HAZARDOUS WASTE MANIFEST

US EPA RECORDS CENTER REGION 5
460643

000104
MANIFEST DOCUMENT NUMBER

13953
SHIPPER NUMBER

Ashland Chemical 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	IND054649090	Young Door Co. 2526 N. Western Ave. Plymouth, In. 46563 219-936-2183	5-21-81
TRANSPORTER # 1	IND016621476	Ashland Chemical Company 1818 Western Ave. South Bend, In. 46613 219-233-0033	5-21-81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DIS-POSAL FACILITY	IND016360265	American Chemical Service 420 South Colfax Griffith, Indiana 46319 219-924-4370	5/21
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)
19 drums DOT 17E		D001	Waste, Solvent, NOS Solvent, adhesvie, gum Lacquer, paint Flammable				Gal.	1045		

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

001921

HAZARDOUS WASTE MANIFEST

000104
MANIFEST DOCUMENT NUMBER

13953
SHIPPER NUMBER

Ashland Chemical 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	IND054649090	Young Door Co. 2526 N. Western Ave. Plymouth, In. 46563 219-936-2183	5-21-81
TRANSPORTER # 1	IND016621476	Ashland Chemical Company 1818 Western Ave. South Bend, In. 46613 219-233-0033	5-21-81
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service 420 South Colfax Griffith, Indiana 46319 219-924-4370	5/22/81
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)
19 drums DOT 17E		D001	Waste, Solvent, NOS Solvent, adhesvie, gum Lacquer, paint Flammable				Gal.	1045		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

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

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

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

TOTAL CHARGES: $

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

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

CERTIFICATION

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

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (If required)

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

GENERATOR'S SIGNATURE DATE

TSDF SIGNATURE [signature] DATE 5/22/81

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TSDF COPY

001922

HAZARDOUS WASTE MANIFEST

000103
MANIFEST DOCUMENT NUMBER

13913
SHIPPER NUMBER

Ashland Chemical 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	IND054649090	Young Door Company 2526 N. Western Ave. Plymouth, In. 46563 219-936-2183	4-13081
TRANSPORTER # 1	IND016621476	Ashland Chemical Company 1818 Western Ave. South Bend, In. 46613 219-233-0033	4-13-81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service 420 South Colfax Griffith, Indiana 46319 219-924-4370	4/14/81
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)
20 drums DOT 17E		D001	~~XXXXXX~~ Waste, Solvent NOS Solvent, adhesive, gum, lacquer, paint Flammable				Gal.	1100		

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 Dunfee DATE 4/14/81

Pumped to 124R 4/14/81 T-63 gm

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TSDF COPY

001923

U410100

TO BE COMPLETED BY WASTE GENERATOR

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

Authorization Number 997371

Wm WRIGLEY JR. CO (Company Name) | 3617 S. ASHLAND (Address) | (312) 523 4040 (Phone Number) | 0316000380 (Generator Number)

City | State | Zip | ILD005120498 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH ST. SOUTH HOLLAND ILL (Hauler Address) | S.W.H. Registration Number 0079021

596 3377 (312) (Phone Number) | ILD069506160 (EPA Number)

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

312-5963377 (Phone Number) | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. (Facility Name) | 430 S COLFAX (Address) | 91808902 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | (312) 768 3400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: INK SOLVENTS | HAZARD CLASS: FLAMMABLE | UN1173 (UN or NA Number) | F003 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 005500 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 Carl A Cal (Authorized Signature) DATE: 5-7-81

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 05 07 81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ✓

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

[signature] (Authorized Signature) DATE: 5 7 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT T-50 5/7/81 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

001924

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Mr Frank Inc — NAME OF CARRIER (SCAC) — 0044/001 CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	INDC51952759	WHITE ADVERTISING CO [illegible] 0500 [illegible]	
TRANSPORTER # 1	ILD0[illegible]506160	MR. FRANK INC 312 [illegible] 3371 [illegible] ST SOUTH HOLLAND ILL 60473	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	INDC16360265	AMERICAN CHEMICAL SERVICE [illegible] 4370 [illegible] COLFAX AVE GRIFFITH IND 46319	11/11/81
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)
		F003	FLAMMABLE LIQUID N.O.S.	1993			GAL	2,365		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

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

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

CERTIFICATION

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

GENERATOR'S SIGNATURE _____ DATE _____

This is to certify acceptance of the hazardous waste shipment.

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

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

TSDF SIGNATURE _____ DATE _____

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To 210 K T-50 GRM 11/11/81

TSDF COPY

001925

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0048068

001926

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
WESTINGHOUSE ELECTRIC CORP	VALLEY CITY REFUSE DISPOSAL	AMERICHEM
Site Address: 4300 36th ST., S.E. GRAND RAPIDS, MI	Transporters Address: 2640 THORNWOOD, SW WYOMING, MI	Facility Address: 420 SO. COLFAX AVENUE GRIFFITH, IN 46319
Phone Number: (616) 949-1050	Phone Number: (616) 538-8499	Phone Number: (219) 924-4370
Generator's Site EPA I.D. Number: MID083690537	Transporter's EPA I.D. Number: MID005855373	Facility Site EPA I.D. Number: IND016360265

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

WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form Solid	Form Liquid	Form Gas	Form Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	WASTE LACQUER LIQUID	FLAMMABLE LIQUID	UN1263	07	1	bbl		X			55	GAL	D001
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

DOT EMERGENCY RESPONSE GUIDE NO. 26

GENERATOR COMPLETES

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① [signature] Date Shipped MO. DAY YEAR 07 04 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 H-213-1

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② [signature] Date(s) Received 09 04 81

Subsequent transporter(s) signature(s) ③

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

TSDF COMPLETES

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

TSDF Signature ④ [signature]

Facility Site EPA I.D. Number IND016360265

☒ Accepted ☐ Rejected

Date Received 09 09 81

Describe any significant discrepancies between manifest and shipment.

TO #20 9/9/81 T-50 gm
TO 204 9/11/81

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

[XX] Act 64 Waste (HAZARDOUS) [ ] Act 136 Waste (OTHER)

MI 0048067

001927

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
WESTINGHOUSE ELECTRIC CORP	VALLEY CITY REFUSE DISPOSAL	AMERICHEM
Site Address	**Transporters Address**	**Facility Address**
4300 36th ST., S.E. GRAND RAPIDS, MI	2640 THORNWOOD, S.W WYOMING, MI	420 SO. COLFAX AVENUE GRIFFITH, IN 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 949-1050	(616) 538-8499	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MID083690537	MID005855373	IND016360265

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

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form Solid	Form Liquid	Form Gas	Form Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	WASTE CEMENT	FLAMMABLE LIQUID	NA1133	07	1	bbl		X			55	GAL	D001
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

DOT EMERGENCY RESPONSE GUIDE NO. 26

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① [signature] — Date Shipped MO. DAY YEAR 09 04 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 H-213-1

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② [signature] — Date(s) Received 09 04 81

Subsequent transporter(s) signature(s) ③

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

TSDF COMPLETES

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

TSDF Signature ④ [signature]

Facility Site EPA I.D. Number IND016360265

[X] Accepted [ ] Rejected

Date Received 09 09 81

Describe any significant discrepancies between manifest and shipment.

TO #20 9/9/81 JM
TO 204 K 6/11/81 T-50

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

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

MI 0029648

Rev. 3/81

001928

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
WESTINGHOUSE ELECTRIC CORP	VALLEY CITY REFUSE DISPOSAL	AMERICHEM
Site Address	**Transporters Address**	**Facility Address**
4300 36th St. SE GRAND RAPIDS, MI	2640 THORNWOOD, S.W. WYOMING, MI	420 SO. COLFAX AVENUE GRIFFITH, IN 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 959-1050	(616) 538-8499	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MID083690537	MID005855373	IND016360265

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

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form Solid	Form Liquid	Form Gas	Form Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	WASTE CEMEMT LIQUID NOS AND WASTE XYLENE MIXTURE	FLAMMABLE LIQUID	UN1133 UN1307	0	7 ~~32~~ 31	bbl		X			~~11760~~ 1705	GAL	D001 F003
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

DOT EMERGENCY RESPONSE GUIDE NO. 26

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① [signature] — Date Shipped MO. DAY YEAR 090481

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 H213-1

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② [signature] — Date(s) Received 090481

Subsequent transporter(s) signature(s) ③

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

TSDF COMPLETES

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

TSDF Signature ④ [signature]

Facility Site EPA I.D. Number IND016360265

[X] Accepted [ ] Rejected

Date Received 090981

Describe any significant discrepancies between manifest and shipment.

TO #20 9/9/81 T-50 JM

TO 204 TC 9/11/81

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

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

0425346 (1–7)

Authorization Number 998471 (8–13)

TO BE COMPLETED BY WASTE GENERATOR

WESTERN ELECTRIC CO. (Company Name) | HAWTHORNE STATION (Address) | 312 4942685 (Phone Number) | 0310510004 (14–24) Generator Number

CHICAGO (City) | ILL. (State) | 60623 (Zip) | ILD074381427 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | 13642 S. KENTON (Hauler Address) CRESTWOOD, ILL. 60445 | S.W.H. Registration Number 0024001 (25–31) | Phone Number | ILT000646810 (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. SERVICES (Facility Name) | P.O. BOX 190 (Address) | 91808902 (39–46) Site Number

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | (312) 7683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | ~~91808902~~ (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: TRICHLOROETHYLENE | HAZARD CLASS: ORM-A | UN 1710 (UN or NA Number) | F001 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 004125 (47–52) 1 GALLONS 2 CU. YDS. (Circle One) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 75 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X [signature] (Authorized Signature) DATE: 10-8-81

WASTE HAULER

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

(1) X James Butler (Authorized Signature) DATE: 10/8/81 (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: 10/8/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 122E T-63 10/22/81 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

#3

SITE COPY - PART 3

001929

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

#1
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Thomas Solvent Co
NAME OF CARRIER (SCAC)

[illegible]
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	[illegible]	[illegible]	[illegible]
TRANSPORTER # 1	[illegible]	Thomas Solvent Co [illegible]	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	[illegible]	[illegible]	[illegible]
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		[illegible]	Waste Methylene Chloride				[illegible]	200 gal	N/A	N/A

SPECIAL HANDLING INSTRUCTIONS

N/A

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: $ N/A

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.
$ N/A 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."
N/A 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

Gerald Piper 2-23-81
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

[illegible]
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] 03-06-81
TSDF SIGNATURE DATE

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FILE COPY

001930

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

#1
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

[illegible]
NAME OF CARRIER (SCAC)

[illegible]
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	EXEMPT	WABASH INC [illegible]	3-23-81
TRANSPORTER # 1	[illegible]	[illegible]	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	[illegible]	[illegible]	3/10/81
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)
5 drums		Fo1 Fo3	waste methylene chloride				PAL	200 gal	N/A	N/A

SPECIAL HANDLING INSTRUCTIONS

N/A

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: $ N/A

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.
$ N/A

*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."
N/A Signature

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

TOTAL CHARGES: $

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

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

CERTIFICATION

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

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

[illegible] 3-23-81
GENERATOR'S SIGNATURE DATE

[illegible] 03-01-81
TSDF SIGNATURE DATE

PUMPED TO [illegible] 3/24/81 T-50 [illegible]

5

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TSDF COPY

001931

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

#3
MANIFEST DOCUMENT NUMBER

03957
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	Exempt small generator	Wabash, Inc., 1375 Swan Street Huntington, IN 46750	
TRANSPORTER # 1	MID-039993902	Thomas Solvent Co., 219-482-9638 5605 Planeview Dr., Fort Wayne, IN 46825	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	INDO-16360265	American Chemical Service, 219-924-4370 420 So. Colfax Griffith, IN 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)
3 drums		F001								
2		F003	Waste Methylene Chloride/Xylene				GAL	~~165~~ 110 gal.	NTA	NTA

SPECIAL HANDLING INSTRUCTIONS

N/A

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 N/A

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

COD N/A Amt: $

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)

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 ☐

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 1/15/81 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 To 204 F 10/8/81 Jm. DATE

5

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TSDF COPY

001932

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0098272

WASTE GENERATOR

Authorization Number 993119

VIKING METAL CABINET CO., INC 5321 W. 65TH STREET
(Company Name) Address

031 6000839
Generator Number

CHICAGO IL 60638
City State Zip

WASTE HAULER(S)

(1) LANDGREBE MOTOR TRANS VALPARAISO, IN
Hauler Name Hauler Address

S.W.H. Registration Number IND 009-842824
ICC #2980

(2) Hauler Name Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 4201 S COLFAX AVENUE
(Facility Name) Address

91808902
Site Number

GRIFFITH IN 46319
City State Zip

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: FLAMMABLE LIQUID

HAZARD CLASS: FLAMMABLE UN1993

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-17-81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 440 (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) Mitchell S. Minelas (Authorized Signature) DATE: 7/21/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

Jim Cabillone (Authorized Signature) DATE: 7/20/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 7/20/81 - TO 126E - T-63 7/21/81 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

001933

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

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

Aut.

