960026 G
14 24 Generator Number
ILD-005119441

WASTE HAULER(S)

(1) AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 S. COLFAX AVENUE GRIFFITH, INDIANA 46319 (Hauler Address)
IND 016360265
S.W.H. Registration Number 0024001
25 31

(2) STRAND TRUCKING (Hauler Name) | GRIFFITH INDIANA (Hauler Address)
ILT-0006468 10
S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVENUE (Address)
9180890 2
39 46 Site Number

GRIFFITH, (City) | INDIANA (State) | 46319 (Zip)
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT - SOLVENTS

WASTE PHASE: #3 (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: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-28-81 Steven M Lim (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 00400 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) Thomas Paul Hoover Jr. (Authorized Signature) DATE: 04 29 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:

W. Steve Hughes (Authorized Signature) DATE: 4 30 81 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 4/30/81
PUMPED 51 DR TO WEST 5/9/81 T-50 gpm PUMPED 29 TO #1 STILL 5/12/81 T-63 gpm

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001375

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

ILLG0514994

Authorization Number 993640

CLEMCO INC. (Company Name) | 999 LEE ST. (Address) | 312 593 5050 (Phone Number) | 0314400081 G (Generator Number)

(City) | (State) | (Zip) | ILD043362441 (EPA Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) | CHGO. ILL. (Hauler Address) | S.W.H. Registration Number ICC

3128423121 (Phone Number) | ILD009842824 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. SERV. (Facility Name) | 420 S. COLFAX (Address) | 918089 02 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE LIQ. NOS - FLAM. HAZARD CLASS: UN1993 (UN or NA Number) EPA HW Number: F005

WEIGHT FOR D.O.T. USE 4,900 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 600 (1) GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS) 12 (Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION William Lenhardt (Authorized Signature) DATE: 10-13-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 10/13/81

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

_____ (Authorized Signature) DATE: 10/14/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED 10/14/81
TO 112 TK - T63 - EPM 11/10/81

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

001376

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

0514995 (1 7)

Authorization Number 993640 (8 13)

EAGLE CONVERTING (Company Name) | 999 LEE ST (Address) | 3125935050 (Phone Number) | 0314400081 G (14 Generator Number 24)

ELK GROVE (City) | ILL. (State) | 60007 (Zip) | ILD043362441 (EPA Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) | CHGO. ILL. (Hauler Address) | S.W.H. Registration Number ICC2980 (25 31)

3128423121 (Phone Number) | IND098428824 (EPA Number)

Landgrebe (Hauler Name) | P.O. Box 32 Valparaiso, Ind (Hauler Address) | S.W.H. Registration Number (32 38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. SERV. (Facility Name) | 420 S. COLFAY (Address) | 9180890 2 (39 Site Number 46)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | 2199424370 (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39 Site Number 46)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE LIQ. NOS. - FLAM | HAZARD CLASS: UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 4,400 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 550 (47 52) (1) GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 11 Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION William Lenhardt (Authorized Signature) | DATE 12-2-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Ford - Ind - 12-2-81 (Authorized Signature) | DATE 12/21/81 (54 59)

(2) _____ (Authorized Signature) | DATE / / (54 59)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

Frank Irvin Price (Authorized Signature) | DATE 12/3/81 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 12/3/81 GRM

To 204K T-50 GRM 12/5/81

001377

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0278702

Authorization Number 997127

DUO-FAST CORPORATION (Company Name) | 3702 RIVER ROAD (Address)
FRANKLIN PARK, (City) | ILLINOIS (State) | 60131 (Zip)

ILD005119441
0 3 1 0 9 6 0 0 2 6 G
Generator Number

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 S. COLFAX AVENUE GRIFFITH, INDIANA 46319 (Hauler Address)
S.W.H. Registration Number 0 0 2 4 0 0 1

STRANT TRUCKING (Hauler Name) | GRIFFITH INDIANA (Hauler Address)
ILT0006468 10
S.W.H. Registration Number 0 0 2 4 0 0 2

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVENUE (Address)
9 1 8 0 8 9 0 2 Site Number

GRIFFITH, (City) | INDIANA (State) | 46319 (Zip)
INDI 163602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT - SOLVENTS
WASTE PHASE: #3 (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:
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: 80 DRS
(1) GALLONS (Circle One) (2) CU. YDS. 4400

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-16-81 (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: __/__/__
(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 4/20/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 4/20/81 - PUMPED 41 TO 20#Σ 4/20 T-50 10 DRS TO 20#Σ T-50 4/21. PUMPED 29 TO #1 STILL 5/12/81 FL3 JJM

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001378

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

0333655

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 71 27

DUO-FAST CORPORATION (Company Name) | 3702 RIVER ROAD (Address)

0 3 1 0 9 6 0 0 2 6 G
Generator Number

FRANKLIN PARK, (City) | ILLINOIS (State) | 60131 (Zip)

ILD 005119441

WASTE HAULER(S)

IND 016360265 0311003

AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 S. COLFAX AVENUE (Hauler Address)

S.W.H. Registration Number 0 0 2 4 0 0 1

GRIFFITH, INDIANA 46319

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)

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-SOLVENTS

WASTE PHASE: #3 (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: ~~FLAMMABLE~~ SPENT SOLVENTS

HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE 39000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004290

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-18-81

(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: 8/18/81

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 8/18/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 8/18/81
TO 20YR T-60 9/23/81 gpm

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001379

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0333654

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 9 9 71 27

DUO-FAST CORPORATION (Company Name) 3702 RIVER ROAD (Address)

FRANKLIN PARK, (City) ILLINOIS (State) 60131 (Zip)

0 3 1 0 9 6 0 0 2 6 G — Generator Number

ILD 005119441

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE (Hauler Name) 420 S. COLFAX AVENUE (Hauler Address)

IND 016360265 — S.W.H. Registration Number 0 0 2 4 0 0 1

GRIFFITH, INDIANA 46319

(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)

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 - SOLVENTS

WASTE PHASE: # 3 (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:

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. 80

QUANTITY OF WASTE DELIVERED: 004400

(1) GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-13-81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) James Battle (Authorized Signature) DATE: 8/13/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael O Day (Authorized Signature) DATE: 8/13/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 8/13/81

42 TO 204 X 8/14/81 T-50 gpm 38 TO 204 X 9/17/81 T-50 gpm

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001380

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

0357585

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997142

DReeblan PAINT (Company Name) | 3729 W. 49TH ST Address

CHICAGO, City | IL State | 60632 Zip

0316000031 Generator Number

TLD005 097241

WASTE HAULER(S)

MR FRANK Hauler Name | 201 W 155TH ST Hauler Address

S.W.H. Registration Number 0079005

ILD069506160

Hauler Name | Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERV. (Facility Name) | 420 S. COLFAX Address

91808902 Site Number

GRIFFITH City | IND State | 46319 Zip

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: PAINT 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: 009000

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: 5/13/81

Mark Tolnicka (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: 5 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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 5 15 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT T-50 · 5/13/81 gjm

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001381

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

0333665

Authorization Number 997142

DREEBLAN PAINT (Company Name) | 3729 W 49TH ST (Address)
CHICAGO (City) | IL (State) | 60632 (Zip)
031600003 1 G (Generator Number)
ILD005097241

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W 155TH ST (Hauler Address)
S.W.H. Registration Number 0079005
ILD069506160

(Hauler Name) | (Hauler Address)
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERV (Facility Name) | 420 S. COLFAX (Address)
GRIFFITH (City) | IND. (State) | 46319 (Zip)
91808902 (Site Number)
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS F005
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: PAINT 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: 003000
1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/8/81 Mark Pollutz (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: 4/8/81

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 4/8/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT R T-50 4/8/81 9pm

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001382

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

0357596

Authorization Number 997142

DREEBLAN PAINT (Company Name) | 3729 W. 49TH ST. (Address)
CHICAGO (City) | ILL (State) | 60632 (Zip)
0316000031 G (Generator Number)
ILD005097241

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W 155TH ST (Hauler Address)
S.W.H. Registration Number 0079004
ILD069506160

Hauler Name | Hauler Address
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVE (Address)
9180902
~~031001~~ (Site Number)
GRIFFITH (City) | IN (State) | 46319 (Zip)
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENT FLAMMABLE
HAZARD CLASS: 3
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
1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-18-81 Duke Alekson (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: 6/18/81
(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE? YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 6/19/81

COMMENTS OR SPECIAL INSTRUCTIONS: 1000 GALS TO 204X T-50 6/18/81
4000 GALS TO PISTIL T-63 6/18/81 JTM.

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001383

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: NO 12

TO:		FROM:	
T/S/D FACILITY	AMERICAN CHEMICAL SERVICE	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 016360265	E.P.A. ID Code No.	IND 005480710
Address	P.O. Box 190	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	(312) 768-3400	Phone	219-267-5238

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: FLAMMABLE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☒ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-5238

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature: [signature] Date: 1/5/81

TRANSPORTER #1: Mr. Frank Inc. E.P.A. ID No.: ILD 069506160
Address: 201 W. 155th Street
City: South Holland State: IL Zip: 60473 Phone: (312) 596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature: [signature] Date: 1-5-81

TRANSPORTER #2: / E.P.A. ID No.:
Address:
City: State: Zip: Phone:

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature: Date:

TREATMENT/STORAGE/DISPOSAL FACILITY: TO WEST AGIT R 1/5/81 T-50

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature: [signature] Date: 1-5-81

T/S/D F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

001384

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: NE 13

TO: T/S/D FACILITY: AMERICAN CHEMICAL SERVICE	FROM: Generator: P.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 0516360265	E.P.A. ID Code No.: IND 005460716
Address: P.O. BOX 190	Address: OLD ROUTE 30 WEST
Destination: Griffith, IN 45319	Origin: WARSAW, INDIANA 46580
Phone: 312-768-3400	Phone: 219-267-5258

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
4,000 Gals.	Waste - Ink - Bulk	Flammable Liquid	UN 1210	F005		Flammable Liquid
5000						

PLACARDS REQUIRED: FLAMMABLE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per_____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☒ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

HAZARDOUS WASTE

HAZARDOUS WASTE

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: P.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005460716
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-5258

National Response Center: 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature: [signature] Date: 1/9/81

TRANSPORTER #1: Mr. Frank Inc. E.P.A. ID No.: ILD069506160
Address: 201 West 155th Street
City: South Holland State: IL Zip: 60473 Phone: 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature: [signature] Date: 1-9-81

TRANSPORTER #2: _____ E.P.A. ID No.: _____
Address: _____
City: _____ State: _____ Zip: _____ Phone: _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature: _____ Date: _____

TREATMENT/STORAGE/DISPOSAL FACILITY: Pumped to East Acre 1/9/81 T-50

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature: [signature] Date: 1/9/81