WASTE GENERATOR

VIKING METAL CABINET CO, INC 5321 W 65TH ST
(Company Name) Address

CHICAGO IL 60638
City State Zip

WASTE HAULER(S)

(1) LANDGREBE MOTOR TRANS VALPARAISO, IND
Hauler Name Hauler Address S.W.H. Registration Number IA

(2) ICC#29
Hauler Name Hauler Address S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 420 S COLFAX AVENUE 91
(Facility Name) Address Site Nu

GRIFFITH IND 46319 IND016360265
City State Zip

TO BE COMPLETED BY
WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: HAZARD CLASS:

FLAMMABLE LIQUID FLAMMABLE

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: NOV 17, 1981 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 275 (1) GALLONS (Circle One) 2 CU. YDS.

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

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

(1) (Authorized Signature) DATE: 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, 25 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

Unload at dock 11/25/81 GRM
#01 26 Tk T-63 GRM 12/4/81

001934

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		[illegible]	[illegible]
TRANSPORTER # 1	[illegible]	[illegible]	[illegible]
TRANSPORTER # 2 (If required)	—		
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	[illegible]	[illegible]	[illegible]
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		[illegible]	[illegible]					[illegible]		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED
Yes ☐ No ☐

REMIT
C.O.D. TO:
ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

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

$ _____ per _____

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

_____ Signature

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

_____ (Signature of Consignor)

TOTAL CHARGES: $

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

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

CERTIFICATION

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

This is to certify acceptance of the hazardous waste shipment.

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

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

GENERATOR'S SIGNATURE DATE TSDF SIGNATURE DATE

6

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

FILE COPY

001935

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		VERMETTE MACHINE [illegible]	11/13/91
TRANSPORTER # 1	ILT000614510	STEAND TRKG (WESTERN IL) 1364 KENTON [illegible]	11/15/91
TRANSPORTER # 2 (if required)	—		
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND006360265	AMERICAN [illegible] 420 SO COLFAX 924-4570	11/15/91
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	—	ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
17		F001	TRICHLOROETHYLENE					1660GAL		

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

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

Unload at dock 11/20/91 GRM

TSDF COPY To 122 R T-63 6 001936

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0261075

Authorization Number 997832

The Valspar Corp. (Company Name) — 1330 S. Kilbourn Ave. (Address)

ILD081040017 G (Generator Number)

Chicago, Illinois (City) — Illinois (State) — 60623 (Zip)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) — 201 W. 155th St. South Holland, IL (Hauler Address) — S.W.H. Registration Number 0079018

Hauler Name — Hauler Address — S.W.H. Registration Number ILD069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) — 420 S. Colfax, Griffith (Address) — IND016360265 (Site Number)

City — State — Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Sludge — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: — HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE 36,000 (LBS) TONS (circle one)

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/22/81 — (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 Rubino (Authorized Signature) — DATE: 10 22 81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

(Authorized Signature) — DATE: 10 22 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 206X ~~T-8~~ T-50 10/22/81 JPM

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

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

SITE COPY - PART 3

001937

0261076

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

...RATOR

Authorization Number 9 9 7 8 3 2

ILD 081040107

~~ILD 081 04 017~~

Generator Number 0316000445

The Valspar Corp. (Company Name) — 1330 S. Kilbourn Ave. (Address)

Chicago, Illinois (City) — Illinois (State) — 60623 (Zip)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) — 201 W. 155th St. South Holland, IL (Hauler Address) — S.W.H. Registration Number 0 0 7 9 0 1 8

ILD069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) — 420 S. Colfax, Griffith (Address) — IND016360265 Site Number 91808902

City — State — Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Sludge — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Waste Solvents — HAZARD CLASS: Flammable

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

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

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
2 CU. YDS.

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE 12/17/81 — [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: 12 17 81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) — DATE: 12 17 81

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

TO 210 TK T-50 GRM 12/17/81

SITE COPY - PART 3

001938

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0213022

Authorization Number 997832
ILD 081040117

The Valspar Corp. (Company Name) — 1330 S. Kilbourn Ave. (Address)
Chicago, Illinois (City) — Illinois (State) — 60623 (Zip)

0316000445 (Generator Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) — 201 W. 155TH ST SOUTH HOLLAND ILL. (Hauler Address) — S.W.H. Registration Number 0079018
ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

IND 016360265

American Chemical (Facility Name) — 420 S. Colfax, GRIFFITH (Address)
Griffith, (City) — Indiana (State) — Zip

91808902 (Site Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Sludge — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

193

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 26,000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED 003000 — 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: 3/18/81 — (Authorized Signature)

WASTE HAULER

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

(1) (Authorized Signature) — DATE 03/18/81

(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 WEST ACIT 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

001939

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

FIU-12
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Mr. Frank Indiana [illegible] (SCAC) 68229 [illegible]
NAME OF CARRIER (SCAC) CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND 005178355	VALSPAR CORP. P.O. BOX 10330 FT. WAYNE IN. 219/484-9011	[illegible]
TRANSPORTER # 1	ILD 069506160	Mr. Frank Indiana [illegible]	[illegible]
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND [illegible]	American Chemical Services 1205 [illegible] Griffith IN	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		[illegible]	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
[illegible] TANKER	X	WASTE PAINT FLAMMABLE LIQUID UN 1263	1263		GALS.	APPROX. 1200		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

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

PLACARDS TENDERED Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

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

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

CERTIFICATION

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

[signature] 9-2-81
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

[signature]
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (If required)

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

[signature] 9/2/81
TSDF SIGNATURE DATE

TO 207R T-50 9/2/81

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

001940

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0435983

Authorization Number 997788

Valspar Corp. (Company Name) | 200 Sayre St (Address) | 815 987 3715 (Phone Number) | 2010300032 (Generator Number)

Rockford (City) | Ill (State) | 61101 (Zip) | ILD001980135 (EPA Number)

WASTE HAULER(S)

Mr Frank's (Hauler Name) | 201 W 155 St So. Holland Ill. (Hauler Address) | S.W.H. Registration Number 0079009

312 596 3377 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem Service (Facility Name) | PO Box 190 (Address) | 918089 02 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 219 924 4370 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash Solvent Sludge - Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Paint Waste Wash Solvent HAZARD CLASS: Flammable 3 UN1993 (UN or NA Number) D001 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 005000 ~~GALLONS~~ (circle One) CU. YDS.

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E D Ropot (Authorized Signature) DATE: 3-18-81

WASTE HAULER

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

(1) Michael D Martin (Authorized Signature) DATE: 03/19/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

(Authorized Signature) DATE 3/19/81

COMMENTS OR SPECIAL INSTRUCTIONS: To West Agit 3/19/81 T-50 Jim Murphy

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

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

REV. # 3

SITE COPY - PART 3

001941

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0435984

Authorization Number 997788

2010300032

Valspar Corp. (Company Name) | 200 Sayre St. (Address) | 8159873715 (Phone Number) | ~~[illegible]~~ (Generator Number)

Rockford (City) | Illinois (State) | 61101 (Zip) | ILD001980135 (EPA Number)

WASTE HAULER(S)

Mr. Frank's (Hauler Name) | 201 W. 155th St. So. Holland, IL (Hauler Address) | S.W.H. Registration Number 0079023

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) | P.O. Box 190 (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 2199214390 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash Solvent Sludge-Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Paint Waste Wash Solvent Flammable

HAZARD CLASS: UN1993 (UN or NA Number) | D001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 35,000 LBS/TONS (circle one) WEIGHT FOR I.E P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 005000 (1 GALLONS (Circle One) 2 CU. YDS.)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION EM Dupont (Authorized Signature) DATE: 5/13/81

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 05/13/81

(2) (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

(Authorized Signature) DATE: 05/13/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT T-50 5/13/81 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

001942

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0435986

Authorization Number 9 9 7 7 8 8

Valspar Corp. (Company Name) | 201 Sayre St. (Address) | 811 5 9 8 7 3 7 1 5 (Phone Number) | 2 0 1 0 3 0 0 0 3 2 G (Generator Number)

Rockford (City) | Illinois (State) | 61101 (Zip) | I L D 0 0 1 9 8 0 1 3 5 (EPA Number)

WASTE HAULER(S)

Mr. Frank's (Hauler Name) | 201 W. 155th St. So. Holland, IL (Hauler Address) | S.W.H. Registration Number 0079019

312 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 Chem. Service (Facility Name) | P.O Box 190 (Address) | 016360265 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 2 1 9 9 2 1 4 3 9 0 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash Solvent Sludge-Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Paint Waste Wash Solvent Flammable

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

WEIGHT FOR D.O.T. USE ____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 4500 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E Dispot (Authorized Signature) DATE: 6/15/81

WASTE HAULER

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

(1) Gary Pruen (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 WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

J Pinfee (Authorized Signature) DATE: 6 15 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT T-50 6/15/81 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

001943

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0435987

Authorization Number 9 9 7 7 8 8

Valspar Corp. (Company Name) | 200 Sayre St. (Address) | 8 15 9 8 7 3 7 15 (Phone Number) | 2 0 1 0 3 0 0 3 2 G (Generator Number)

Rockford (City) | IL (State) | 61110 (Zip) | I L D 0 0 1 9 8 0 1 3 5 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name) | 201 W. 155th St. So. Holland, IL (Hauler Address) | S.W.H. Registration Number 0079029

3 1 2 (Phone Number) | I L D 0 6 9 5 0 6 1 6 0 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | P.O. Box 190 (Address) | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 2 1 9 9 2 1 4 3 9 0 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash Solvent & Sludge-Xylene | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Paint Waste Wash Solvent | HAZARD CLASS: Flammable | U N 1 9 9 3 (UN or NA Number) | D 0 0 1 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 1 (1 GALLONS (Circle One) 2 CU. YDS.)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 7-15-81

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 07/15/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ✓

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

_____ (Authorized Signature) DATE: 7/15/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST ACT T-50 7/15/81 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

001944

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0435989

Authorization Number 997788

Valspar Corp. (Company Name)	200 Sayre Street (Address)	8159873715 (Phone Number)	2010200032 (Generator Number)
Rockford (City)	Illinois (State) 61101 (Zip)		ILD001980135 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name)	201 W. 155th St., So. Holland, IL (Hauler Address)		S.W.H. Registration Number 0079025
		312 (Phone Number)	ILD069506160 (EPA Number)
(Hauler Name)	(Hauler Address)		S.W.H. Registration Number
		(Phone Number)	(EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMerican Chemical Service (Facility Name)	P.O. Box 190 (Address)			#91808902 (Site Number)
Griffith (City)	Indiana (State)	46319 (Zip)	2199214390 (Phone Number)	IND016360265 (EPA Number)
(Alternate (Facility Name))	(Address)			(Site Number)
(City)	(State)	(Zip)	(Phone Number)	(EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash Solvent & Sludge-Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Paint Waste Wash Solvent

HAZARD CLASS: Flammable

UN1993 (UN or NA Number) D001 (EPA HW Number)

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

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

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E Dispot (Authorized Signature) DATE: 8/24/81

WASTE HAULER

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

(1) Donald H Bult (Authorized Signature) DATE: 08/24/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 8/24/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 204R T-50 8/24/81 JM

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

SITE COPY - PART 3

001945

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0435990

Authorization Number 997788

Valspar Corp. (Company Name) | 200 Sayre Street (Address) | 8159873715 (Phone Number) | 2010300032 (Generator Number)

Rockford (City) | Illinois (State) | 61101 (Zip) | ILD001980135 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name) | 201 W. 155th St., So.Holland, IL (Hauler Address) | S.W.H. Registration Number 0079021 | 312 596-3377 (Phone Number) | ILD069506160 (EPA Number)

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Amer. Chemical Service (Facility Name) | P.O. Box 190 (Address) | 91808902 (Site Number)

/Griffith (City) | Indiana (State) | 46319 (Zip) | 2199214390 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash Solvent & Sludge-Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Paint Waste Wash Solvent Flammable

HAZARD CLASS: UN1993 (UN or NA Number) | D001 (EPA HW Number)

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

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

QUANTITY OF WASTE DELIVERED 005000 GALLONS (Circle One) / CU. YDS.