T/S/D F COPY

001385

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: [illegible] 19

TO: T/S/D FACILITY: American Chemical Service Inc.	FROM: Generator: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 0616360265	E.P.A. ID Code No.: IND 005460710
Address: p.o. box 190	Address: OLD ROUTE 30 WEST
Destination: Griffith, IN 46319	Origin: WARSAW, INDIANA 46580
Phone: 312-768-3400	Phone: 219-267-3238

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gal.s	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: FLAMMABLE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES: PREPAID [X] COLLECT [ ]

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: ~~R.R. DONNELLEY & SONS CO.~~
E.P.A. ID Code No.: ~~IND 005460710~~
Address: ~~OLD ROUTE 30 WEST~~
Destination: ~~WARSAW, INDIANA 46580~~

EMERGENCY RESPONSE INFORMATION

CONTACT Name: ~~ISAK FAULKNER~~
Phone: ~~219-267-3238~~

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1: Mr. Frank Inc. E.P.A. ID No.: ILD069506160
Address: 201 West 155th St.
City: South Holland State: IL Zip: 60473 Phone: 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2: _____ E.P.A. ID No.: _____
Address: _____
City: _____ State: _____ Zip: _____ Phone: _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY: To WEST AC.IT 3/16/81 T-50 Jim Mugly

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature X _____ Date 3-16-81

T/S/D F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

001386

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 25

TO: T/S/D FACILITY	American Chemical Service Inc.	FROM: Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0616360265	E.P.A. ID Code No.	IND 005480710 (IND005480710)
Address	P.O. Box 190	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN	Origin	WARSAW, INDIANA 46580
Phone	312-768-3400	Phone	219-267-3288

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
4,500 Gals.	Waste Ink - Bulk	Flammable Liquids	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable Liquid

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

FREIGHT CHARGES: PREPAID ☑ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-3288

National Response Center: 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date 5-26-81

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date 5/26/81

TREATMENT/STORAGE/DISPOSAL FACILITY: TO EAST ACIT 5/26/81 T-50 9 pm

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 5/26/81

T/S/D F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

001387

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 23

TO: T/S/D FACILITY	AMERICAN CHEMICAL SERVICE INC.	FROM: Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0616360265	E.P.A. ID Code No.	IND 005480710
Address	P.O. BOX 190	Address	OLD ROUTE 30 WEST
Destination	GRIFFITH, INDIANA 46319	Origin	WARSAW, INDIANA 46580
Phone	312-768-3400	Phone	219-267-9293

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable XXX Liquid	UN 1210	F005		Flammable Liquid

PLACARDS REQUIRED: FLAMMABLE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-9293

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY TO EAST 9/17 4/30/81 T-50 9 7m

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date _____

T/S/D F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

001388

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

28

TO: T/S/D FACILITY	American Chemical Service Inc.	FROM: Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0616360255	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-5285

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz.-Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED Flammable

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

$_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES PREPAID ☒ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No. IND 005480710
Address OLD ROUTE 30 WEST
Destination WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name MAX FAULKNER
Phone 219-267-5233

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Municipal Equipment Services Co. E.P.A. ID No. IND 078917851
Address P.O. Box 427
City Hanatah State IN Zip 46390 Phone 219-733-2551

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature H Dean Pratt Date 6-4-91

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY To EAST ACRES T-50 6/5/91 JPM

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 6/5/91

HAZARDOUS WASTE

HAZARDOUS WASTE

T/S/D F COPY

001389

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 30

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0616360265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Ave	Address	OLD ROUTE 30 WEST
Destination	Griffith, Ind 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-5288

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

HAZARDOUS WASTE

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-5233

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date _____

To West Acit. T-50 6/25/81 gjm

T/S/D F COPY

HAZARDOUS WASTE

001390

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: [illegible] 29

TO:		FROM:	
T/S/D FACILITY	American Chemical Service Ind.	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 067350265	E.P.A. ID Code No.	IND 005460710
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-5253

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

$_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

FREIGHT CHARGES: PREPAID ☑ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: ~~R.R. DONNELLEY & SONS CO.~~
E.P.A. ID Code No.: ~~IND 005460710~~
Address: ~~OLD ROUTE 30 WEST~~
Destination: ~~WARSAW, INDIANA 46580~~

EMERGENCY RESPONSE INFORMATION

CONTACT Name: ~~BILL PAULIGEN~~
Phone: ~~219-267-5253~~

National Response Center: 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY TOWEST AGIT T-50 6/23/81 jm

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 6/23/81

T/S/D F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

001391

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 34

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0616360265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-3253

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5-000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☒ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-3253

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506150
Address 201 W. 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY — TO EQ ACT T-50 7/27/81 JM

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 7/27/81

T/S/D F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

FORM 8700-22 (6-80) PREV. 10-80

001392

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: [illegible] 33

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0616360265	E.P.A. ID Code No.	IND 006480710
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-5203

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN 1210	F005		Flammable Liquid

PLACARDS REQUIRED F Flammable

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

$_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

FREIGHT CHARGES PREPAID ☑ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No. IND 006480710
Address OLD ROUTE 30 WEST
Destination WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name DICK FAULKNER
Phone 219-267-5203

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature R. T. Wick Date 7-4-81

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069505160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date 7-4-81

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY To WEST AGIT T-50 7/4/81 9am.

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 7/4/81

T/S/D F COPY

EPA 8700-22 (1-80) FORM 1 REV 10-80

HAZARDOUS WASTE

HAZARDOUS WASTE

001393

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: [illegible] 40

TO: T/S/D FACILITY	American Chemical Service	FROM: Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0616360265	E.P.A. ID Code No.	IND 006480719
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-5238

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

FREIGHT CHARGES: PREPAID ☒ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 006480719
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-5238

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature: [signature] Date: 9-17-81

TRANSPORTER #1: Mr. Frank Inc E.P.A. ID No.: ILD 069506160
Address: 201 West 155th St.
City: South Holland State: IL Zip: 60473 Phone: 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature: Michael D Mueller Date: 9-17-81

TRANSPORTER #2: _____ E.P.A. ID No.: _____
Address: _____
City: _____ State: _____ Zip: _____ Phone: _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature: _____ Date: _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature: [signature] Date: 9-17-81

TO 210 R T-50

T/S/D F COPY 9/17/81 JRM

ABLS-6(6-R) REV. 10/80

HAZARDOUS WASTE

HAZARDOUS WASTE

001394

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: [illegible] 45

TO: T/S/D FACILITY	American Chemical Service	FROM: Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	Ind 0616360265	E.P.A. ID Code No.	IND 005420710
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-5238

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☑ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005420710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: BILL FAULKNER
Phone: 219-267-5238

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature: [signature] Date: 10/20/81

TRANSPORTER #1: Mr. Frank Inc. E.P.A. ID No.: ILD 069506160
Address: 201 West 155th St.
City: South Holland State: IL Zip: 60473 Phone: 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature: [signature] Date: 10-20-81

TRANSPORTER #2: _____ E.P.A. ID No.: _____
Address: _____
City: _____ State: _____ Zip: _____ Phone: _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature: _____ Date: _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature: [signature] Date: 10/20/81

T/S/D F COPY TO 211E T-50 10/22/81 jm

EPA FORM 8700-22 (REV. 10-80)

HAZARDOUS WASTE

001395

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

NO 43

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0616360265	E.P.A. ID Code No.	IND 005450710
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-3283

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED Flammable

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

FREIGHT CHARGES PREPAID ☒ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

HAZARDOUS WASTE

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No. IND 005450710
Address OLD ROUTE 30 WEST
Destination WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name BOB FARRIER
Phone 219-267-3283

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature R R Donnelley Date 10/15/81

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date 10-15-81

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY To 211R T-50 10/15/81 gpm

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 10/15/81

T/S/D F COPY

001396

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: [illegible] 47

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 061536026 5	E.P.A. ID Code No.	IND 005490710
Address	420 S. Colfax Ave	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-9288

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No	WEIGHT	LABELS REQUIRED (or Exemption No.)
5-609 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

$_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☒ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005490710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-9288

National Response Center: 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date 11/11/91

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date _____

To 211 R T-50 Sent 11/11/91

T/S/D F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

001397

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 49

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0616360255	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Avenue	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-9288

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

$_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

FREIGHT CHARGES: PREPAID ☒ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: JACK FAULKNER
Phone: 219-267-9288

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 064506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

Transporter No. 1 Signature _____ This is to certify acceptance of the hazardous waste shipment. Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

Transporter No. 2 Signature _____ This is to certify acceptance of the hazardous waste shipment. Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY Signature _____ This is to certify acceptance of the hazardous waste for treatment, storage, or disposal. Date 11/30/81

T/S/D F COPY TC 211 R T-50 6/84 11/30/81

001398

HAZARDOUS WASTE

HAZARDOUS WASTE

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0174502

WASTE GENERATOR

Tel. # (312) 757-5100

Authorization Number 997399

DeSoto Inc (Company Name) | 300 State Street (Address) | EPA # ILD049993165

Chicago Heights (City) | Illinois (State) | 60411 (Zip)

0 3 1 0 4 5 0 0 0 1 G (Generator Number)

WASTE HAULER(S)

(1) Mr. Frank Industrial Disposal (Hauler Name) | 201 W. 155th St. S. Holland, Illinois (Hauler Address)

S.W.H. Registration Number 0 0 7 9 0 2 7

(2) _____ (Hauler Name) | _____ (Hauler Address)

EPA # ILD069506160

S.W.H. Registration Number _____

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 S. Colfax (Address)

9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip)

EPA # ILD016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS U.N. # 1993

HAZARD CLASS: FLAMMABLE LIQUID, N.O.S.

(key components: xylene, toluene, mineral spirits)

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: 01-19-81 FOB (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 0 0 3 0 0 0 (1 GALLONS / 2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 1 / 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.

_____ (Authorized Signature) DATE: 1 / 19 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGITR 1/19/81 Jim Murphy

T-50

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001399

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0174501

Authorization Number 997399

Tel. # 312-7575100

DeSoto Inc. (Company Name) | 300 State Street (Address) | FED EPA # ILD049993165

Chicago Hts. (City) | Ill. (State) | 60411 (Zip)

031045000 1 G (Generator Number)

WASTE HAULER(S)

201 W. 155th. St.

(1) Mr. Frank Industrial Disposal (Hauler Name) | South Holland, Illinois (Hauler Address) | S.W.H. Registration Number 0079027

FED ILD069506160

(2) _____ (Hauler Name) | _____ (Hauler Address) | S.W.H. Registration Number _____

DESTINATION – DISPOSAL, STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | FED EPA # ILD016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS U.N. # 1983 | HAZARD CLASS: FLAMMABLE LIQUID, N.O.S.