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 8/28/81

WASTE HAULER

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

(1) Robert Perkins (Authorized Signature) DATE 08/28/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

[signature] (Authorized Signature) DATE: 9/2/81

COMMENTS OR SPECIAL INSTRUCTIONS: T/W SPOTTED 8/28/81 TO 211R T-50 9/2/81

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 3

SITE COPY - PART 3

001946

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0435991

Authorization Number 997788

Valspar Corp. (Company Name) | 200 Sayre Street (Address) | 8159873715 (Phone Number) | 2010300032 G (Generator Number)

Rockford (City) | Ill. (State) | 61101 (Zip) | ILD001980135 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name) | 201 W. 115th St., So. Holland, Ill. (Hauler Address) | S.W.H. Registration Number 0079021

3125963377 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | P.O. Box 190 (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 2199214390 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash Solvent & Sludge-Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION.	HAZARD CLASS.	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	UN1993	D001

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

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

QUANTITY OF WASTE DELIVERED: 005300 1 GALLONS (Circle One) 2 CU. YDS.

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Dispot (Authorized Signature) DATE: 9/10/81

WASTE HAULER

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

(1) Gary Sauer (Authorized Signature) DATE 09/10/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE 9/10/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 210 R T-50 gm 9/10/81

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

001947

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0435996 (1–7)

Authorization Number 9 9 7 7 8 (8–13)

Valspar Corp (Company Name)	200 Sayre St. (Address)	8 1 5 9 8 7 3 7 1 5 (Phone Number, 14)	2 0 1 0 3 0 0 0 3 2 G (Generator Number, 24)
Rockford (City)	ILL (State)	61101 (Zip)	IL D 0 0 1 9 8 0 1 3 5 (EPA Number)

WASTE HAULER(S)

Mr. Frankd (Hauler Name)	201 W. 115th St., So. Holland IL (Hauler Address)	3125963377 (Phone Number)	S.W.H. Registration Number 0079021 (25–31); I L D 0 6 9 5 0 6 1 6 0 (EPA Number)
(Hauler Name)	(Hauler Address)	(Phone Number)	S.W.H. Registration Number (32–38); (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name)	P.O. Box 190 (Address)			9 1 8 0 8 9 0 2 (39–46 Site Number)
Griffith (City)	Indiana (State)	46319 (Zip)	2199214390 (Phone Number)	I N D 0 1 6 3 6 0 2 6 5 (EPA Number)
(Alternate (Facility Name))	(Address)			(39–46 Site Number)
(City)	(State)	(Zip)	(Phone Number)	(EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash Solvent & Sludge Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	U N 1 9 9 3	D 0 0 1

WEIGHT FOR D.O.T. USE 400000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 005500 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E Dropte (Authorized Signature) DATE: 10-21-81

WASTE HAULER

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

(1) Michael Martz (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 10/21/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 210X T-50 10/21/81 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

001948

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0418170

Authorization Number 997788

Valspar Corp. (Company Name)	200 Sayre Street (Address)	815 987 3715 (Phone Number)	2010300032 (Generator Number)
Rockford (City)	IL (State)	61101 (Zip)	ILD001980135 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name)	201 W. 115th St., So. Holland IL (Hauler Address)	S.W.H. Registration Number 0079029
	312 596 3377 (Phone Number)	ILD069506160 (EPA Number)
(Hauler Name)	(Hauler Address)	S.W.H. Registration Number
	(Phone Number)	(EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. (Facility Name)	P.O. Box 190 (Address)			91808902 (Site Number)
Griffith (City)	Indiana (State)	46319 (Zip)	219 921 4390 (Phone Number)	IND016360265 (EPA Number)
(Alternate (Facility Name))	(Address)			(Site Number)
(City)	(State)	(Zip)	(Phone Number)	(EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash Solvent & Sludge Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	UN1993	D001

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 005000 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E Dispot (Authorized Signature) DATE: 11/30/81

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 12/02/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 12/2/81 (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 TO 211 E T-50 GRM 12/2/81

001949

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0418171

Authorization Number 997788

Valspar Corp. (Company Name)	200 Sayre Street (Address)	815 987 3715 (Phone Number)	2010300032 G (Generator Number)
Rockford (City)	Ill. (State)	61101 (Zip)	ILD001980135 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name)	201 W.115th St., So.Holland,IL (Hauler Address)		S.W.H. Registration Number 0079019
		312 596 3377 (Phone Number)	ILD069506160 (EPA Number)
(Hauler Name)	(Hauler Address)		S.W.H. Registration Number
		(Phone Number)	(EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. (Facility Name)	P.O. Box 190 (Address)			91808902 (Site Number)
Griffith (City)	Ind. (State)	46319 (Zip)	219 921 4390 (Phone Number)	IND016360265 (EPA Number)
(Alternate (Facility Name))	(Address)			(Site Number)
(City)	(State)	(Zip)	(Phone Number)	(EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash Solvent & Sludge Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	UN1993	D001

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 4500 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 George Conrad (Authorized Signature) DATE: [redacted]12/15/81

WASTE HAULER

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

(1) [signature] (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

[signature] (Authorized Signature) DATE: 12/15/81

COMMENTS OR SPECIAL INSTRUCTIONS: _____

... HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

001950

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

811229

TO:		FROM:	
T/S/D FACILITY	American Chemical Services	Generator	Urschel Laboratories Incorporated
E.P.A. ID Code No.	IND 016360265	E.P.A. ID Code No.	IND 005068747
Address	420 S. Colfax	Address	2503 Calumet Road
Destination	Griffith, IN 46319	Origin	Valparaiso, IN 46383
Phone	219/924-4370	Phone	219/464-4811

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.)
820 Gals.	Waste, Flammable Liquid N.O.S.		D001	UN1993		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.

HAZARDOUS WASTE

HAZARDOUS WASTE

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination

EMERGENCY RESPONSE INFORMATION

CONTACT Name Robert R. Urschel
Phone 219/464-4811

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

CERTIFICATION

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

Generator Signature _____ Date 12-29-81

TRANSPORTER #1 Municipal Equipment Services Co. E.P.A. ID No. IND 078917861
Address P.O. Box 427
City Wanatah State IN Zip 46390 Phone 219/733-2551

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date 12-29-81

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 12/24/81

T/S/D F COPY

To 204 TK T-50
GRW 1/3/82

001951

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: X 151

TO: T/S/D/F American Chemical Recovery	FROM: Generator Urschel Labratories
E.P.A. ID Code No. IND 016360265	E.P.A. ID Code No. IND 005068747
Address 420 S. Colfax	Address 2503 Calumet
Destination Griffith, IN. 46319	Origin Valparaiso, IN. 46383
Phone 219-924-4370	Phone 219-464-4811

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.)
1000 Gals	Waste, Flammable liquid N.O.S.		D001	UN1993		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/F _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name Rick Hills Robert Urschel
Phone 219-464-4811
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 Municipal Equipment Services Co. E.P.A. ID No. IND078917861
Address P.O. Box 427
City Wanatah State IN Zip 46390 Phone 219-733-2551

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

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 To 205X T-50 9/14/81 gm Date 9/16/81

HAZARDOUS WASTE

HAZARDOUS WASTE

T/S/D/F COPY

001952

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

0332499

Authorization Number 998728

Uppco, Inc (Company Name) — 5610 W. Bloomingdale (Address)

Chgo (City) — Ill. (State) — 60630 (Zip)

~~0316~~000601 G (Generator Number)

WASTE HAULER(S)

Landgrebe Motor Trans. (Hauler Name) — 3009 S. Shields (Hauler Address) — Chgo — S.W.H. Registration Number

LMT [signature] (Hauler Name) — Valparaiso, Ind 46383 (Hauler Address) — Fed. # IND. 009842824 ICC. 2980 — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

Griffith (City) — Ind. (State) — 46319 (Zip) — IND016360765

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 _____ LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 1155 (47–52)

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

METHOD OF SHIPMENT (Circle One) 21 DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION 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 — Edward Burbach (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 Mtr. [signature] (21) (Authorized Signature) — DATE: 11/30/81 (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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) — DATE: 12/1/81 (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

Unload at dock 12/1/81 GRH
To 124 TK 7-63 GRH 11/2/81

SITE COPY - PART 3

001953

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

81-1
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

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

0079-021
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IAD041580721	Union Carbide Corp, P.O. Box 250, Centerville, Ia. 52544, 515-856-6343	6-8-81
TRANSPORTER # 1	ILD069506160	MR. FRANK, INC. 201 W. 155th St. So. Holland, Ill. 60473, 312-596-3377	6-8-81
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical, 420 So. Colfax, Griffith, Ind.	6/9/81
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 Tanker	X	D001 F002 F003 F005	Ink Wastes & Solvents	1993		40		5,500 GALLONS		

SPECIAL HANDLING INSTRUCTIONS In case of spill, absorb w/sawdust, collect in barrels

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

COMMENTS

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

PLACARDS TENDERED Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES

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

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

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

_____ Signature

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

_____ (Signature of Consignor)

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

CERTIFICATION

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

GENERATOR'S SIGNATURE 6-8-81 DATE

This is to certify acceptance of the hazardous waste shipment.

6-8-81
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (If required)

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

TO EAST AGIT T-50 6/9/81

TSDF SIGNATURE DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

001954

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

81-2
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

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

0079-021
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #.	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IAD041580721	Union Carbide Corp, P.O. Box 250, Centerville, Ia. 52544, 515-856-6343	6-15-81
TRANSPORTER # 1	ILD069506160	Mr. Frank, Inc. 201 W. 155th St. So.Holland, Ill. 60473, 312-596-3377	6-15-81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical, 420 So. Colfax, Griffith, Ind	6/16/81
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 Tanker	X	D001 F002 F003 F005	Ink Wastes & Solvents	1993		40				

SPECIAL HANDLING INSTRUCTIONS In case of spill, absorb w/sawdust, collect in barrels

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

COMMENTS

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

PLACARDS TENDERED
Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

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

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

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

TOTAL CHARGES: $

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

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

CERTIFICATION

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

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

GENERATOR'S SIGNATURE 6-15-81 DATE

TSDF SIGNATURE 6-16-81 DATE

TO WEST AGIT T-50 6/16/81 [illegible]

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

001955

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

81-3
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

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

0079-021
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IAD041580721	Union Carbide Corp., P.O. BOX 250, Centerville, Ia 52544, 515-856-6343	8-10-81
TRANSPORTER # 1	ILD069506160	Mr. Frank, Inc. 201 W. 155th St. So. Holland, Ill. 60473, 312-596-3377	8-10-81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical, 420 So. Colfax, Griffith, Ind.	8/11/81
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 Tanker	X	D001 F002 F003 F005	Ink Wastes & Solvents	1993		40	gals	5200		

SPECIAL HANDLING INSTRUCTIONS In case of spill, absorb w/sawdust, collect in barrels

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

COMMENTS

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

PLACARDS TENDERED
Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

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

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

CERTIFICATION

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

[signature] 8-10-81
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

[signature]
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

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

[signature] 8/11/81
TSDF SIGNATURE DATE

TO 210 E T-50 8/11/81 [illegible]

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

001956

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

81-4
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

NR+ FRANK, INC.
NAME OF CARRIER (SCAC)

0079-021
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IAD041580721	Union Carbide Corp., P.O. BOX 250, Centerville, Ia. 52544, 515-856-6343	10-26/81
TRANSPORTER # 1	ILD069506160	Mr. Frank, Inc., 201 W. 155th St., So. Holland, Ill. 60473 312-596-3377	10/26/81
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical, 420 So. Colfax, Griffith, Ind.	[illegible]
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1 Tanker	X	D001 F002 F003 Ink Wastes & Solvents F005	1993		gals	4,800		

SPECIAL HANDLING INSTRUCTIONS In case of spill, absorb w/sawdust, collect in barrels

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]
(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.

[signature] 10/26/81
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

[signature] 10/26/81
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

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

[signature] 10/27/81
TSDF SIGNATURE DATE

TO 210R T-50 10/27/81 gm

2

001951

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0375061
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 992581 (8–13)

312-442-7400

UOP INC - PROCESS DIVISION (Company Name) | 8400 JULIET ROAD (Address)

MC COOK (City) | IL (State) | 60525 (Zip)

031740001G (14–24) Generator Number

ILD990848376

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) | 201 W 155 SOUTH HOLLAND, IL 60473 (Hauler Address) | S.W.H. Registration Number 0079019 (25–31)

312-596-3377 ILD069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

312-768-3400

AMERICAN CHEMICAL SERVICE (Facility Name) | 4205. COLFAX, P.O. BOX 190 (Address) | 91808902 (39–46) 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)

UN1993 D001

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 _____ 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. (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: 7-22-81

Janice V. McGuffee (Authorized Signature)

WASTE HAULER

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

(1) Gary Queen (Authorized Signature) DATE: 07/22/81 (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: 07/22/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 203K T-50 7/22/81 gjm

J. McGuffee

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

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

SITE COPY - PART 3

001958

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

0375056

TO BE COMPLETED BY WASTE GENERATOR

SPECIAL WASTE HAULING MANIFEST Phone.

Authorization Number 992581

Universal Oil Products (Company Name) — 8400 Joliet Road (Address) — 3124427400

McCook (City) — Illinois (State) — 60525 (Zip)

031174 0001 G (Generator Number)

ILD 990848376

WASTE HAULER(S)

Mr. FRANKS, Inc. (Hauler Name) — 201 W. 155th St. South Holland, Il. 60473 (Hauler Address) — S.W.H. Registration Number 0079021 ILD069508160 EPA No.

Phone 3125963377

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — 420 S. Colfax (P.O. Box 190) (Address) — IND016360265 — 91808902 (Site Number)

Phone

Griffith (City) — Indiana (State) — 46319 (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: Waste Solvent

HAZARD CLASS: Flamable Liquid NOS UN# UN 1993 EPA# 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 TANK TRUCK OPEN TRUCK OTHER (Specify)

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: July 20, 1981 — James V. McGuffey (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 29 81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

_____ (Authorized Signature) — DATE: 7/29/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST ACIT T-50 7/20/81 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

001959

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0520404

Authorization Number 992581

Universal Oil Products (Company Name) | 8400 Joliet Road (Address) | 3124427400 (Phone Number) | 0311740001 (Generator Number)

McCook (City) | Illinois (State) | 60525 (Zip) | ILD990848376 (EPA Number)

WASTE HAULER(S)

Mr. FRANK, Inc. (Hauler Name) | 201 W. 155th St. South Holland, Illinois 60473 (Hauler Address) | S.W.H. Registration Number 0079021

3125963377 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax (P.O. Box 190) (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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: Waste Solvent

HAZARD CLASS: Flamable ~~[illegible]~~

UN 1307 ~~UN1993~~ UN or NA Number

F003 ~~D001~~ EPA HW Number

WEIGHT FOR D.O.T. USE 32000 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 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 James V. McGuffey (Authorized Signature) DATE: 8-20-81

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) Donald H Bult (Authorized Signature) DATE: 08/20/81

(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:

(Authorized Signature) DATE: 8/20/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST 211K T-50 8/20/81 JJM

REV. # 3 ... 7 / 782-3637 ... PART - 1 GENERATOR ... IEPA ... E COPY - ...

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

PART 3

001960

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0520402 (1–7)

Authorization Number 992581 (8–13)

Universal Oil Products (Company Name) | 8400 Joliet Road (Address) | 3124427400 (Phone Number) | 0311740001 G (14–24) Generator Number

McCook (City) | Illinois (State) | 60525 (Zip) | ILD990848376 (EPA Number)

WASTE HAULER(S)

Mr. FRANK, Inc. (Hauler Name) | 201 W. 155th st, South Holland, Il. 60473 (Hauler Address) | S.W.H. Registration Number 0079029 (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 (P.O. Box 190) (Address) | 91808902 (39–46) Site Number

Griffith (City) | Indiana (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Waste Solvent | HAZARD CLASS: Flamable Liquid | UN1090 (UN or NA Number) | D001 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED 004000 (47–52) (1 GALLONS / 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 James V. McGuffey (Authorized Signature) DATE: 8-20-81

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) Robert Rubens (Authorized Signature) DATE: 08/20/81 (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 WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

J Murphy (Authorized Signature) DATE: 8/20/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 203X T-50 8/20/81 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

001961

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0328363 (1–7)

Authorization Number 998434 (8–13)
FED # ILD096466701

TRI STATE TANK WASH, INC. (Company Name) — 17550 Fritz Drive (Address)
Lansing (City) — Illinois (State) — 60438 (Zip)

0311590003 (14–24) Generator Number

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) — 201 W 155th Street (Hauler Address)
South Holland, IL 60473

S.W.H. Registration Number 0029018 (25–31)
FED # 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)

91808902 (39–46) Site Number
FED # IND016360265

City — State — 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 — 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 002500 (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: 2-2-81 F905 Ralph Brooks (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 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: 02/02/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

To 124/E 2/2/81 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

001962

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0416553

Authorization Number 998434

TRI STATE TANK WASH, INC. (Company Name) 17550 Fritz DR. (Address) 3124745601 (Phone Number) 0311590003 (Generator Number)

Lansing (City) Illinois (State) 60438 (Zip) ILD096466701 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) 201 W 155th Street (Hauler Address) South Holland, IL 60473 ~~3125963377~~ (Phone Number) S.W.H. Registration Number 0079023 ILD069506160 (EPA Number)

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) 420 S. Colfax (Address) 918089 02 (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: Flamable Liquid WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Flamable Liquid HAZARD CLASS: Flamable UN1933 (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: 004800 (1 GALLONS (Circle One) 2 CU. YDS.)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 3-9-81

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 03 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 WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: 3/9/81

BOB MAUCK (Authorized Signature) 3640 TO WESTAGITE T-50 Jim Mund DATE: 3 09 81

COMMENTS OR SPECIAL INSTRUCTIONS: accepted 3640 gals. Rejected 6160 gals Heavy Material - Not Pumpable. Bob Mauck

IN ILLINOIS: 217 / 782-3637 *24 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

001963

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0416568

Authorization Number 998434

TRI STATE TANK WASH INC (Company Name) | 17550 Fritz Drive (Address) | 312/474-5601 (Phone Number) | 0311590003 (Generator Number)

Lansing (City) | Illinois (State) | 60438 (Zip) | ILD096466701 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W 155th Street (Hauler Address) | S.W.H. Registration Number 0029004

So. Holland, IL 60473 | 312/596-3377 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

Griffith (City) | Indiana (State) | 46319 (Zip) | Phone Number | IND016360261 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Flamable Liquid 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: Flamable Liquid

HAZARD CLASS: Flamable

UN1933 (UN or NA Number) | F005 (EPA HW Number)

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

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

QUANTITY OF WASTE DELIVERED: 003000 (1 GALLONS (Circle One) / 2 CU. YDS.) 1

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION x Ralph Brown (Authorized Signature) DATE: 5-15-81

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) Ronald Bridgewater (Authorized Signature) DATE: 5/15/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

F Dunlee (Authorized Signature) DATE: 5/15/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 207 T-50 5/15/81 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

001964

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0416579 (1–7)

Authorization Number 998434 (8–13)

TRI STATE TANK WASH INC (Company Name) | 17550 Fritz Drive (Address) | 312/474-5601 (Phone Number) | 0311590003 G (14–24) Generator Number

Lansing (City) | Illinois (State) | 60438 (Zip) | ILD096466701 EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W 155th Street (Hauler Address) | S.W.H. Registration Number 0079/005 (25–31)

So. Holland, IL 60473 | 312/596-3377 (Phone Number) | ILD069506160 EPA Number

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 S. Colfax (Address) | 91808902 (39–46) Site Number

Griffith (City) | Indiana (State) | 46319 (Zip) | Phone Number | IND016360261 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: Flamable Liquid 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: Flamable Liquid Solvents & Resins | HAZARD CLASS: Flamable | UN1933 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 003000 (47–52) GALLONS (Circle One) / 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (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) Rosa G. Birlguenter (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.

[signature] (Authorized Signature) DATE: 10/6/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 211R T-50 10/6/81 JGM

IN ILLINOIS: 217 / 782-3637 *24 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

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NUMBER

E-3604

SHIPPER NUMBER

Mr. Frank INC.

NAME OF CARRIER (SCAC)

0079015

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND-053656781	Triangle Home Prod. 2111 Ind. Pkwy. ELKHART, IND. 46516 219-294-5511	
TRANSPORTER # 1	ILD-069506160	Mr. Frank 201 W. 155th St. So. Holland Ill.60473 312-596-3377	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DIS-POSAL FACILITY	IND-016360265	American Chemical Service, Inc. P.O. Box 190 Griffith, Ind. 46319 219-924-4370 312-768-3400	
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)
12 D[illegible]	X	F005	Flammable Liquid N.O.S.	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: $

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

$ _____ per _____

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

_____ Signature

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

_____ (Signature of Consignor)

FREIGHT CHARGES

FREIGHT PREPAID except when box at right is checked

Check box if charges are to be collect ☐

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

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns

CERTIFICATION

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

This is to certify acceptance of the hazardous waste shipment.

[signature] 2-25-81

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

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

[signature] [signature]

GENERATOR'S SIGNATURE DATE TSDF SIGNATURE DATE

UNLOADED 2/25/81 AT DOCK PUMPED TO 109E 2/28/81 T-63 [signature]

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TSDF COPY

001966

HAZARDOUS WASTE MANIFEST

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	IND-053656781	Triangle Home.Prod.2111 Ind. Pkwy. Elkhart,Ind.46516 219-294-5511	
TRANSPORTER # 1	ILT-000646810		
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND-016360265	American Chemical Service,Inc. P.O.Box 190 Griffith,Ind. 46319. 219-924-4370 312-768-3400	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

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

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

TRAILER SPOTTED 8/27/81. TO 210R T-50 8/24/81

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TSDF COPY

001967

HAZARDOUS WASTE MANIFEST

0003
MANIFEST DOCUMENT NUMBER

V-10002
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	OHD002493039	Teleflex, 1265 Industrial Ave. Van Wert, O. 45891	
TRANSPORTER # 1	MID03993902	419/238-0070 Thomas Solvent 5605 Plane View Dr. Ft. Wayne, Ind. 46825	
TRANSPORTER # 2 (if required)		219/482-9638	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service 420 S. Colfax Griffin, Ind 46319	6/3/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		219/924-4370	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
2 (55 gal drums)		F 005	Waste Paint Thinning Compound	1142	~~5~~ 2	-		110 gal.		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED
Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

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

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

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

TOTAL CHARGES: $

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

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

CERTIFICATION

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

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

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

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

TSDF SIGNATURE DATE

TO 142K T-63 6/3/81 9pm

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TSDF COPY

001968

HAZARDOUS WASTE MANIFEST

0002
MANIFEST DOCUMENT NUMBER

V-10001
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	OHD002493039	Teleflex, 1265 Industrial Ave., Van Wert, O. 45891 419/238-0070	
TRANSPORTER # 1	MID03993902	Thomas Solvent 5605 Plane View Dr. Ft. Wayne, Ind. 46825 219/482-9638	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND)163602655	American Chemical Service 420 S. Colfax Griffin, Ind. 46319 219/924-4370	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
5 (55 gal drums)		F 0 0 5	Waste Paint Thinning Compound	1142	5	-		275 gal.		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED
Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

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

[signature] 4/7/81
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.