(key components: xylene, mineral spirits, toluene)

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: 01-19-81 | (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 003000 | (1) GALLONS 2 CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) | DATE: 1/19/81

(2) _____ (Authorized Signature) | DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ (Authorized Signature) | DATE: 1/19/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT R T-50 1/19/81 Jim Murphy

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001400

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0174504

Tel. # 757-5100

WASTE GENERATOR

Authorization Number 997399

DeSoto Inc (Company Name) | 300 State St. (Address) | EPA # ILD049993165

Chicago Heights (City) | Illinois (State) | 60411 (Zip)

031045 0001 G (Generator Number)

WASTE HAULER(S)

(1) Mr. Frank Industrial Disposal (Hauler Name) | South Holland, Ill. 201 E/ 155th St. (Hauler Address) | EPA # ILD069506160 | S.W.H. Registration Number 0079018

(2) _____ (Hauler Name) | _____ (Hauler Address) | S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 S. Colfax (Address) | EPA # ILD016360265 | 91808921 (Site Number)

Griffith (City) | Ind. (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS — U.N. # 1983 — HAZARD CLASS: FLAMMABLE LIQUID

(key components: xylene, mineral spirits, toluene)

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: 01/21/81 FOOB (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004500 (1 GALLONS / 2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 01/21/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ (Authorized Signature) DATE: 1/24/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGITR 1/21/81 T-50 Jim Murphy

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

SITE COPY - PART 3

001/01

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0174505

WASTE GENERATOR

Tel. # 757-5100

Authorization Number 997399

DeSoto Inc (Company Name) | 300 State Street (Address) | EPA # ILD049993165

Chicago Heights (City) | Illinois (State) | 60411 (Zip)

031045 0001 G (Generator Number)

WASTE HAULER(S)

(1) Mr. Frank Industrial Disposal (Hauler Name) | 201 W. 155th St. S. Holland, Ill. (Hauler Address)

S.W.H. Registration Number 0079023

EPA # ILD069506160

(2) _____ (Hauler Name) | _____ (Hauler Address)

S.W.H. Registration Number _____

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 S. Colfax (Address)

91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip)

EPA # IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS U.N. # 1983

HAZARD CLASS: FLAMMABLE LIQUID

(keycomponents: xylene, mineral spirits, toluene)

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 + EPA

DATE: 02-05-81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005000 (1 GALLONS / 2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 02 05 81

(2) _____ (Authorized Signature) DATE: __ / __ / __

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ (Authorized Signature) DATE: 02 05 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT & T-50 Jim Murphy 2/5/81

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

001402

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0174506 (1–7)

Authorization Number 997399 (8–13)

Tel. # (312) 757-5100

DeSoto Inc. (Company Name) | 300 State Street (Address) | EPA # ILD049993165

Chicago Heights (City) | Illinois (State) | 60411 (Zip)

031045000 1 G (14–24) Generator Number

WASTE HAULER(S)

(1) Mr. Frank Industrial Disposal (Hauler Name) | 201 W. 155th St. S. Holland, Illinois (Hauler Address) | S.W.H. Registration Number 0079023 (25–31)

EPA # ILD069506160

(2) _____ (Hauler Name) | _____ (Hauler Address) | S.W.H. Registration Number _____ (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 S. Colfax (Address) | 918089002 (39–46) Site Number

Griffith (City) | Indiana (State) | 46319 (Zip) | EPA # IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOVENTS | WASTE 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 U.N. # 1983 | HAZARD CLASS: FLAMMABLE LIQUID

(key components: xylene, mineral spirits, toluene)

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 and E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 02-05-81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 0 0 5 0 0 0 (47–52) | 1 GALLONS / 2 CU YDS (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS | TANK TRUCK | OPEN TRUCK | OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 02 05 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: 02 05 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGITR I-50 Jim Muggs 2/5/81

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

001403

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0174507

Tel. # (312) 757-5100

Authorization Number 997399

DeSoto Inc. (Company Name) | 300 State Street (Address)

Chicago Heights (City) | Illinois (State) | 60411 (Zip)

0310450001 G (Generator Number)

EPA # ILD049993165

WASTE HAULER(S)

(1) Mr. Frank Industrial Disposal (Hauler Name) | 201 W. 155th St. South Holland, Illinois (Hauler Address)

S.W.H. Registration Number 0079019

EPA # ILD069506160

(2) _____ (Hauler Name) | _____ (Hauler Address)

S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 S. Colfax (Address)

91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip)

EPA # ILD016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS U.N. 1983

HAZARD CLASS: FLAMMABLE LIQUID, N.O.S.

(key components: xylene, mineral spirits, toluene)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 03/06/81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004400 (1 GALLONS / 2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER _____ (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 03/06/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.

_____ (Authorized Signature) DATE: 03/06/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT E T-50 3/4/81 Jim Murphy

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001404

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0367700

EPA # ILD049993165

TO BE COMPLETED BY WASTE GENERATOR

Tel # (312) 757-5100

Authorization Number 997399

DeSoto Inc. (Company Name) | 300 State St. (Address)

Chicago Heights (City) | Illinois (State) | 60411 (Zip)

0310450001 G (Generator Number)

WASTE HAULER(S)

Mr. Frank Industrial Disposal (Hauler Name) | 201 W. 155th St. (Hauler Address)

S.W.H. Registration Number 0079019

South Holland, Ill. (Hauler Address)

EPA # ILD069506160

(Hauler Name)

S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 S. Colfax (Address)

91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip)

EPA # ILD016360265

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: U.N. # 1983

SHIPPING DESCRIPTION: WASTE SOLVENTS

HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 34,660 LBS TONS (circle one)

(key components: xylene, mineral spirits, toluene)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004300

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: 04-01-81 C. Kochel (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 04 01 81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 4/1/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST 90 T 4/1/81 9am T-50

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001405

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0367699

TO BE COMPLETED BY WASTE GENERATOR

SPECIAL WASTE HAULING MANIFEST

Tel. # (312)757-5100

Authorization Number 997399

DeSoto, Inc. (Company Name) | 300 State Street (Address) | EPA # ILD049993165

Chicago Heights (City) | Illinois (State) | 60411 (Zip)

0310450001 G (Generator Number)

WASTE HAULER(S)

Mr. Frank Industrial Disposal (Hauler Name) | 201 W. 155th St. South Holland, Illinois (Hauler Address) | S.W.H. Registration Number 0079019 | EPA # ILD 069506160

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 S. Colfax (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | EPA# ILD 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

F005

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS | HAZARD CLASS: U. N. 1993 FLAMMABLE LIQUID N.O.S. | WEIGHT FOR D.O.T. USE 36660 (LBS) TONS (circle one)

key components, xylene Mineral spirits, toluene

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 00450 | 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/1/81 | C. Kochel (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) (Authorized Signature) DATE 04/01/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE 4/1/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 203R T-50 4/1/81 gpm.

IN ILLINOIS: 217 / 782-3637 | ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001406

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

TO BE COMPLETED BY WASTE GENERATOR

0367701

Tel. # (312) 757-5100

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 7 3 9 9

DeSoto Inc. (Company Name) | 300 State Street (Address) | EPA #ILD049993165

Chicago Heights (City) | Illinois (State) | 60411 (Zip)

0 3 1 0 4 5 0 0 0 1 G
Generator Number

WASTE HAULER(S)

Mr. Frank Industrial ~~Disp~~ Disposal (Hauler Name) | 201 W. 155th St. South Holland, Ill. (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 1 9

EPA #ILD069506160

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 S. Colfax (Address) | 9 1 8 0 8 9 0 2 Site Number

Griffith (City) | Indiana (State) | 46319 (Zip) | EPA #ILD016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS

HAZARD CLASS: FLAMMABLE LIQUID

(key components: xylene, mineral spirits, toluene) F005

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

U.N. # 1983

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 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: 5/08/81

L Bridge (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 09 81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ___

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 5/8/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST GATE 5/8/81 T-50 9am

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

001407

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0367702

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997399

Tel. # 312 757-5100

Desoto Inc (Company Name) | 300 State Street (Address)

Chicago Heights (City) | Illinois (State) | 60411 (Zip)

0 3 1 0 4 5 0 0 0 1 G (Generator Number)

EPA # ILD049993165

HAULER(S)

201 W. 155th St.

Mr. Frank Industrial Disposal (Hauler Name) | South Holland, Illinois (Hauler Address)

S.W.H. Registration Number 0 0 7 9 0 1 9 21

EPA # ILD069506160

(Hauler Name) | (Hauler Address)

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 S. Colfax (Address)

9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip)

EPA # ILD016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS

HAZARD CLASS: FLAMMABLE LIQUID, NOS

WEIGHT FOR D.O.T. USE 41,760 (LBS / TONS (circle one))

Key Components: ~~xylene mineral spirts~~ toluene

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 5 3 0 0

1 GALLONS (Circle One) / 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5 11 81

L. Stubblefield (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: 5 11 81

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 5 11 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT 5/11/81 T-50 gpm

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001408

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0174508

Tel. # (312) 757 - 5100

WASTE GENERATOR

Authorization Number 997399

DeSoto Inc. (Company Name) | 300 State St. (Address) | EPA # ILD049993165

Chicago Heights (City) | Illinois (State) | 60411 (Zip)

0 3 1 0 4 5 0 0 0 1 G
Generator Number

WASTE HAULER(S)

(1) Mr. Frank Industrial Disposal (Hauler Name) | 201 W. 155th St. South Holland, Illinois (Hauler Address)

S.W.H. Registration Number 0 0 7 9 0 2 1

EPA # ILD069506160

(2) (Hauler Name) | (Hauler Address)

S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 S. ~~6~~ Colfax (Address)

9 1 8 0 8 9 0 2
Site Number

Griffith (City) | Indiana (State) | 46319 (Zip)

EPA # ILD016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: ~~Waste Material Solvents~~ U.N. # 1983

HAZARD CLASS: ~~FLAMMABLE LIQUID, N.O.S.~~

(key components: xylene, mineral spirits, toluene)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 07-16-81

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 0 0 5 5 0 0 (47–52) 1 GALLONS 2 CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER: (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) (Authorized Signature) DATE: 07/16/81 (54–59)

(2) (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature) DATE: 07/16/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST 9625 7/16/81 1:50 p.m.

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

001409

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0174509

WASTE GENERATOR

Authorization Number 997399

Tel. # (312) 757-5100

DeSoto Inc. (Company Name) | 300 State St. (Address) | EPA #ILD049993165

Chicago Heights (City) | Illinois (State) | 60411 (Zip)

03 10 45 0 0 0 1 G (Generator Number)

WASTE HAULER(S)

(1) Mr. Frank Industrial Disposal (Hauler Name) | 201 W. 155th St. South Holland, Illinois (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 2 5

EPA #ILD069506160

(2) _____ (Hauler Name) | _____ (Hauler Address) | S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 S. Colfax (Address) | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | EPA #ILD016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS U.N. # 1983 (key components: xylene, mineral spirits, toluene)

HAZARD CLASS: ~~flammable liquid, n.o.s.~~

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

L Budge KO 7/17 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 0 0 5 0 0 0 (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) Robert Pickens (Authorized Signature) DATE 07/17/81 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ (Authorized Signature) DATE: 7/17/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To West Acit T-50 7/17/81 gpm

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001410

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0174510

Tel. #(312) 757-5100

Authorization Number 997399

DeSoto Inc. (Company Name) | 300 State Street (Address)

03104500 01 G (Generator Number)

Chicago Heights (City) | Illinois (State) | 60411 (Zip)

EPA # ILD049993165

WASTE HAULER(S)

(1) Mr. Frank Industrial Disposal (Hauler Name) | 201 W. 155th St. South Holland, Illinois (Hauler Address)

S.W.H. Registration Number 0079025

EPA # ILD069506160

(2) _____ (Hauler Name) | _____ (Hauler Address)

S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 S. Colfax (Address)

91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip)

EPA # ILD016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS U.N. # 1983

HAZARD CLASS: FLAMMABLE LIQUID, N.O.S.