[signature] 4/14/81
TSDF SIGNATURE DATE

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TO 124 Tr 4/14/81 T-63 [initials]

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

001969

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NO. 12003-0

001970

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE EPA I.D. NO. IND 06440054

NAME THERMARK CORP

ADDRESS 650 W 69TH PL SCHERERVILLE, IND

PRODUCER ORDER NO 30402 SHIPMENT DATE 12 8 80 (mo da yr)

PERSON TO CONTACT KITTY DECKER PHONE 322-5030

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA) SPENT SOLVENTS + PAINT RESIDUE

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☒ Paint sludge
5. ☒ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Mud and water
15. ☐ Brine

☐ Other (Specify)

F005

MAJOR COMPONENTS

		CONCENTRATION Upper %	Lower %
1	ACRYLIC + VINYL RESIN	5%	1%
2	TOLUENE	30%	20%
3	METHYL ETHYL KETONE	60%	50%
4	ACETONE	10%	5%
5			
6			

Hazardous Properties of Waste: pH ____ ☐ none ☒ toxic ☒ flammable ☐ corrosive ☐ explosive

Bulk Volume: 4500-5000 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other (specify)

Containers: 1 (Number) ☐ drums ☐ cartons ☐ bags ☒ other TANKER (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other (specify)

Special Handling Instructions (if any):

C. NAME OF HAULER MR FRANK

BUSINESS ADDRESS 201 W 155th St. S. HOLLAND - ILL

NAME OF PROCESSOR AMERICAN CHEMICAL

SITE ADDRESS COLFAX AVE GRIFFITH - IND

D. GENERATOR CERTIFICATION:

This is to certify 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
K. DECKER - FOREMAN	K Decker	12/8/80

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) EPA I.D. NO. ILD067506160

A. NAME Mr Frank Inc

ADDRESS 201 W 155th ST. So Holland Ill

TELEPHONE NUMBER 596 3377 PICK-UP DATE 12 8 80 (mo da yr)

B. HAULER JOB NUMBER 0079/023

C. VEHICLE LICENSE NO 19293 STATE Ill

D. HAULER CERTIFICATION:

This is to certify that 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	12-8-80

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY) EPA I.D. NO. IND016360265

A. NAME AMERICAN CHEMICAL

ADDRESS 420 SOUTH COLFEX, GRIFFITH

TELEPHONE NUMBER ____ ACCEPTANCE DATE 12 8 80 (mo da 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 that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE
FOSTER CUFFEE	[signature]	12 8 80

Keep one copy for your records. Send two (2) copies to Generator of Waste.

TO EAST AGIT Tr 12/8/80

JM T-63

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NO. 01101

001971

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE — EPA I.D. NO. IND016360265

NAME: THERMACK CORP

ADDRESS: 650 W 67th Pl. Schererville, IND

PRODUCER ORDER NO: _____ SHIPMENT DATE: 1 (mo) 17 (da) 81 (yr)

PERSON TO CONTACT: Kitty Decker PHONE: 322-5036

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA): _____

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☒ Paint sludge
5. ☒ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Mud and water
15. ☐ Brine

☐ Other (Specify) _____

MAJOR COMPONENTS	CONCENTRATION Upper %	Lower %
1 Acrylic + Vinyl Resins	5%	1%
2 [illegible]	30%	20%
3 [illegible]	60%	50%
4 [illegible]	10%	5%
5		
6		

Hazardous Properties of Waste: pH _____ ☐ none ☒ toxic ☒ flammable ☐ corrosive ☐ explosive

Bulk Volume: 5000 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other _____ (specify)

Containers: 1 (Number) ☐ drums ☐ cartons ☐ bags ☒ other Tank x (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other _____ (specify)

Special Handling Instructions (if any): _____

C. NAME OF HAULER: Mr. Frank

BUSINESS ADDRESS: [illegible] 135th St. [illegible] Hollands - ILL

NAME OF PROCESSOR: American Chemical

SITE ADDRESS: [illegible] Griffith - IND

D. GENERATOR CERTIFICATION:

This is to certify 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
K. Decker - Foreman	K. Decker	1/19/81

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) — EPA I.D. NO. [illegible]

A. NAME: Mr. Frank

ADDRESS: [illegible]

TELEPHONE NUMBER: 312 [illegible] PICK-UP DATE: 1 (mo) 19 (da) 81 (yr)

B. HAULER JOB NUMBER: [illegible]

C. VEHICLE LICENSE NO: [illegible] STATE: [illegible]

D. HAULER CERTIFICATION:

This is to certify that 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 [illegible]	[illegible]	[illegible]

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY)

EPA I.D. NO. [illegible]

A. NAME: American Chemical

ADDRESS: 420 S. Colfax Griffith, IND.

TELEPHONE NUMBER: _____ ACCEPTANCE DATE: 1 (mo) 19 (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 PROCESSING FACILITY. IT WAS ACCEPTABLE MATERIAL FOR PROCESSING UNDER THE TERMS OF FEDERAL, STATE, AND LOCAL REGULATIONS. I certify that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE
[illegible]	[illegible]	[illegible]

Keep one copy for your records. Send two (2) copies to Generator of Waste.

TO WEST AGIT R. 1/19/81 T-50

Jim Murphy

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

MANIFEST DOCUMENT NO. 02105

001972

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE — EPA I.D. NO. IND064400054

NAME: THERMARK CORP

ADDRESS: 650 W 67th PL SCHERERVILLE, IND

PRODUCER ORDER NO: _____ SHIPMENT DATE (mo/da/yr): 2 5 81

PERSON TO CONTACT: K. DECKER PHONE: 322-5030

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA): SPENT SOLVENT + PAINT RESIDUE

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☒ Paint sludge
5. ☒ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Later waste
14. ☐ Mud and water
15. ☐ Brine

☐ Other (Specify) _____

MAJOR COMPONENTS	CONCENTRATION Upper %	CONCENTRATION Lower %
1 Acrylic - Vinyl Resins	5%	1%
2 TOLUENE	50%	20%
3 METHYL ETHYL KETONE	60%	50%
4 ACETONE	10%	5%
5		
6		

Hazardous Properties of Waste: pH _____ ☐ none ☒ toxic ☒ flammable ☐ corrosive ☐ explosive

Bulk Volume: 5000 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other _____ (specify)

Containers: _____ (number) ☐ drums ☐ cartons ☐ bags ☒ other TANKER (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other _____ (specify)

Special Handling Instructions (if any): _____

C. NAME OF HAULER: MR FRANK

BUSINESS ADDRESS: 201 W 155th St. S. HOLLAND, ILL

NAME OF PROCESSOR: AMERICAN CHEMICAL

SITE ADDRESS: COLFAX AVE, GRIFFITH

D. GENERATOR CERTIFICATION:

This is to certify 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
K. DECKER-FORTMAN	K. Decker	2/4/81

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) — EPA I.D. NO. ILD [illegible]

A. NAME: MR FRANK

ADDRESS: 201 W. 155 St. S. Holland

TELEPHONE NUMBER: [illegible] PICK-UP DATE (mo/da/yr): 2 5 81

B. HAULER JOB NUMBER: [illegible]

C. VEHICLE LICENSE NO: [illegible] STATE: ILL

D. HAULER CERTIFICATION:

This is to certify that the waste described in Part I/D 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
[illegible]	[illegible]	2 5 81

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY) — EPA I.D. NO. IND [illegible]

A. NAME: [illegible]

ADDRESS: [illegible] COLFAX AVE [illegible]

TELEPHONE NUMBER: 219 924 4370 ACCEPTANCE DATE (mo/da/yr): 2 5 81

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 PROCESSING FACILITY. IT WAS ACCEPTABLE MATERIAL FOR PROCESSING UNDER THE TERMS OF FEDERAL, STATE, AND LOCAL REGULATIONS. I certify that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE
F. DUNFEE	F. Dunfee	2/5/81

Keep one copy for your records. Send two (2) copies to Generator of Waste.

TO EAST AGIT R T-50 Jim Murphy 2/5/81

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

MANIFEST DOCUMENT NO. 03111

001973

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE EPA I.D. NO. IND064400054

NAME [illegible] Corp.

ADDRESS [illegible]

PRODUCER ORDER NO _____ SHIPMENT DATE 3 11 81 (mo da yr)

PERSON TO CONTACT K. Dicker PHONE 322-[illegible]

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA) Spent Solvent + Paint Residue

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☒ Paint sludge
5. ☒ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Mud and water
15. ☐ Brine

☐ Other (Specify) _____

MAJOR COMPONENTS

		CONCENTRATION Upper %	Lower %
1	[illegible]	[illegible]	[illegible]
2	[illegible]	[illegible]	[illegible]
3	[illegible]	[illegible]	[illegible]
4	[illegible]	[illegible]	[illegible]
5			
6			

Hazardous Properties of Waste: pH _____ ☐ none ☒ toxic ☒ flammable ☐ corrosive ☐ explosive

Bulk Volume: 5000 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other _____ (specify)

Containers: _____ (number) ☐ drums ☐ cartons ☐ bags ☒ other Tank (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other _____ (specify)

Special Handling Instructions (if any): _____

C. NAME OF HAULER N. Frank

BUSINESS ADDRESS [illegible]

NAME OF PROCESSOR [illegible]

SITE ADDRESS [illegible]

D. GENERATOR CERTIFICATION:

This is to certify 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
K. Dicker [illegible]	K. Dicker	3/11/81

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) EPA I.D. NO. [illegible]

A. NAME [illegible]

ADDRESS [illegible]

TELEPHONE NUMBER [illegible] PICK-UP DATE [illegible] (mo da yr)

B. HAULER JOB NUMBER [illegible]

C. VEHICLE LICENSE NO [illegible] STATE [illegible]

D. HAULER CERTIFICATION:

This is to certify that 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
[illegible]	[illegible]	[illegible]

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY) EPA I.D. NO. IND016360265

A. NAME American Chemical Service Inc

ADDRESS 420 So. Colfax Griffith In

TELEPHONE NUMBER 219924-4270 ACCEPTANCE DATE 3 11 81 (mo da 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 PROCESSING FACILITY. IT WAS ACCEPTABLE MATERIAL FOR PROCESSING UNDER THE TERMS OF FEDERAL, STATE, AND LOCAL REGULATIONS. I certify that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE
Bob Mauck	Bob Mauck	[illegible] 81

Keep one copy for your records. Send two (2) copies to Generator of Waste.

TO WEST AGIT R 3/11/81 T-50

Jim Murphy

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

MANIFEST DOCUMENT NO. 02127

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE — EPA I.D. NO. IND 06400054

NAME: Thermark Corp.