(key components: xylene, toluene, mineral spirits)

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

F005

DATE: 08-17-81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005000 (1 GALLONS / 2 ~~GALLONS~~) (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE 08/17/81

(2) _____ (Authorized Signature) DATE: ____/____/____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ (Authorized Signature) DATE 8/17/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 210R T-50 8/17/81 JGM

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

001411

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

0463551 (1–7)

Authorization Number 99739 (8–13)

DeSoto Inc. (Company Name) | 300 State Street (Address) | 3127575100 (Phone Number) | 0310450001 G (14 Generator Number 24)

Chicago Heights (City) | Illinois (State) | 60411 (Zip) | ILD049993165 (EPA Number)

WASTE HAULER(S)

Mr. Frank Industrial Disposal (Hauler Name) | 201 W. 155th St. South Holland, Ill. (Hauler Address) | S.W.H. Registration Number 0079025 (25–31)

3125963377 (Phone Number) | ILD069506160 (EPA Number)

Hauler Name | Hauler Address | S W H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax (Address) | 91808902 (39 Site Number 46)

Griffith (City) | Indiana (State) | 46319 (Zip) | Phone Number | ILD016360265 (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 SOLVENT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS FLAMMABLE LIQUID (key components: xylene, toluene, mineral spirits)

HAZARD CLASS: UN1983 (UN or NA Number) | EPA HW Number

WEIGHT FOR D.O.T. USE 35320 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 8225800 (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 L Buck F005 (Authorized Signature) DATE: 08-17-81

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 08 17 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

R Russo (Authorized Signature) DATE 08 17 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 210 ft T-50 8/17/81 gpm

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

001412

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

0463553

Authorization Number 997399

DeSoto Inc. (Company Name) | 300 State St. (Address) | 3127575100 (Phone Number) | 0310450001 G (Generator Number)

Chicago Heights (City) | Illinois (State) | 60411 (Zip) | ILD049993165 (EPA Number)

WASTE HAULER(S)

Mr. Frank Industrial Disposal (Hauler Name) | 201 W. 155th St. South Holland, Illinois (Hauler Address) | S.W.H. Registration Number 0079019

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 Services (Facility Name) | 420 S. Colfax (Address) | 9180890 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | (Phone Number) | ILD016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS.	UN or NA Number	EPA HW Number
WASTE SOLVENTS	FLAMMABLE LIQUID	UN1993	

WEIGHT FOR D.O.T. USE 36,320 (LBS / TONS (circle one))

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004500 (1 GALLONS / 2 CU. YDS. (Circle One)) 1

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION L. Bridle FOR (Authorized Signature) DATE: 08/27/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 8/27/81

(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: 8/27/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 204X T-50 8/27/81 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

001413

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0463552

Authorization Number 997399

TO BE COMPLETED BY WASTE GENERATOR

DeSoto Inc. (Company Name) | 300 State St. (Address) | 3127575100 (Phone Number) | 0310450001 G (Generator Number)

Chicago Heights (City) | Illinois (State) | 60411 (Zip) | ILD0499931165 (EPA Number)

WASTE HAULER(S)

Mr. Frank Industrial Disposal (Hauler Name) | 201 W. 155th St. South Holland, Illinois (Hauler Address) | S.W.H. Registration Number 0079019

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 Services (Facility Name) | 420 S. Colfax (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | (Phone Number) | ILD016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS FLAMMABLE LIQUID

HAZARD CLASS: UN1993 (UN or NA Number)

EPA HW Number:

WEIGHT FOR D.O.T. USE: 34,340 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004500 (1 GALLONS / 2 CU. YDS. (Circle One)) 1

METHOD OF SHIPMENT (Circle One): (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION L Bridel FOR (Authorized Signature) DATE: 08/27/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 8/31/81

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE IN THE INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE 9/2/81

COMMENTS OR SPECIAL INSTRUCTIONS To 211K T-50 8/22/81 JTM

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

001414

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0463555 (1–7)

Authorization Number 997399 (8–13)

TO BE COMPLETED BY WASTE GENERATOR

DESoto Inc (Company Name) | 300 State Street (Address) | 3127575100 (Phone Number) | 031045000 1 G (14 Generator Number 24)

Chicago Heights (City) | Illinois (State) | 60411 (Zip) | ILD049993165 (EPA Number)

WASTE HAULER(S)

Mr. Frank Industrial Disposal (Hauler Name) | 201 W. 155th St. South Holland, Illinois (Hauler Address) | S.W.H. Registration Number 0079021 (25–31)

3125963377 (Phone Number) | ILD069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 S. Colfax (Address) | 91808902 (39 Site Number 46)

Griffith (City) | Indiana (State) | 46319 (Zip) | (Phone Number) | ILD016360265 (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 ~~MATERIAL~~* 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)

EPA HW Number

WEIGHT FOR D.O.T. USE 44,680 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005500 (47–52) (1) GALLONS (Circle One) 2 CU YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION S. Burke (Authorized Signature) DATE: 10-08-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 10/08/81 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

[signature] (Authorized Signature) DATE: 10/08/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 210 E T-50 10/8/81

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

001415

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

0463556

Authorization Number 997399

DeSoto Inc. (Company Name) | 300 State St. (Address) | 3127577510 (Phone Number) | 0310450001 G (Generator Number)

Chicago Heights (City) | Illinois (State) | 60411 (Zip) | ILD049993165 (EPA Number)

WASTE HAULER(S)

Mr. Frank Industrial Disposal (Hauler Name) | 201 W. 155th St. South Holland, Illinois (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 Services (Facility Name) | 420 S. Colfax (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | (Phone Number) | ILD016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION: WASTE SOLVENTS | HAZARD CLASS: FLAMMABLE LIQUID | UN1993 (UN or NA Number) | (EPA HW Number)

WEIGHT FOR D.O.T. USE 32,100 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 004500 | (1 GALLONS) 2 CU YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION L Burdick (Authorized Signature) DATE: 10-08-81

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 Mart (Authorized Signature) DATE 10/08/81

(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 10/08/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 210 E T-50 10/8/81 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

001416

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

0389875 (1–7)

Authorization Number 991624 (8–13)

DEMERT + DOUGHERTY — 1300 N. ST. (Company Name / Address)
COAL CITY — IL — 60416 (City / State / Zip)

06302000001 G (14 / Generator Number / 24)
ILD047036009

WASTE HAULER(S)

MR. FRANK INC. — 201 W. 155TH ST. (Hauler Name / Hauler Address)
S.W.H. Registration Number 0079027 (25–31)

SOUTH HOLLAND ILL (Hauler Address)
S.W.H. Registration Number ____ (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL — 4205 COLFAX (Facility Name / Address)
9180980?
INDO16360265 (39 Site Number 46)
GRIFFITH — IND. — ____ (City / State / Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS — WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

4905

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
WASTE FLAMMABLES	N.O.S. WASTE SOLVENTS UN1993

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 3000 (47–52)

(1) GALLONS (Circle One) (2) CU. YDS. — 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-4-81 — Thomas A. Jones (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: 5/4/81 (54–59)

(2) ____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

____ (Authorized Signature) DATE: 5/4/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT T-50 5/4/81 JJM
7.6% CHL

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

001417

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

04

Authorization Number 99

DELTA COLOR INC. (Company Name) | 310 [redacted] GERRI LANE (Address) | 3125432550 (Phone Number) | 04300501 (14 Generator Number)

ADDISON (City) | ILL (State) | 60101 (Zip) | ILD005057 (EPA Number)

WASTE HAULER(S)

201 W 155 ST

MR FRANK INC. (Hauler Name) | SOUTH HOLLAND IL. (Hauler Address) | S.W.H. Registration Number 007 (25)

3125963377 (Phone Number) | ILD069501 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H Registration Number (32)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S COLFAX AVE (Address) | 9180 (39 Site Nu)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016307 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39 Site N)

(City) | (State) | (Zip) | (Phone Number) | (EPA Numbe)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 13 PAINT SOLVENTS | WASTE PHASE: 4 LIQUID (Liquid, Gaseous, So)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
FLAMMABLE	3	UN1993	F003

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 GAL / CU)

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 TRANSPOR IN ACCORDANCE WITH 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 J. Walls (Authorized Signature) DATE 7-9

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOW THE DESTINATION AS INDICATED:

(1) Ronald Bingenheimer (Authorized Signature) DATE: 21 (54)

(2) _____ (Authorized Signature) DATE ___/_

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES___

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

J. Dunfee (Authorized Signature) DATE 7/ (60)

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AC.IT T-50 7/9/81 JJM.

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-

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

0014

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

0100
MANIFEST DOCUMENT NUMBER

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	IND217223197	[illegible] IMPERIAL COATINGS INC HAMMOND, IND. 46320	4-29-81
TRANSPORTER # 1	ILD064596160	MR. FRANK 201 E. 153rd St. South Holland ILL.	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND018360265	AMERICAN CHEMICAL SERVICE 420 S. COLFAX GRIFFITH IND.	4/29
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1 TANK	X	F005	WASTE PAINT SOLVENT FLAMMABLE LIQUID	1193				2305 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 collected

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

4-29-81
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

× C Bowers 4/29/81
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE 4/29/81 DATE

To 123E 4/29/81 T-63 9PM

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

001419

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

0389880

SPECIAL WASTE HAULING MANIFEST

Authorization Number 99 1623

D&L TRANSPORT INC (Company Name) 3800 So. LARAMIE AVE Address ILD064397748

CICERO City IL State 60650 Zip

03 10 51 00 95 G
14 Generator Number 24

WASTE HAULER(S)

D&L TRANSPORT INC Hauler Name 3800 So. LARAMIE AVE Hauler Address S.W.H. Registration Number T.C.C 25 31

Hauler Name Hauler Address S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERV (Facility Name) 1530 COLFAX AVE. Address 9 1 8 0 8 9 0 2 39 Site Number 48

CALUMET City IN State 46319 Zip IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ETHYL ACETATE WASTE PHASE: LIQUID (Liquid, Gascous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
ETHYL ACETATE	FLAMMABLE	4000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 400 47 52

(1) GALLONS (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: 4-8-81 J Bemis (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) T. D Riffle (Authorized Signature) DATE: / / 54 59

(2) (Authorized Signature) DATE: 4/8/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 4/8/81 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 4/8/81
PUMPED TO 112E 4/14/81 T-63 gjm

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001420

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0036942 (1–7)

Authorization Number 9970XX (8–13)

WASTE GENERATOR

CRONAME INC. (Company Name) 1975 CORNELL AVE (Address)
MELROSE PARK (City) ILL (State) 60160 (Zip)
0311860018 G (14–24) Generator Number

WASTE HAULER(S)

c/o STRANG TRUCKING AMERICAN CHEM. SERVICE (Hauler Name) 4720 S. COLFAX AVE (Hauler Address) S.W.H. Registration Number 0024002 (25–31)

(2) GRIFFITH, (Hauler Name) IND 46319 (Hauler Address) S.W.H. Registration Number ILT000646810 (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERVICE (Facility Name) 4720 S. COLFAX (Address) 9180890X (39–46) Site Number
GRIFFITH, (City) IND (State) 46319 (Zip) INDO16360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
FLAMMABLE	CLASS #1
DIRTY THINNER	FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-7-81 John Richmond (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 00015 (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. DuPont (Authorized Signature) DATE 01 07 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 T. Duncan (Authorized Signature) DATE: 1 12 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOAD AT DOCK 1/8/81
PUMPED TO 125K 1/8/81 T-63 Jim Mundy

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

HAULER COPY - PART 4

001421

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0367725

COMPLETED BY WASTE GENERATOR

Authorization Number 997564

Cudner & O'Connor Co (Company Name) 4035 W. Kinzie St (Address) FED EPA ILD005473277

Chicago (City) Ill. (State) 60624 (Zip)

03 16000 423 G (Generator Number)

WASTE HAULER(S)

Strand (Hauler Name) 420 So. Colfax (Hauler Address) S.W.H. Registration Number 0 024/0 02

STRAND TRUCKING (Hauler Name) CRESTWOOD IL (Hauler Address) S.W.H. Registration Number ILT0006468 10

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Ser. (Facility Name) 420 So Colfax (Address) 918089 02 (Site Number)

Griffith (City) Ind. (State) 46319 (Zip) IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Solvent N.O.S. NOS HAZARD CLASS: ~~FOOS~~ Flammable liq.

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: 00210 (47–52) GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) VAC

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-29-80 FOOS M. C. Hunter (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) William J. Hunter (Authorized Signature) DATE: 12 29 80 (54–59)

(2) _____ (Authorized Signature) DATE: ___ ___ ___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

M. Chaudhary (Authorized Signature) DATE: 1 5 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 1/6/81

PUMPED TO 1257 1/5/81 T-63 Jim Murphy

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY

001422

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

0307492

Authorization Number 997564
FED EPA ILD-005473277
03 16 0 0 0 0 4 2 3 G
Generator Number

CUDNER & O'CONNOR CO. (Company Name) | 4035 WEST KINZIE STREET (Address)
CHICAGO (City) | ILLINOIS (State) | 60624 (Zip)

WASTE HAULER(S)

Hauler Name | Hauler Address | S.W.H. Registration Number 0 0 2 4 0 0

STRAND TRUCKING (Hauler Name) | CRESTWOOD, IL. (Hauler Address) | S.W.H. Registration Number ILT 0006146810

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 SOUTH COLFAX (Address) | 9 1 8 0 8 9 0 2 Site Number
GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
SOLVENT NOS	FLAMMABLE LIQUID	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 1 2 1 0 (47–52) | 0 0 1 7 6 0 | 1 GALLONS (Circle One) 2 CU. YDS. (53)

22

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/21/81 | M. L. Hunter (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) William J. Schuster (Authorized Signature) DATE: 04 21 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:

Michael Bush (Authorized Signature) DATE: 4/24/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 4/22/81
PUMPED TO 124X 4/23/81 T-63 gpm.

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001423

COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0307493
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997564 (8–13)
FED EPA ILD-005473277
031 600 04 23 G (14–24)

CUDNER & O'CONNOR CO. (Company Name) | 4035 WEST KINZIE STREET (Address)
CHICAGO (City) | ILLINOIS (State) | 60624 (Zip)
Generator Number

WASTE HAULER(S)

AMERICAN CHEM (Hauler Name) | GRIFFITH, IN. (Hauler Address) | S.W.H. Registration Number 00 24 /001 (25–31)

STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILL. (Hauler Address) | S.W.H. Registration Number ILT 000646810 (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 SOUTH COLFAX (Address)
GRIFFITH (City) | INDIANA (State) | 46319 (Zip)
91 80 89 02 (39–46) Site Number
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
SOLVENT NOS	FLAMABLE LIQUID	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 1295 (47–52) — 237 30 Gal.

1 GALLONS (Circle One)
2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) UHAUL

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/21/81 (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) James Butler Driver (Authorized Signature) DATE: 8/21/81 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael A. Bowe (Authorized Signature) DATE: 8/21/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 8/21/81
TO 124E T-63 8/24/81 gpm.

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001424

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

0307495
1 7

Authorization Number 997564
8 13

FED EPA ILD-005473277

931600423 G
14 Generator Number 24

CUDNER & O'CONNOR CO. (Company Name) | 4035 WEST KINZIE STREET (Address)
CHICAGO, (City) | ILLINOIS (State) | 60624 (Zip)

WASTE HAULER(S)

AMERICAN CHEMICAL (Hauler Name) | GRIFFITH, IN. (Hauler Address)
S.W.H. Registration Number 0024/001
25 31

STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILLINOIS (Hauler Address)
S.W.H. Registration Number ILT 000646810
32 38

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 SOUTH COLFAX (Address)
39 Site Number 46
GRIFFITH (City) | INDIANA (State) | 46319 (Zip)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: SOLVENT NOS
HAZARD CLASS: FLAMABLE 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: 47 21 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: _____ X P Lindsay (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) X [signature] (Authorized Signature) DATE: 12/27/87 54 59

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 12/28/87 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 124K T-63 GRM 12/29/87

SITE COPY - PART 3

001425

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

0714-05-1
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	IND060806752	CTS Plastics Div. 900 N. West Blvd. 219-295-3575 Elkhart, IN 46514	
TRANSPORTER # 1	ILT000646810	Strand Trucking 13642 S. Kenton Ave. 312-385-8440 Crestwood, IL 60445	7/15
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Services 420 S. Colfax Ave. 219-924-4370 Griffith, IN 46319	7/15
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	ITE091808902		

ITE09180890

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)
~~XX~~ 43 drums	X	F003	Waste Acetone, N.O.S. Flammable Liquid	UN1090	NONE	-17°C	GAL.	2,200 gal.		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes XX No ☐

REMIT C.O.D. TO:
ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID (except when box at right is checked) Check box if charges are to be collect ☐

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE

TRAILER SPOTTED 7/15/81 TRAILER T-63 7/16/81 9:30 AM

STYLE F 50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

001426

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

0714-04-1
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	IND082864729	CTS of Elkhart, Div. 1142 W. Beardsley Ave. 219-295-3575 Elkhart, IN 46514	
TRANSPORTER # 1	ILT000646810	Strand Trucking 13642 S. Kenton Ave. 312-385-8440 Crestwood, IL 60445	7/15/91
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Services 420 S. Colfax Ave. 219-924-4370 Griffith, IN 46319	7/15/91
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	ITE091808902		

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)
3 drums	X	F003	Waste Acetone, N.O.S. Flammable Liquid	UN1090	NONE	-17°C	GAL.	165 gal.		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes XX No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES. $

FREIGHT CHARGES
FREIGHT PREPAID (except when box at right is checked) ☐ Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges
_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE

TRAILER SPOTTED 7/15/91 TO DOCK T-63 7/16/91

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

001427

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

1215-07-1
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	IND060806752	CTS Plastics Div. 219-295-3575	900 N. West Blvd. Elkhart, IN 46514	
TRANSPORTER # 1	ILT000646810	Strand Trucking 312-385-8440	13642 S. Kenton Ave. Crestwood, IL 60445	
TRANSPORTER # 2 (if required)				
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Services 219-924-4370	420 S. Colfax Ave. Griffith, IN 46319	12/15/91
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	ITE091808902			

ITE09180890

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)
24 drums	X	F003	Waste Acetone, N.O.S. Flammable Liquid	UN1090	NONE	-17°C	GAL.	1,320 gal.		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes XX No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked
Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE _____ DATE 12-15-91

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 12/15/91

STYLE F 50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

ON Dock 12/16/91 GEM To 109RT-63 GEM 12/17/91

001428

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: T1 00 78

TO:	FROM: ATT JERRY KITZMAN
T/S/D FACILITY	Generator
E.P.A. ID Code No.	E.P.A. ID Code No.
Address 420 S. COLFAX	Address
Destination	Origin
Phone 219 884-1370	Phone

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
	Waste Flammable Liquid					
	Not Specified Otherwise					
	Containing Materials					
	Spent Halogenated Solvent	Flammable Liquid		F002	3500#	
	Spent Halogenated Solvent	Flammable Liquid		F002		
	Paint and Coating Residues	Flammable Liquid		F003		

PLACARDS REQUIRED Flammable

NOTE - Where the rate is dependant on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☒

RECEIVED subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name See above
Phone _____

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date 1-20-81

TRANSPORTER #1 INK FINISH, INC. E.P.A. ID No. ILD069506160
Address 201 W. 154th ST.
City South Holland, ILL State IL Zip 60473 Phone 596-3900

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date 1-20-81

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY NL WEST 46TH ST - 1/23/81 T-50 Jim Murphy

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 01/23/81

T/S/D F COPY

7-BLS-C (5 PLY) REV 10/80

001429

HAZARDOUS WASTE

LADING/HAZARDOUS WASTE MANIFEST

COPY

B B — TO BE RETAINED BY CONSIGNEE

HAZARDOUS WASTE MANIFEST AND SHIPPERS NO. 00435

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading.

On 9-10-81 FROM **CROWN CORK & SEAL COMPANY, INC.**

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, 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 of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Subject to applicable bill to be delive recourse on shall sign the The carrier this shipmen and all other CROWN Per (Sig If charges a stamp here, "T

Delivering Carrier MR. FRANKS, INC. TRAILER # 238 EPA ID. No. ILD 069-

Carrier Address 201 W. 155th ST. SOUTH HOLLAND, ILL, 60473

Received and Accepted for Transport By (Signature) [signature] Date 9-

ATTENTION CARRIER: Obtain consignee's signature below - Give Copies A & B to consignee. Retain Copy C for your records.

Consigned To AMERICAN CHEMICAL SERVICES EPA ID. No. IND- 016-

Address 420 S. COLFAX

City GRIFFITH State IND. Route

Received and Accepted for Treatment, Storage or Disposal By (Signature) [signature] Title Da

ATTENTION CONSIGNEE: Return original signed Copy A of this document to shipper at address below. Retain Copy B for your records.