ADDRESS: 650 W 67th Pl. Schererville, Ind

PRODUCER ORDER NO: _____ SHIPMENT DATE: 2 27 81 (mo da yr)

PERSON TO CONTACT: K. Decker PHONE: 219-322-5030

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA): Spent Solvent + Paint Residue

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☒ Paint sludge
5. ☒ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Mud and water
15. ☐ Brine

☐ Other (Specify) _____

MAJOR COMPONENTS

		CONCENTRATION Upper %	Lower %
1	Acrylic + Vinyl Resins	5%	1%
2	Toluene	30%	20%
3	Methyl Ethyl Ketone	60%	50%
4	Acetone	10%	5%
5			
6			

Hazardous Properties of Waste: pH _____ ☐ none ☒ toxic ☒ flammable ☐ corrosive ☐ explosive

Bulk Volume: 5000 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other _____ (specify)

Containers: _____ (Number) ☐ drums ☐ cartons ☐ bags ☒ other TANKER (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other _____ (specify)

Special Handling Instructions (if any): _____

C. NAME OF HAULER: Mr. Frank

BUSINESS ADDRESS: 201 W 155th St. S. Holland, Ill

NAME OF PROCESSOR: American Chemical

SITE ADDRESS: Colfax Ave, Griffith

D. GENERATOR CERTIFICATION:

This is to certify 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
K. Decker - Foreman	K. Decker	2/27/81

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) — EPA I.D. NO. ILD 069506160

A. NAME: Mr. Frank Inc.

ADDRESS: 201 W. 155th St. So. Holland Ill 60473

TELEPHONE NUMBER: 312 (596-3377) PICK-UP DATE: 02 27 81 (mo da yr)

B. HAULER JOB NUMBER: _____

C. VEHICLE LICENSE NO: _____ STATE: Illinois

D. HAULER CERTIFICATION:

This is to certify that 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 Drun	[signature]	2/27/81

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY)

EPA I.D. NO. IND 016360265

A. NAME: American Chemical Services.

ADDRESS: 420 South Colfax Griffith Ind

TELEPHONE NUMBER: 219 924-1370 ACCEPTANCE DATE: 02 27 81 (mo da 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 that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE
Mike Burgess Spvr	[signature]	Ind. 2/27/81

Keep one copy for your records. Send two (2) copies to Generator of Waste.

TO WEST AGIT K T-50 2/27/81

Jim Murphy

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

001974

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NO. [illegible]

001975

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE — EPA I.D. NO. IND004400054

NAME: [illegible]

ADDRESS: [illegible]

PRODUCER ORDER NO: _____ SHIPMENT DATE: 3 30 81 (mo da yr)

PERSON TO CONTACT: [illegible] PHONE: [illegible]

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA): Solvent Spent [illegible] + Paint Residue

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☒ Paint sludge
5. ☒ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Mud and water
15. ☐ Brine

☐ Other (Specify) _____

MAJOR COMPONENTS	CONCENTRATION Upper %	CONCENTRATION Lower %
1 [illegible]	37	1
2 Toluene	30	20
3 [illegible]	[illegible]	[illegible]
4 [illegible]	[illegible]	5
5		
6		

Hazardous Properties of Waste: pH _____ ☐ none ☒ toxic ☒ flammable ☐ corrosive ☐ explosive

Bulk Volume: [illegible] ☒ gal ☒ tons ☐ barrels (42 gal) ☐ other _____ (specify)

Containers: _____ (number) ☐ drums ☐ cartons ☐ bags ☒ other Tank (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other _____ (specify)

Special Handling Instructions (if any): _____

C. NAME OF HAULER: Mr Frank

BUSINESS ADDRESS: [illegible]

NAME OF PROCESSOR: [illegible]

SITE ADDRESS: [illegible]

D. GENERATOR CERTIFICATION:

This is to certify 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
[illegible]	[illegible]	[illegible]

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) — EPA I.D. NO. _____

A. NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____ PICK-UP DATE: ___ (mo) ___ (da) ___ (yr)

B. HAULER JOB NUMBER: _____

C. VEHICLE LICENSE NO: _____ STATE: _____

D. HAULER CERTIFICATION:

This is to certify that 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

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY)

EPA I.D. NO. _____

A. NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____ ACCEPTANCE DATE: 3 30 81 (mo da 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 processing facility. It was acceptable material for processing under the terms of federal, state, and local regulations. I certify that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE
FDUNFEE	[illegible]	3/30/81

Keep one copy for your records. Send two (2) copies to Generator of Waste.

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NO. 03130

001976

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE — EPA I.D. NO. IND064400054

NAME: THERMARK CORP.

ADDRESS: 650 W 17th St. Schererville, IN

PRODUCER ORDER NO: _____ SHIPMENT DATE (mo/da/yr): 3 30 81

PERSON TO CONTACT: T. DEEKER PHONE: 322-5030

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA): SPENT ~~PAINT~~ SOLVENT + PAINT RESIDUE

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☒ Paint sludge
5. ☒ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Mud and water
15. ☐ Urine

☐ Other (Specify) _____

MAJOR COMPONENTS

		CONCENTRATION Upper %	Lower %
1	Acrylic + Vinyl Resins	35%	1%
2	Toluene	30%	20%
3	Methyl Ethyl Ketone	60%	50%
4	Acetone	10%	5%
5			
6			

Hazardous Properties of Waste: pH _____ ☐ none ☒ toxic ☒ flammable ☐ corrosive ☐ explosive

Bulk Volume: 5000 Gal. ☒ gal ☒ tons ☐ barrels (42 gal) ☐ other (specify)

Containers: _____ (number) ☐ drums ☐ cartons ☐ bags ☒ other TANKER (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other (specify)

Special Handling Instructions (if any): _____

C. NAME OF HAULER: MR FRANK

BUSINESS ADDRESS: 201 W 155th St. S Holland, Ill

NAME OF PROCESSOR: AMERICAN CHEMICAL

SITE ADDRESS: Calumet City, Illinois

D. GENERATOR CERTIFICATION:

This is to certify 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
T. DEEKER (Foreman)	T. Deeker	3/30/81

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) — EPA I.D. NO. [illegible]

A. NAME: MR. FRANK

ADDRESS: 201 W. 155th St. S. Holland

TELEPHONE NUMBER: 596-2777 PICK-UP DATE (mo/da/yr): 3 30 81

B. HAULER JOB NUMBER: [illegible]

C. VEHICLE LICENSE NO: 33 [illegible] STATE: [illegible]

D. HAULER CERTIFICATION: [illegible]

This is to certify that 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
[illegible]	[illegible]	[illegible]

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY)

EPA I.D. NO. [illegible]

A. NAME: AMERICAN CHEMICAL

ADDRESS: 420 S. Colfax Ave

TELEPHONE NUMBER: _____ ACCEPTANCE DATE (mo/da/yr): 3 30 81

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 processing facility. It was acceptable material for processing under the terms of federal, state, and local regulations. I certify that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE
F DUNFEE	F Dunfee	3/30/81

Keep one copy for your records. Send two (2) copies to Generator of Waste.

TO 142X 3/30/81 T-63 Jim Mundy

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

MANIFEST DOCUMENT NO. 5/5-81

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE: EPA I.D. NO. IND 06440054

NAME: THERMARK CORP.

ADDRESS: 650 W 67th PL SCHERERVILLE, IND

PRODUCER ORDER NO: 30402 SHIPMENT DATE: 5 15 81 (mo dy)

PERSON TO CONTACT: KITTY DECKER PHONE: 322-5030

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA): SPENT SOLVENTS + PAINT RESIDUE

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☒ Paint sludge
5. ☐ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Mud and water
15. ☐ Brine

☐ Other (Specify)

F005

MAJOR COMPONENTS

		CONCENTRATION Upper %	Lower %
1	ACRYLIC + VINYL RESIN	5%	1%
2	TOLUENE	20%	20%
3	METHYL ETHYL KETONE	60%	50%
4	ACETONE	10%	5%
5			
6			

Hazardous Properties of Waste: pH ____ ☐ none ☒ toxic ☒ flammable ☐ corrosive ☐ explosive

Bulk Volume: 5500 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other (specify)

Containers: 1 (Number) ☐ drums ☐ cartons ☐ bags ☒ other TANKER (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other (specify)

Special Handling Instructions (if any):

C. NAME OF HAULER: MR FRANK

BUSINESS ADDRESS: 201 W 155th St S HOLLAND-ILL

NAME OF PROCESSOR: AMERICAN CHEMICAL

SITE ADDRESS: COLFAX AVE GRIFFITH-IND

D. GENERATOR CERTIFICATION:

This is to certify 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
K. DECKER-FOREMAN	K. Decker	5/15/81

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

001977

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) EPA I.D. NO. ILD067506160

A. NAME: [illegible]

ADDRESS: 201 W 155th ST. S. HOLLAND ILL

TELEPHONE NUMBER: 596 3377 PICK-UP DATE: 5 15 81 (mo dy yr)

B. HAULER JOB NUMBER: ~~0079/027~~ 0079021

C. VEHICLE LICENSE NO: [illegible] STATE: ILL

D. HAULER CERTIFICATION:

This is to certify that 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	5-15-81

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY) EPA I.D. NO. IND016360265

A. NAME: American Chemical

ADDRESS: 420 South Colfax, Griffith

TELEPHONE NUMBER: ____ ACCEPTANCE DATE: 5 15 81 (mo dy 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 PROCESSING FACILITY. IT WAS ACCEPTABLE MATERIAL FOR PROCESSING UNDER THE TERMS OF FEDERAL, STATE, AND LOCAL REGULATIONS. I certify that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE
H.E. Schmidt	H.E. Schmidt	5-15-81

Keep one copy for your records. Send two (2) copies to Generator of Waste.

TO 142 T-63 5/15/81 JAM

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

MANIFEST DOCUMENT NO. 04114

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER) EPA I.D. NO. IND004700054

A. GENERATOR OF WASTE

NAME Thermark Corp.

ADDRESS 650 E 67th St. Indianapolis IN

PRODUCER ORDER NO ____ SHIPMENT DATE 4 14 81 (mo da yr)

PERSON TO CONTACT K. Dexter PHONE 322-2330

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA) Solvent + Paint Residue

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☐ Paint sludge
5. ☒ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Mud and water
15. ☐ Brine

☐ Other (Specify) ____

MAJOR COMPONENTS	CONCENTRATION Upper %	CONCENTRATION Lower %
1 Acrylic + Vinyl Resins	5%	1%
2 Toluene	30%	20%
3 Methyl Ethyl Ketone	40%	30%
4 Acetone	10%	5%
5		
6		

Hazardous Properties of Waste: pH ____ ☐ none ☒ toxic ☒ flammable ☐ corrosive ☐ explosive

Bulk Volume: 5000 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other (specify)

Containers: ____ (number) ☐ drums ☐ cartons ☐ bags ☒ other Tanker (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other (specify)

Special Handling Instructions (if any): ____

C. NAME OF HAULER Mr. Frank

BUSINESS ADDRESS 201 N 155th St. Hammond, Ill

NAME OF PROCESSOR Allegan Chemical

SITE ADDRESS Coffax Ave, Allegan

D. GENERATOR CERTIFICATION:

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

NAME & TITLE (please print)	SIGNATURE	DATE
K. Dexter (Foreman)	K. Dexter	4/14/81

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) EPA I.D. NO. [illegible]

A. NAME [illegible]

ADDRESS [illegible]

TELEPHONE NUMBER [illegible] PICK-UP DATE 4 [illegible] [illegible] (mo da yr)

B. HAULER JOB NUMBER [illegible]

C. VEHICLE LICENSE NO [illegible] STATE [illegible]

D. HAULER CERTIFICATION:

This is to certify that 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
[illegible]	[illegible]	4-14-81

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY) EPA I.D. NO. [illegible]

A. NAME [illegible]

ADDRESS [illegible]

TELEPHONE NUMBER 219 924-4370 ACCEPTANCE DATE 4 14 81 (mo da 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 that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE
FWNFE [illegible]		4-14-81

Keep one copy for your records. Send two (2) copies to Generator of Waste.

TO 125E T-63 4/14/81 JJM

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

001978

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NO. 06102

001979

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE — EPA I.D. NO. IND 064400054

NAME: THERMARK CORP

ADDRESS: 650 W 17th St. Schererville, IND

PRODUCER ORDER NO. _____ SHIPMENT DATE: 6 2 81 (mo da yr)

PERSON TO CONTACT: K. DECKER PHONE: 323-5030

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA): SPENT SOLVENT + PAINT RESIDUE

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☒ Paint sludge
5. ☒ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Mud and water
15. ☐ Brine

☐ Other (Specify) _____

MAJOR COMPONENTS

		CONCENTRATION Upper %	Lower %
1	Acrylic + Vinyl Resins	5%	9%
2	Toluene	30%	20%
3	Methyl Ethyl Ketones	60%	50%
4	Acetone	10%	5%
5			
6			

Hazardous Properties of Waste: pH _____ ☐ none ☒ toxic ☒ flammable ☐ corrosive ☐ explosive

Bulk Volume: 5000 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other _____ (specify)

Containers: 1 (number) ☐ drums ☐ cartons ☐ bags ☒ other TANKER (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other _____ (specify)

Special Handling Instructions (if any): _____

C. NAME OF HAULER: MR. FRANK

BUSINESS ADDRESS: 201 W 155th St S Holland, Ill.

NAME OF PROCESSOR: American Chemical

SITE ADDRESS: Collier Ave, Griffith

D. GENERATOR CERTIFICATION:

This is to certify 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
K. DECKER (FOREMAN)	K. Decker	6/2/81

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) — EPA I.D. NO. [illegible]

A. NAME: [illegible]

ADDRESS: [illegible] South Hol[illegible]

TELEPHONE NUMBER: [illegible] PICK-UP DATE: [illegible] (mo da yr)

B. HAULER JOB NUMBER: [illegible]

C. VEHICLE LICENSE NO: [illegible] STATE: [illegible]

D. HAULER CERTIFICATION:

This is to certify that 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
[illegible]	[illegible]	[illegible]

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY) — EPA I.D. NO. [illegible]

A. NAME: AMERICAN CHEMICAL

ADDRESS: GRIFFITH IND

TELEPHONE NUMBER: 219 924 4370 ACCEPTANCE DATE: 6 2 81 (mo da 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 that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE
FDUNFEE	F Dunfee	6/2/81

Keep one copy for your records. Send two (2) copies to Generator of Waste.

TO 124 TR 6/2/81 T-63 JJM

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

MANIFEST DOCUMENT NO. 06108

001980

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE — EPA I.D. NO. IND064400054

NAME: THERMARK CORP.

ADDRESS: 650 W 67th Pl. Schererville, IND

PRODUCER ORDER NO: _____ SHIPMENT DATE: 6 8 81 (mo da yr)

PERSON TO CONTACT: K. Decker PHONE: 322-5030

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA): Spent Solvent + Paint Residue

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☒ Paint sludge
5. ☐ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Mud and water
15. ☐ Brine

☐ Other (Specify) _____

MAJOR COMPONENTS

		CONCENTRATION Upper %	Lower %
1	Acrylic + Vinyl Resins	5 V.	1 V.
2	Toluene	30 V.	20 V.
3	Methyl Ethyl Ketone	60 V.	50 V.
4	Acetone	10 V.	5 V.
5			
6			

Hazardous Properties of Waste: pH _____ ☐ none ☒ toxic ☒ flammable ☐ corrosive ☐ explosive

Bulk Volume: 500 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other _____ (specify)

Containers: 1 (number) ☐ drums ☐ cartons ☐ bags ☒ other TANKER (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other _____ (specify)

Special Handling Instructions (if any): _____

C. NAME OF HAULER: Mr. Frank

BUSINESS ADDRESS: 201 W 155th St. S. Holland, Ill

NAME OF PROCESSOR: American Chemical

SITE ADDRESS: Colfax Ave, Griffith

D. GENERATOR CERTIFICATION:

This is to certify 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
K. Decker (Foreman)	K. Decker	6/8/81

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) — EPA I.D. NO. ILD009566160

A. NAME: Mr. Frank Inc

ADDRESS: 201 W 155th St. S. Holland Ill

TELEPHONE NUMBER: 312-596-3377 PICK-UP DATE: 06 08 81 (mo da yr)

B. HAULER JOB NUMBER: 0078/009

C. VEHICLE LICENSE NO: ~~[illegible]~~ 3U-076 STATE: Ill

D. HAULER CERTIFICATION:

This is to certify that 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
Miguel Garcia	[illegible]	06/08/81

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY)

EPA I.D. NO. Ind016360365

A. NAME: American Chemical

ADDRESS: 420 S. Colfax Griffith Ind

TELEPHONE NUMBER: _____ ACCEPTANCE DATE: 06 08 81 (mo da 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 PROCESSING FACILITY. IT WAS ACCEPTABLE MATERIAL FOR PROCESSING UNDER THE TERMS OF FEDERAL, STATE, AND LOCAL REGULATIONS. I certify that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE
FDUNFEE	F Dunfee	06-08-81

Keep one copy for your records. Send two (2) copies to Generator of Waste.

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

MANIFEST DOCUMENT NO. [illegible]

001981

...TION DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

...ERATOR OF WASTE EPA I.D. NO. [illegible]

...E [illegible]

...DRESS [illegible]

...DUCER ORDER NO 31721 SHIPMENT DATE 6 17 81 (mo da yr)

...SON TO CONTACT [illegible] PHONE [illegible]

...CRIPTION OF WASTE

...PPING NAME (DOT OR EPA) Spent Solvent - Paint Residue

...ck type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☒ Paint sludge
5. ☒ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Mud and water
15. ☐ Brine

☐ Other (Specify) F005

...OR COMPONENTS

		CONCENTRATION Upper %	Lower %
1	Methyl Ethyl Ketone	5%	1%
2	Toluene	20%	20%
3	Methyl Ethyl Ketone	40%	40%
4	Acetone	90%	5%
5			
6			

...ardous Properties of Waste:

...H ☐ none ☒ toxic ☒ flammable ☐ corrosive ☐ explosive

...Volume: 5000 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other (specify)

...tainers: 1 (number) ☐ drums ☐ cartons ☐ bags ☒ other Drums (specify)

...ical State: ☐ solid ☒ liquid ☐ sludge ☐ other (specify)

...cial Handling Instructions (if any):

...E OF HAULER Mr Frank

...ESS ADDRESS 291 [illegible]

...E OF PROCESSOR [illegible]

ADDRESS [illegible]

B. GENERATOR CERTIFICATION:

This is to certify that the materials described in I/D are properly 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
[illegible]	[illegible]	6/29/81

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) EPA I.D. NO. [illegible]

A. NAME MR. FRANK

ADDRESS [illegible]

TELEPHONE NUMBER [illegible] PICK-UP DATE 6 [illegible] 81 (mo da yr)

B HAULER JOB NUMBER [illegible]

C VEHICLE LICENSE NO [illegible] STATE [illegible]

D HAULER CERTIFICATION:

This is to certify that the waste described in Part I/D 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
[illegible]	[illegible]	6-29-81

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY)

EPA I.D. NO. [illegible]

A NAME [illegible] Chemical

ADDRESS 420 South Colfax, Griffith Ind

TELEPHONE NUMBER 219 924 4370 ACCEPTANCE DATE 6 29 81 (mo da 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 PROCESSING FACILITY. IT WAS ACCEPTABLE MATERIAL FOR PROCESSING UNDER THE TERMS OF FEDERAL, STATE, AND LOCAL REGULATIONS. I certify that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE
[illegible]	[illegible]	6-29-81

Keep one copy for your records. Send two (2) copies to Generator of Waste.

TO 12LE T-63 6/29/81 JRM

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS [illegible]

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NO. _____

001982

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE EPA I.D. NO. _____

NAME _____

ADDRESS _____

PRODUCER ORDER NO _____ SHIPMENT DATE ___ mo ___ da ___ yr

PERSON TO CONTACT _____ PHONE _____

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA) _____

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☐ Paint sludge
5. ☒ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Mud and water
15. ☐ Brine

☐ Other (Specify) _____

MAJOR COMPONENTS	CONCENTRATION Upper %	Lower %
1		
2		
3		
4		
5		
6		

Hazardous Properties of Waste:

pH _____ ☐ none ☐ toxic ☐ flammable ☐ corrosive ☐ explosive

Bulk Volume: _____ ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other _____ (specify)

Containers: _____ (Number) ☐ drums ☐ cartons ☐ bags ☐ other _____ (specify)

Physical State: ☐ solid ☐ liquid ☐ sludge ☐ other _____ (specify)

Special Handling Instructions (if any): _____

C. NAME OF HAULER _____

BUSINESS ADDRESS _____

NAME OF PROCESSOR _____

SITE ADDRESS _____

D. GENERATOR CERTIFICATION:

This is to certify 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

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) EPA I.D. NO. _____

A. NAME _____

ADDRESS _____

TELEPHONE NUMBER _____ PICK-UP DATE ___ mo ___ da ___ yr

B. HAULER JOB NUMBER _____

C. VEHICLE LICENSE NO _____ STATE _____

D. HAULER CERTIFICATION:

This is to certify that 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

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY)

EPA I.D. NO. _____

A. NAME _____

ADDRESS _____

TELEPHONE NUMBER _____ ACCEPTANCE DATE ___ mo ___ da ___ 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 that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE

Keep one copy for your records. Send two (2) copies to Generator of Waste.

TO WEST 4G?T T-50 7/21/81 JPM

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NO. [illegible]

001983

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE — EPA I.D. NO. [illegible]

NAME [illegible]

ADDRESS [illegible]

PRODUCER ORDER NO. _____ SHIPMENT DATE [illegible] mo da yr

PERSON TO CONTACT [illegible] PHONE [illegible]

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA) _____

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☒ Paint sludge
5. ☒ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Mud and water
15. ☐ Brine

☐ Other (Specify) _____

MAJOR COMPONENTS	CONCENTRATION Upper %	Lower %
1 [illegible]	[illegible]	[illegible]
2 [illegible]	[illegible]	[illegible]
3 [illegible]	[illegible]	[illegible]
4 [illegible]	[illegible]	[illegible]
5		
6		

Hazardous Properties of Waste: pH _____ ☐ none ☒ toxic ☒ flammable ☐ corrosive ☐ explosive

Bulk Volume: [illegible] ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other (specify)

Containers: _____ (number) ☐ drums ☐ cartons ☐ bags ☐ other (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other (specify)

Special Handling Instructions (if any): _____

C. NAME OF HAULER [illegible]

BUSINESS ADDRESS [illegible]

NAME OF PROCESSOR [illegible]

SITE ADDRESS [illegible]

D. GENERATOR CERTIFICATION:

This is to certify 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
[illegible]	[illegible]	[illegible]

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) EPA I.D. NO. [illegible]

A. NAME _____

ADDRESS _____

TELEPHONE NUMBER _____ PICK-UP DATE ___ mo ___ da ___ yr

B. HAULER JOB NUMBER _____

C. VEHICLE LICENSE NO _____ STATE _____

D. HAULER CERTIFICATION:

This is to certify that 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
[illegible]	[illegible]	[illegible]

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY) EPA I.D. NO. IND016360265

A. NAME AMERICAN CHEMICAL SERVICE INC

ADDRESS 420 S COLFAX - GRIFFITH IN

TELEPHONE NUMBER 219 924 4330 ACCEPTANCE DATE 8 4 81 mo da 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 processing facility. It was acceptable material for processing under the terms of federal, state, and local regulations. I certify that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE
EDUNTLE	[illegible]	8/4/81

Keep one copy for your records. Send two (2) copies to Generator of Waste.

TO 125R T-63 8/4/81 JTM

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

MANIFEST DOCUMENT NO. 08127

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE — EPA I.D. NO. IND 064400054

NAME: THERMAX CORP.

ADDRESS: 650 W 67th Av. Schererville, IND

PRODUCER ORDER NO: _____ SHIPMENT DATE: 8 (mo) 22 (da) 81 (yr)

PERSON TO CONTACT: CATHERINE H. DOKER PHONE: _____

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA): _____

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☒ Paint sludge
5. ☒ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Mud and water
15. ☐ Brine

☐ Other (Specify) _____

MAJOR COMPONENTS	CONCENTRATION Upper %	CONCENTRATION Lower %
1 Acrylic Vinyl Resin	5%	1%
2 Toluene	30%	20%
3 Methyl Ethyl Ketone	60%	50%
4 Acetone	10%	5%
5		
6		

Hazardous Properties of Waste: pH _____ ☐ none ☒ toxic ☒ flammable ☐ corrosive ☐ explosive

Bulk Volume: 5000 gal ☐ tons ☐ barrels (42 gal) ☐ other (specify)

Containers: 1 (number) ☐ drums ☐ cartons ☐ bags ☒ other TANKER (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other (specify)

Special Handling Instructions (if any): _____

C. NAME OF HAULER: Mr. FRANK

BUSINESS ADDRESS: 201 W 155th St. S. Holland, Ill.