PACKAGES NUMBER	PACKAGES KIND	EPA ID. NO.	MATERIAL	HAZARD CL
	55 Gallon Drums		DESCRIPTION OF MATERIAL AND HAZARD CLASSIFICATIONS	
4925 KK	Gallons Bulk		Mixed Liquid Chemical Waste which may contain one or more of the following Hazardous Mc	
	Pounds Bulk	F005	Spent Non-Halogenated Solvents	Flammable Li
		F002	Spent Halogenated Solvents	Flammable Li
		F017	Paint and Coating Residues	Flammable Lic
			To 2/R T-50 9/11/81	

PLACARDS REQUIRED FLAMMABLE

CROWN CORK & SEAL CO. INC. EPA ID. No. MND-050-742-014

Address 4th STREET & PARK AVE. City FARIBAULT State MN Phone (507) 334-39

Shipper, Per (Signature) [signature] Date 9-10-8

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transpor according to the applicable regulations of the Department of Transportation and EPA.

Form 5009

B - CONSIGNEE

001430

STRAIGHT BILL OF LADING/HAZARDOUS WASTE MANIFEST

COPY

B B — TO BE RETAINED BY CONSIGNEE

HAZARDOUS WASTE MANIFEST AND SHIPPERS NO. 00436

Subject to Section 7 of conditions of applicable bill of lading, 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

CROWN CORK & SEAL COMPANY, INC.

Per _____ (Signature of consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading,

On 10-19-81 FROM CROWN CORK & SEAL COMPANY, INC.

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as *indicated below, 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 of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth *(1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is* a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Delivering Carrier MR. FRANKS INC. TRAILER# 227 EPA ID. No. ILD069-506-160

Carrier Address 201 W. 155th ST. SOUTH HOLLAND, ILL. 60473

Received and Accepted for Transport By (Signature) C E Milburn Date 10-19-81

ATTENTION CARRIER: Obtain consignee's signature below - Give Copies A & B to consignee. Retain Copy C for your records.

Consigned To AMERICAN CHEMICAL SERVICES EPA ID. No. IND. 016-360-265

Address 420 S. COLFAX

City GRIFFITH State IND. Route

Received and Accepted for Treatment, Storage or Disposal By (Signature) J. Dunfee Title Date 10/20/8

ATTENTION CONSIGNEE: Return original signed Copy A of this document to shipper at address below. *Retain Copy B for your records.*

PACKAGES NUMBER	PACKAGES KIND	DESCRIPTION OF MATERIAL AND HAZARD CLASSIFICATIONS		
		Mixed Liquid Chemical Waste which may contain one or more of the following Hazardous Materials.		
		EPA I.D. NO.	MATERIAL	HAZARD CLASS
	55 Gallon Drums	F005	Spent Non-Halogenated Solvents	Flammable Liquid
		F002	Spent Halogenated Solvents	Flammable Liquid
4829	Gallons - Bulk	F017	Paint and Coating Residues	Flammable Liquid
	Pounds Bulk			

PLACARDS REQUIRED FLAMAMABLE

CROWN CORK & SEAL CO. INC. EPA ID. No. MND-050-742-014

Address 4th STREET & PARK AVE. City FARIBAULT State MINN. Phone (507)334-3981

Shipper, Per (Signature) William G. Thompson Date 10-19-81

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

Form 5009

TO 211K T-50 10/20/81 B - CONSIGNEE

001431

STRAIGHT BILL OF LADING/HAZARDOUS WASTE MANIFEST

COPY

D D — TO BE RETAINED BY CONSIGNEE

HAZARDOUS WASTE MANIFEST AND SHIPPERS NO. 00437

Subject to Section 7 of conditions of applicable bill of lading, 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.

CROWN CORK & SEAL COMPANY, INC.

Per _____ (Signature of consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading,

On 12-1-81 FROM CROWN CORK & SEAL COMPANY, INC.

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, 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 of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Delivering Carrier MR. FRANKS, INC. TRAILER # 227 EPA ID. No. ILD 069-506-160

Carrier Address 201 W. 155th ST. SOUTH HOLLAND, ILL. 60473

Received and Accepted for Transport By (Signature) [signature] Date 12-1-81

ATTENTION CARRIER: Obtain consignee's signature below - Give Copies A & B to consignee. Retain Copy C for your records.

Consigned To AMERICAN CHEMICAL SERVICES EPA ID. No. IND-016-360-265

Address 420 S. COLFAX

City GRIFFITH State IND. Route

Received and Accepted for Treatment, Storage or Disposal By (Signature) [signature] Title Date 12/2/81

ATTENTION CONSIGNEE: Return original signed Copy A of this document to shipper at address below. *Retain Copy B for your records.*

PACKAGES

NUMBER	KIND
	55 Gallon Drums
4850	Gallons Bulk
	Pounds Bulk

DESCRIPTION OF MATERIAL AND HAZARD CLASSIFICATIONS

Mixed Liquid Chemical Waste which may contain one or more of the following Hazardous Materials.

EPA I.D. NO.	MATERIAL	HAZARD CLASS
F005	Spent Non-Halogenated Solvents	Flammable Liquid
F002	Spent Halogenated Solvents	Flammable Liquid
F017	Paint and Coating Residues	Flammable Liquid

PLACARDS REQUIRED FLAMMABLE

CROWN CORK & SEAL CO. INC.

EPA ID. No. MND-050-742-011

Address 4th STREET & PARK AVE. City FARIBAULT State MINN Phone (507 334-3981

Shipper, Per (Signature) [signature] Date 12-1-81

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

Form 5009

B - CONSIGNEE

To 211K T-50 GKM 12/2/81

001432

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0375971

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997149

MILES LABORATORIES (Company Name) | 195 W. BIRCH ST. (Address)

ILD048955959

KANKAKEE (City) | IL (State) | 60901 (Zip)

09105500008 (Generator Number)

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL (Hauler Name) | 1360 E. LOCUST (Hauler Address)

S.W.H. Registration Number 006601

ILD054155080

(Hauler Name) | (Hauler Address)

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | COLFAX AVE. & C & O R.R. (Address)

91808902 (Site Number)

GRIFFITH (City) | IN (State) | 46319 (Zip)

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE 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 41,600 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One) / 2 CU. YDS. — 1

METHOD OF SHIPMENT (Circle One) DRUMS | TANK TRUCK | OPEN TRUCK | OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/1/81 — Jenora Barber (Authorized Signature) USDY

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: 5/29/81

(2) _____ (Authorized Signature) DATE: 6/1/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 6/1/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO #7 STILL 6/1/81 AT 7-63 9 7am

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

001433

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0244288

TO BE COMPLETED BY WASTE GENERATOR

CCS ILH 00457

Authorization Number 992322

CROWN CORK + SEAL INC (Company Name) | 1035 EAST NORTH ST (Address) | ILD057739427 (Generator Number)

KANKAKEE (City) | IL (State) | 60901 (Zip)

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL (Hauler Name) | 1360 LOCUST ST. KANKAKEE IL (Hauler Address) | S.W.H. Registration Number D0661014

Hauler Name | Hauler Address | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE INC (Facility Name) | RR1 ROAD + CODELL [redacted] (Address) | 9140X902 (Site Number)

GRIFFITH (City) | IN (State) | (Zip) TND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT LINE WASH SOLVENTS, N.O.S. X073 | WASTE 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 38,760 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 | (T) GALLONS (Circle One) / 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: 5/26/81 | J O'Donnell (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) R.W. Shuller (Authorized Signature) | DATE 5/26/81

(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:

J Dunphee (Authorized Signature) | DATE: 5/26/81

COMMENTS OR SPECIAL INSTRUCTIONS: 4200 TO #2 STILL - 800 TO 12#X T-63 5/26/81 gjm

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001434

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0244289

TO BE COMPLETED BY WASTE GENERATOR

CCTS IBL 00458

Authorization Number 2 2 2 3 7 2

CROWN CORK & SEAL INC (Company Name) | 1035 EAST KANKAKEE ST (Address)

IL0057739427

KANKAKEE (City) | IL (State) | 60915 (Zip)

0 9 1 0 2 0 0 0 0 4 G (Generator Number)

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL (Hauler Name) | 1360 LOCUST ST KANKAKEE IL (Hauler Address) | S.W.H. Registration Number 0 0 6 6 0 1 3

IL00 5415 5080

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

IND0 16 36 0265

AMERICAN CHEMICAL SERVICE INC (Facility Name) | RAILROAD & COAL CAR (Address)

2 1 8 0 9 9 0 2 (Site Number)

GRIFFITH (City) | IN (State) | 63139 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT LINE WASH SOLVENT N.O.S. | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: | HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 37920 (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 (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: 7/20/81 (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE: 7 20 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 7 20 81

COMMENTS OR SPECIAL INSTRUCTIONS: 4200 TO #2 STILL } T-63 7/20/81 JPM
800 TO 124 K }

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

STRAIGHT COPY

SITE COPY - PART 3

001435

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217)-782-6760

SPECIAL WASTE HAULING MANIFEST

0244291

TO BE COMPLETED BY WASTE GENERATOR

SCA-3L-H 00462

Authorization Number 9 9 7 3 2 2

CROWN COOK + SEAL (Company Name) | 1035 E AST BOURBONNAIS ST (Address) | ILD 0 5 7 7 3 9 4 2 7

09 1 0 2 0 0 0 0 4 G (Generator Number)

KANKAKEE (City) | IL (State) | 60915 (Zip)

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL (Hauler Name) | 1360 LOCUST ST KANKAKEE IL (Hauler Address) | S.W.H. Registration Number 0 0 6 6 0 1 3 | ILD 0 5 4 1 5 5 0 8 0

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

IND 0 1 6 3 6 0 2 6 5

AMERICAN CHEMICAL SERVICE (Facility Name) | RAILROAD + COOK FAX (Address) | 9 1 8 0 8 9 0 2 (Site Number)

GRIFFITH (City) | IN (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT LINE WASH SOLVENT H.O.S. | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
	FLAMMABLE LIQUID	32/40 (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) | (1) GALLONS (2) CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION.

DATE: 10-8-81 | J O'Donnell (Authorized Signature) | FOS

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Don Engelman (Authorized Signature) DATE: 10 08 81 (54–59)

(2) (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 10 8 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 120K T-43 10/8/81 jm

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS OUTSIDE ILLINOIS: 800 / 424-8802

PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE

001436

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

0293886

Authorization Number 998455

CROWN CORK & SEAL CO INC (Company Name) | 3501 W 31ST ST (Address)
ILD 001833326
CHICAGO (City) | ILLINOIS (State) | 60623 (Zip)
031 60001946 G (Generator Number)

WASTE HAULER(S)

MR FRANK, INC (Hauler Name) | 201 W 155TH ST (Hauler Address) | S.W.H. Registration Number 0079027
SO. HOLLAND, IL 60473 | ILD 069506160

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERV (Facility Name) | 420 S. COLFAX (Address) | 91808902 (Site Number)
GRIFFITH (City) | IND (State) | 46319 (Zip)
IND, 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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: TANK TRUCK | HAZARD CLASS: FLAMMABLE | WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 3000 | (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: 1-19-81 | W J Gallagher (Authorized Signature) | F005 F002 F017

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) D. [signature] (Authorized Signature) DATE: 1/19/81

(2) ____ (Authorized Signature) DATE: ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 1/19/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT R. 1/19/81 T-50 Jim Murphy

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001437

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

0293893
1 7

Authorization Number 998455 13

Crown Cork & Seal Co. (Company Name) | 3501 W. 51st Street (Address)
Chicago (City) | Illinois (State) | 60623 (Zip)

ILD001833326

0316000194 G
14 Generator Number 24

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address)
So. Holland, Ill. 60473

S.W.H. Registration Number 0079004 25 31

ILD069506160

Hauler Name | Hauler Address

S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax (Address)
Griffith (City) | Indiana (State) | 46319 (Zip)

9 1 8 0 8 9 0 2
39 Site Number 46

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Tank Truck

HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000. 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: 8-3-81 (Authorized Signature) E 001

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (X) Graham Robertson (Authorized Signature) DATE: 08 03 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: 08 03 81 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: I-80 To East Acit I-50 8/3/81 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

001438

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

0293892 (1–7)

Authorization Number 998455 (8–13)

CROWN COCK & SEAL CO (Company Name) | 3501 W. 31ST ST. (Address)
CHICAGO (City) | ILLINOIS (State) | 60623 (Zip)
ILD 001833526
0316000194 G (14–24) Generator Number

WASTE HAULER(S)

MR. FRANK, INC (Hauler Name) | 201 W. 155TH ST (Hauler Address) | SO. HOLLAND, IL 60473
S.W.H. Registration Number 00790061 (25–31)
ILO 069506160

(Hauler Name) | (Hauler Address)
S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. (Facility Name) | 420 S. COLFAX (Address)
91808902 (39–46) Site Number
GRIFFITH (City) | INDIANA (State) | 46319 (Zip)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TANK TRUCK
HAZARD CLASS: FLAMMABLE
WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 002300 (47–52)
(1 GALLONS) (2 CU. YDS.) (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)_____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-30-81
B J Gallagher (Authorized Signature)
F002
F005
F017

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Ronald C Bright Jr. (Authorized Signature) DATE: 6/30/81 (54–59)

(2)_____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 6/30/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT T-50 6/30/81 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

001439

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

0293889

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998455
ILD 000183326

CROWN CORK & SEAL CO. INC. (Company Name) | 3501 W. 31ST STREET (Address) | CHICAGO (City) | ILLINOIS (State) | 60623 (Zip)

031600019 4 G
Generator Number

WASTE HAULER(S)

MR FRANK, INC (Hauler Name) | 201 W. 155TH ST (Hauler Address) | SO. HOLLAND IL 60473

S.W.H. Registration Number 0079005
ILD 067506160

(Hauler Name) | (Hauler Address)

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERV. (Facility Name) | 420 S. CLEAR (Address) | GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

91808902
Site Number

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

F003

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
TANK TRUCK	FLAMMABLE	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002600

(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.

F002
F005
F017

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-15-81 BY [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) Tom Berry (Authorized Signature) DATE: 4/15/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 4/15/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST ACIT T-50 4/15/81 JM

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001440

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

0293890

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998455
ILD 0018 33326

CROWN CORK & SEAL CO INC (Company Name) | 3501 W 31ST STREET (Address)
CHICAGO (City) | ILLINOIS (State) | 60623 (Zip)
031600194G (Generator Number)

WASTE HAULER(S)

MR FRANK, INC (Hauler Name) | 201 W. 155TH ST (Hauler Address) | S.W.H. Registration Number 010790004
SO. HOLLAND, IL 60473 | ILD 069506160

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERV (Facility Name) | 420 S. COLFAX (Address) | 918089002 (Site Number)
GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TANK TRUCK | HAZARD CLASS: FLAMMABLE | WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002600 | (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

F002
F005
F017

DATE: 5-8-81 | By Gallagher (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Ronald Bielawski (Authorized Signature) | DATE: 5/8/81

(2) _____ (Authorized Signature) | DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) | DATE: 5/8/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT R T-50 5/8/81 gpm

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001441

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

0293891 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998455 (8–13)
ILD 001833326

Crown Cork & Seal Co. (Company Name) | 3501 W. 31st Street (Address) | Chicago (City) | Illinois (State) | 60623 (Zip)

031 6000 Y 94 G (14–24) Generator Number

WASTE HAULER(S)

Mr. Frank Inc (Hauler Name) | 201 W. 155th St. So. Holland, Ill. 60473 (Hauler Address) | S.W.H. Registration Number 0079004 (25–31)
ILD 069506160

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax (Address) | 9180 8902 (39–46) Site Number

Griffith (City) | Indiana (State) | 46319 (Zip)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Tank Truck

HAZARD CLASS: Flammable 3

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002500 (47–52)

1 GALLONS (Circle One) 2 CU. YDS. — 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: 6-1-81

David Holden (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Ronald O'Brien (Authorized Signature) DATE: 6 4 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: 6 1 1 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To East Acit T-50 6/1/81 JJM

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001442

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

0293888

Authorization Number 998455

CROWN CORK & SEAL CO INC (Company Name) | 3501 W 31ST ST (Address)
CHICAGO (City) | ILLINOIS (State) | 60623 (Zip)

ILD 000183326

0 3 1 6 0 0 0 1 9 4 Generator Number

WASTE HAULER(S)

MR FRANK INC (Hauler Name) | 201 W 155TH ST (Hauler Address)
SO. HOLLAND, IL 60473

S.W.H. Registration Number 0 0 7 9 0 0 4

ILD 069506160

Hauler Name | Hauler Address | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERV (Facility Name) | 420 S COLFAX (Address)
GRIFFITH (City) | IND (State) | 46319 (Zip)

9 1 8 0 8 9 0 2 Site Number

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
TANK TRUCK	FLAMMABLE	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002500 (47–52)

(D) 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: 3-18-81

B J Gaccione (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) Ross C Brinkmeyer (Authorized Signature) DATE: 3 / 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:

BOB MANN (Authorized Signature) DATE: 03 / 18 / 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST ACRE T-50 3/18/81 Jim Murphy

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001443

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

0293887

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998455

CROWN CORK & SEAL CO. INC (Company Name) | 3501 W 31ST ST (Address)
CHICAGO (City) | ILLINOIS (State) | 60623 (Zip)

ILD 001833326
0316000194 Generator Number

WASTE HAULER(S)

MR FRANK, INC (Hauler Name) | 201 W 155TH ST (Hauler Address) | S.W.H. Registration Number D079004
SO. HOLLAND, IL 60473 | ILD 069506160

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERV (Facility Name) | 420 S. COLFAX (Address) | 91808902 Site Number
GRIFFITH (City) | IND (State) | 46319 (Zip)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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: TANK TRUCK
HAZARD CLASS: FLAMMABLE
WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002500

(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: 2-20-81 BJ Gallagher (Authorized Signature)

F005
F002
F017

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: 02/20/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: ___/___/21

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT R 2/20/81 T-50 Jim Murphy

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001444

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0010995

WASTE GENERATOR

Authorization Number 998455

CROWN COLOR & SEAL CO. INC — (Company Name)
3501 W 31ST ST — Address
ILD 001823326
CHICAGO — City
ILL — State
60623 — Zip
031 6000174 G — Generator Number

WASTE HAULER(S)

(1) MC FRANK INC — Hauler Name
201 W 155TH ST — Hauler Address
SO. HOLLAND, IL 60473
S.W.H. Registration Number 0079003
ILD 064506140

(2) _____ — Hauler Name
_____ — Hauler Address
S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV — (Facility Name)
420 S. COLLAX — Address
91808202 — Site Number
GRIFFITH — City
INDIANA — State
46319 — Zip
IND 011360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TANK TRUCK
HAZARD CLASS: FLAMMABLE I

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11-30-81
S. J. Gallagher (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 02500 (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) Graham Rotuba (Authorized Signature) DATE: 11/30/81

(2) _____ (Authorized Signature) DATE: ____/____/____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[illegible] (Authorized Signature) DATE 11/30/81

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 ILPA — PART - 6 GENERATOR

SITE COPY - PART 3

TO 211 TR T-50 GRM 11/30/81

001445

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0010988

WASTE GENERATOR

Authorization Number 998455

CROWN CORK & SEAL CO — (Company Name)
3501 W. 31ST ST — Address
CHICAGO — City
ILL — State
60623 — Zip
ILD 001833326
031600019 4 G — Generator Number

WASTE HAULER(S)

(1) MR FRANK, INC — Hauler Name
201 W 155TH ST — Hauler Address
SO. HOLLAND IL 60473
S.W.H. Registration Number 0079005
ILD 069506160

(2) — Hauler Name
Hauler Address
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV — (Facility Name)
420 S. COLFAX — Address
GRIFFITH — City
INDIANA — State
46319 — Zip
9 1508902 — Site Number
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TANK TRUCK
HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9-2-81
B.J. Gallagher (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2000 (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) F002 F005 F017 DATE: 9/2/81
(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ (Authorized Signature) DATE: 9/2/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 211R T-50 9/2/81 JTM

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

SITE COPY - PART 3

001446

0010990

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

Authorization Number 998455

WASTE GENERATOR

CROWN CORK & SEAL CO — (Company Name)
3501 W. 31ST ST — Address
ILD 001833326
CHICAGO — City
ILL — State
60623 — Zip
0316000194 — Generator Number

WASTE HAULER(S)

(1) MR FRANK, INC — Hauler Name
201 W 155TH ST — Hauler Address
SO. HOLLAND, IL 60473
S.W.H. Registration Number 0079005
ILD 069506160

(2) _____ — Hauler Name
_____ — Hauler Address
S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV — (Facility Name)
420 S. COLFAX — Address
GRIFFITH — City
INDIANA — State
46319 — Zip
91808902 — Site Number
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TANK TRUCK
HAZARD CLASS: FLAMMABLE
F003

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: 10-2-81 — W. Stein (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000 — (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) C Barnecki (Authorized Signature) — DATE: 10/2/81
F002
F005
F017

(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/__/__

COMMENTS OR SPECIAL INSTRUCTIONS: TO 210R T-50 10/2/81 jm

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001447

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0010992

WASTE GENERATOR

Authorization Number 998455

Crown Cork & Seal Co — (Company Name)
3501 W. 31st St — Address
ILD 001833326
Chicago, [redacted] — City
Ill — State
60623 — Zip
031600019 4 G — Generator Number

WASTE HAULER(S)

(1) Mr Frank, Inc — Hauler Name
201 W 155th St — Hauler Address
So Holland, IL 60473
S.W.H. Registration Number 0079001
ILD 064506160

(2) _____ — Hauler Name
_____ — Hauler Address
S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv — (Facility Name)
420 S. Colfax — Address
Griffith — City
Indiana — State
46319 — Zip
IND 016360265
Site Number 7180890 2

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Tank Truck
HAZARD CLASS: Flammable

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-29-81
BJ Gallagher (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3,000 (1 GALLONS / 2 CU. YDS.) (Circle One)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 10/29/81

(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: ___/___/___

COMMENTS OR SPECIAL INSTRUCTIONS: To 203R T-50 10/29/81 jam

1045

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

001448

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0036942

WASTE GENERATOR

Authorization Number 9970YY

CRONAME INC. (Company Name) 1975 CORNELL AVE (Address)

MELROSE PARK (City) ILL (State) 60160 (Zip)

0311860018 G (Generator Number)

WASTE HAULER(S)

(1) STRANO TRUCKING of AMERICAN CHEM. SERVICE (Hauler Name) 470 S. COLFAX AVE (Hauler Address) S.W.H. Registration Number 0024002

(2) GRIFFITH (Hauler Name) IND 46319 (Hauler Address) S.W.H. Registration Number ILT000646810

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERVICE (Facility Name) 470 S. COLFAX (Address) 9180890Y (Site Number)

GRIFFITH (City) IND (State) 46319 (Zip) IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
FLAMMABLE	CLASS #1
DIRTY THINNER	FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-7-80 F005 John Richmond (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 000715 (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) William J. Duplante (Authorized Signature) DATE: 01 07 80 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Michael T. Dunn (Authorized Signature) DATE: 1, 7, 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 1/7/81

UNLOADED 1/8/81 PUMPED TO 125K 1/8/81 T-63 Jim Murphy

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001449

...TED BY
...TOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0036945

WASTE GENERATOR

Authorization Number 997022

CRONAME, INC. (Company Name) | 1975 CORNELL AVE (Address)

FID NO ILD 097187927

MELROSE PARK (City) | ILL (State) | 60160 (Zip)

0311860018 (Generator Number)

WASTE HAULER(S)

(1) AMERICAN CHEM. SERVICE (Hauler Name) | 420 S. COLFAX AV., (Hauler Address) | S.W.H. Registration Number 002400

(2) GRIFFITH (Hauler Name) | IND 46319 (Hauler Address) | ILT 0006468 10 (S.W.H. Registration Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERVICE (Facility Name) | 420 S. COLFAX AV., (Address) | 9180902 (Site Number)

GRIFFITH (City) | IND (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS 495 | WASTE 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	CLASS #1
DIRTY THINNER	FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-7-81 John Richmond (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 605 (1) GALLONS (2) CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Thomas O'Brien (Authorized Signature) DATE: 04/07/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

William O'Brien (Authorized Signature) DATE: 4/2/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 4/7/81
Pump To 125R 4/10/81 T-63 9TM

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

001450

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0115678

WASTE GENERATOR

Authorization Number 997022

CRONAME INC., (Company Name) | 1175 CORNELL AVE (Address) | FID NO ILD 097182927

MELROSE PARK (City) | ILL (State) | 60160 (Zip)

02118600018 (Generator Number)

WASTE HAULER(S)

(1) AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 S. COLFAX AVE (Hauler Address) | S.W.H. Registration Number 0024001

(2) GRIFFITH (Hauler Name) | IND. 46319 (Hauler Address) | S.W.H. Registration Number ILT 000646810

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVE., (Address) | 91808902 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLIENTS F005 | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
FLAMMABLE	CLASS #1
DIRTY THINNER	FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-11-81 (John Richmond) (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 00104 (1 GALLONS / 2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) 19 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) James Batten (Authorized Signature) DATE: __/__/__

(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. C. C. Bu (Authorized Signature) DATE: 8/11/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 124K T-63 8/13/81 JMM

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001451

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

0402652

Authorization Number 997022

CRONAME INC (Company Name) | 1975 CORNELL (Address) | 312/344-9500 (Phone Number) | FID # ILD097187972 | CE1186 0018 G (Generator Number)

MELROSE PARK (City) | ILL (State) | 60160 (Zip) | (EPA Number)

WASTE HAULER(S)

CHEM-AMERICAN SERV (Hauler Name) | 420 S. OLEAN (Hauler Address) | 312/768-3400 (Phone Number) | S.W.H. Registration Number 0024001 | ILT 006 46 810 (EPA Number)

(Hauler Name) | GRIFFITH IND (Hauler Address) | (Phone Number) | S.W.H. Registration Number | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

CHEM AMERICAN SERV (Facility Name) | 420 S OLEAN AVE (Address) | 9180 8902 (Site Number)

GRIFFITH, (City) | IND (State) | 46319 (Zip) | 317/768-3400 (Phone Number) | ILT 006 46 810 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS WASTE PHASE: LIQUID (Liquid Gaseous. Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION.	HAZARD CLASS	UN or NA Number	EPA HW Number
FLAMMABLE	# 1		

WEIGHT FOR D.O.T. USE: DIRTY THINNER 4500 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 550 (1) GALLONS (2) CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 10 Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Allen M. Richmond (Authorized Signature) DATE: 11-3-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) L Lubell (Authorized Signature) DATE: 121031 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael D. Duda (Authorized Signature) DATE 12/3/81

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

On dock 12/3/81 GFM
To 126 K T-63 GFM 12/8/81

001452

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

0275530
1 7

Authorization Number 998158
8 13

Converters Ink Co. (Company Name)	4910 S. Monitor Ave. (Address)	IL0082933508
Chicago (City)	Illinois (State)	60638 (Zip)
		0 3 1 6 0 0 0 3 9 8 G (Generator Number) 14 24

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name)	201 W. 155th St. (Hauler Address)	S.W.H. Registration Number 0 0 7 9 0 0 3 (25 31)
	South Holland, Il. 60473	
(Hauler Name)	(Hauler Address)	S.W.H. Registration Number (32) ILI0069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name)	420 S. Colfax Ave. (Address)	9 1 8 0 8 9 0 2 (39 Site Number 46)
Griffith (City)	Ind. (State)	46319 (Zip)
		IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvents

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Ink Solvents	Flammable	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000 (47 52)

1 GALLONS (Circle One) / 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION.

DATE: 2-2-81 (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE: 02/02/81 (59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO V

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 2/2/81 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT K 2/2/81 T-50 Jim Murphy

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

001453

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

0396731

Authorization Number 998158

Converters Ink Co. (Company Name) | 4910 S. Monitor Avenue (Address) | IL0082933508

Chicago (City) | Illinois (State) | 60638 (Zip)

03160003 98 G (Generator Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 291 W. 155th Street (Hauler Address) | S.W.H. Registration Number 0079029

(Hauler Name) | South Holland, Il. 60473 (Hauler Address) | S.W.H. Registration Number XXX IL0069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax Avenue (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvents F003 | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Ink 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: 002,000 | 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-22-81 | Tom Berry (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: 6 22 81

(2) _____ (Authorized Signature) | DATE: ___ ___ ___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) | DATE: 6 22 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST 40FT T-50 6/22/81 JRM

*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

001454

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0275531

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 998158

Converters Ink Co. (Company Name) | 4910 S. Monitor Ave. (Address)
Chicago (City) | Illinois (State) | 60638 (Zip)
ILO082933508
0316000398 G (Generator Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address) | S.W.H. Registration Number 0079005
South Holland, Il. 60473

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number ILD069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax Ave. (Address) | 91808902 Site Number
Griffith (City) | Ind. (State) | 46319 (Zip)
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE	LBS / TONS (circle one)
Ink Solvents	Flammable		

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 990 | QUANTITY OF WASTE DELIVERED: 002000 | (GALLONS) / CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2-27-81 | (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 2/27/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 2/27/81

COMMENTS OR SPECIAL INSTRUCTIONS: To West Agit X 2/27/81 T-50 Jim Murphy

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001455

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

0275532
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 79815 8

CONVERTER'S INK (Company Name) 4910 So Nagle Ave (Address)
Chicago (City) Ill (State) (Zip)
ILD 082933508
U3 [illegible] G
14 Generator Number 24

WASTE HAULER(S)

MR. FRANK INC (Hauler Name) 201 W 155 ST (Hauler Address)
S.W.H. Registration Number 0079004
25 31

SOUTH HOLLAND (Hauler Name) Ill (Hauler Address)
ILD 069506160
S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) 1126 SOUTH CULFAX (Address)
9 1 8 0 8 9 0 2
39 Site Number 46

ERIE-FITH (City) IND (State) (Zip)
IND 016 360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE Solvents Ink
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

Flammable NOS UN 1993

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

4993

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
WASTE Solvents	FLAMMABLE	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002200 (52)

1 GALLONS (Circle One)
2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/15/81 (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) [illegible] (Authorized Signature) DATE: 5/15/81 (54 59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 5/15/81 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST 40TH 5/15/81 T-50 JMM

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001456

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

0275533 (1–7)

Authorization Number 991158 (8–13)

CONVERTERS INK Co. (Company Name) | 4910 SO. MONITOR (Address)
CHICAGO (City) | ILL. (State) | 60638 (Zip)
ILO082933508
0316000398 (14–24) Generator Number

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079001 (25–31)
(Hauler Name) | SO. HOLLAND, ILL. (Hauler Address) | S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERV. (Facility Name) | 420 SO. COLFAX (Address) | 91808902 (39–46) Site Number
GRIFFITH (City) | IND (State) | 46319 (Zip)
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: INK SOLVENTS | HAZARD CLASS: FLAMMABLE | WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000 (47–52)

1 (GALLONS) (Circle One)
2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11-23-81 | (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) Mike Frank (Authorized Signature) | DATE: 11 23 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: 11 23 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

To 211K T-50 6PM 11/23/81

SITE COPY - PART 3

001457

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

0396732
1 7

Authorization Number 998158 13
ILD082933508

CONVERTERS INK. (Company Name) | 4910 SO. MONITOR Address
CHICAGO, ILL. City | ILL. State | 60638 Zip

03160003980 14 24 Generator Number

WASTE HAULER(S)

MR. FRANK INC. Hauler Name | 201 W. 155TH ST. Hauler Address
S.W.H. Registration Number 0079009 25 31
ILD 069506160

Hauler Name | SO. HOLLAND, ILL. Hauler Address
S.W.H. Registration Number 32 38

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM SERV. (Facility Name) | 420 SO. COLFAX Address
91808902 39 46 Site Number
GRIFFITH. City | IND. State | 46319 Zip
IND# 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: INK SOLVENTS | HAZARD CLASS: FLAMMABLE | WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 003000 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: 12-7-81 Tom Dorsey (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 07 81 54 59

(2) ____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 12/7/81 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

TO 210 K T-50 GRM 12/7/81

SITE COPY - PART 3

001458