NAME OF PROCESSOR: AMERICAN CHEMICAL

SITE ADDRESS: COLFAX AVE, GRIFFITH

D. GENERATOR CERTIFICATION:

This is to certify 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
CATHERINE H. DOKER	[signature]	8/27/81

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) — EPA I.D. NO. ILD 059 [illegible]

A. NAME: M.F. Trucking Inc.

ADDRESS: 201 W 155 St. So Holland Ill

TELEPHONE NUMBER: 596 3277 PICK-UP DATE: 8 (mo) 4 (da) 81 (yr)

B. HAULER JOB NUMBER: 0009/471

C. VEHICLE LICENSE NO: 3[illegible] STATE: Ill.

D. HAULER CERTIFICATION:

This is to certify that the waste described in Part I/D 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
Ron Prosser	[signature]	8/27/81

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY)

EPA I.D. NO. _____

A. NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____ ACCEPTANCE DATE: _____ (mo) _____ (da) _____ (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 processing facility. It was acceptable material for processing under the terms of federal, state, and local regulations. I certify that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE
T DUNFEE	[signature]	8/27/81

Keep one copy for your records. Send two (2) copies to Generator of Waste.

PO 124R T-63 8/22/81 JRM

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

001984

MANIFEST DOCUMENT NO. [illegible]

001985

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE — EPA I.D. NO. [illegible]

NAME [illegible]

ADDRESS [illegible]

PRODUCER ORDER NO. _____ SHIPMENT DATE [illegible] (mo da yr)

PERSON TO CONTACT [illegible] PHONE [illegible]

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA) _____

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☒ Paint sludge
5. ☒ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Food and water
15. ☐ Brine

☐ Other (Specify) _____

MAJOR COMPONENTS	CONCENTRATION Upper %	Lower %
1 [illegible]	[illegible]	[illegible]
2 [illegible]	[illegible]	[illegible]
3 [illegible]	[illegible]	[illegible]
4 [illegible]	[illegible]	[illegible]
5		
6		

Hazardous Properties of Waste: pH _____ ☐ none ☒ toxic ☒ flammable ☐ corrosive ☐ explosive

Bulk Volume: [illegible] ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other _____ (specify)

Containers: 1 (number) ☐ drums ☐ cartons ☐ bags ☒ other [illegible] (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other _____ (specify)

Special Handling Instructions (if any): _____

C. NAME OF HAULER Mr. Frank

BUSINESS ADDRESS [illegible]

NAME OF PROCESSOR _____

SITE ADDRESS _____

D. GENERATOR CERTIFICATION:

This is to certify that the materials described in I/D are properly 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
[illegible]	[illegible]	[illegible]

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) EPA I.D. NO. _____

A. NAME _____

ADDRESS [illegible]

TELEPHONE NUMBER _____ PICK-UP DATE _____ (mo da yr)

B. HAULER JOB NUMBER [illegible]

C. VEHICLE LICENSE NO. _____ STATE _____

D. HAULER CERTIFICATION:

This is to certify that the waste described in Part I/D 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
[illegible]		[illegible]

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY)

EPA I.D. NO. _____

A. NAME _____

ADDRESS _____

TELEPHONE NUMBER _____ ACCEPTANCE DATE _____ (mo da 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 PROCESSING FACILITY. IT WAS ACCEPTABLE MATERIAL FOR PROCESSING UNDER THE TERMS OF FEDERAL, STATE AND LOCAL REGULATIONS. I certify that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE
FOUNTAIN	[illegible]	7/14/81

Keep one copy for your records. Send two (2) copies to Generator of Waste.

To 126R T-63 9/14/81

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

MANIFEST DOCUMENT NO. 10102 81

001986

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE — EPA I.D. NO. IND064400054

NAME: THERMARK CORP.

ADDRESS: 650 W 67th Av. SCHERERVILLE, IND

PRODUCER ORDER NO: _____ SHIPMENT DATE: 10 (mo) 2 (da) 81 (yr)

PERSON TO CONTACT: CATHERINE A. DEKKER PHONE: 322-5020

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA): _____

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☒ Paint sludge
5. ☐ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Mud and water
15. ☐ Urine

☐ Other (Specify): _____

MAJOR COMPONENTS	CONCENTRATION Upper %	CONCENTRATION Lower %
1 Acrylic + Vinyl Resins	5%	1%
2 Toluene	30%	20%
3 Water	60%	50%
4 Acetone	10%	5%
5		
6		

Hazardous Properties of Waste: pH _____ ☐ none ☒ toxic ☒ flammable ☐ corrosive ☐ explosive

Bulk Volume: 5000 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other _____ (specify)

Containers: TANKER (number) ☐ drums ☐ cartons ☐ bags ☒ other TANKER (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other _____ (specify)

Special Handling Instructions (if any): _____

C. NAME OF HAULER: W. FRANK

BUSINESS ADDRESS: 201 W 155th St So. HOLLAND, ILL

NAME OF PROCESSOR: AMERICAN CHEMICAL

SITE ADDRESS: CALUMET, GRIFFITH, IND

D. GENERATOR CERTIFICATION:

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

NAME & TITLE (please print)	SIGNATURE	DATE
CATHERINE A DEKKER	CA Dekker	10/2/81

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) — EPA I.D. NO. ILD069506160

A. NAME: W. FRANK INC

ADDRESS: 201 W 155TH ST SOUTH HOLLAND

TELEPHONE NUMBER: 596 3377 PICK-UP DATE: 10 (mo) 2 (da) 81 (yr)

B. HAULER JOB NUMBER: 0079/025

C. VEHICLE LICENSE NO: 34071 STATE: ILL

D. HAULER CERTIFICATION:

This is to certify that 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
MIKE MARTIN	Mike Martin	10-2-81

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY) — EPA I.D. NO. IND016360245

A. NAME: AMERICAN CHEMICAL SERV.

ADDRESS: GRIFFITH IND

TELEPHONE NUMBER: _____ ACCEPTANCE DATE: 10 (mo) 2 (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 PROCESSING FACILITY. IT WAS ACCEPTABLE MATERIAL FOR PROCESSING UNDER THE TERMS OF FEDERAL, STATE, AND LOCAL REGULATIONS. I certify that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE
EDWARDS	[illegible]	10-2-81

Keep one copy for your records. Send two (2) copies to Generator of Waste.

TO 124 & T-63 10/2/81 JAM

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

MANIFEST DOCUMENT NO. 10122

001987

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE — EPA I.D. NO. [illegible]

NAME [illegible]

ADDRESS [illegible]

PRODUCER ORDER NO. _____ SHIPMENT DATE 10 22 81 (mo da yr)

PERSON TO CONTACT [illegible] PHONE [illegible]

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA) [illegible]

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☒ Paint sludge
5. ☒ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Mud and water
15. ☐ Brine

☐ Other (Specify) _____

MAJOR COMPONENTS

		CONCENTRATION Upper %	Lower %
1	[illegible]	[illegible]	[illegible]
2	[illegible]	[illegible]	[illegible]
3	[illegible]	[illegible]	[illegible]
4	[illegible]	[illegible]	[illegible]
5			
6			

Hazardous Properties of Waste: pH _____ ☐ none ☒ toxic ☒ flammable ☐ corrosive ☐ explosive

Bulk Volume: 5000 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other _____ (specify)

Containers: [illegible] (number) ☐ drums ☐ cartons ☐ bags ☒ other [illegible] (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other _____ (specify)

Special Handling Instructions (if any): _____

C. NAME OF HAULER [illegible]

BUSINESS ADDRESS [illegible]

NAME OF PROCESSOR [illegible]

SITE ADDRESS [illegible]

D. GENERATOR CERTIFICATION:

This is to certify 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
[illegible]	[illegible]	10/[illegible]

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) EPA I.D. NO. [illegible]

A. NAME [illegible]

ADDRESS [illegible]

TELEPHONE NUMBER [illegible] PICK-UP DATE [illegible] (mo da yr)

B. HAULER JOB NUMBER _____

C. VEHICLE LICENSE NO. _____ STATE [illegible]

D. HAULER CERTIFICATION:

This is to certify that 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
[illegible]		

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY) EPA I.D. NO. [illegible]

A. NAME American Chemical Service Inc

ADDRESS 420 So Colfax Griffith In

TELEPHONE NUMBER 219 924 4370 ACCEPTANCE DATE 10 22 81 (mo da yr)

B. PROCESS METHOD

☐ INCINERATION ☒ RECLAMATION ☒ OTHER (Specify) TREATMENT

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 that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE
[illegible]	[illegible]	[illegible]

Keep one copy for your records. Send two (2) copies to Generator of Waste.

TO 124TC T-63 10/22/81 JM

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

MANIFEST DOCUMENT NO. _____

001988

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE — EPA I.D. NO. _____

NAME _____

ADDRESS _____

PRODUCER ORDER NO _____ SHIPMENT DATE ___ ___ ___ (mo da yr)

PERSON TO CONTACT _____ PHONE _____

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA) _____

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☐ Paint sludge
5. ☒ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Mud and water
15. ☐ Brine

☐ Other (Specify) _____

MAJOR COMPONENTS	CONCENTRATION Upper %	CONCENTRATION Lower %
1		
2		
3		
4		
5		
6		

Hazardous Properties of Waste: pH _____ ☐ none ☒ toxic ☒ flammable ☐ corrosive ☐ explosive

Bulk Volume: 55 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other (specify)

Containers: (number) ☐ drums ☐ cartons ☐ bags ☒ other (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other (specify)

Special Handling Instructions (if any): _____

C. NAME OF HAULER _____

BUSINESS ADDRESS _____

NAME OF PROCESSOR _____

SITE ADDRESS _____

D. GENERATOR CERTIFICATION:

This is to certify that the materials described in I/D are properly 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

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) EPA I.D. NO. _____

A. NAME _____

ADDRESS _____

TELEPHONE NUMBER _____ PICK-UP DATE ___ ___ ___ (mo da yr)

B. HAULER JOB NUMBER _____

C. VEHICLE LICENSE NO _____ STATE _____

D. HAULER CERTIFICATION:

This is to certify that the waste described in Part I/D 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

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY)

EPA I.D. NO. IND016360265

A. NAME American Chemical Service

ADDRESS 420 S Calhoun Street Ft. Wayne IN 46815

TELEPHONE NUMBER 219 424 4370 ACCEPTANCE DATE 10 29 81 (mo da 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 processing facility. It was acceptable material for processing under the terms of federal, state, and local regulations. I certify that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE
[illegible]	[illegible]	10/29/81

Keep one copy for your records. Send two (2) copies to Generator of Waste.

To 210 X T-50 10/29/81 [illegible]

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

MANIFEST DOCUMENT NO. 1111 4

001889

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE EPA I.D. NO.

NAME

ADDRESS

PRODUCER ORDER NO SHIPMENT DATE mo da yr

PERSON TO CONTACT PHONE

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA)

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☐ Paint sludge
5. ☐ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Mud and water
15. ☐ Brine

☐ Other (Specify)

MAJOR COMPONENTS	CONCENTRATION Upper %	Lower %
1		
2		
3		
4		
5		
6		

Hazardous Properties of Waste:

pH ☐ none ☐ toxic ☐ flammable ☐ corrosive ☐ explosive

Bulk Volume: ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other (specify)

Containers: (number) ☐ drums ☐ cartons ☐ bags ☐ other (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other (specify)

Special Handling Instructions (if any):

C. NAME OF HAULER

BUSINESS ADDRESS

NAME OF PROCESSOR

SITE ADDRESS

D. GENERATOR CERTIFICATION:

This is to certify that the materials described in I/D are properly 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
		11 11 81

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) EPA I.D. NO.

A. NAME

ADDRESS

TELEPHONE NUMBER PICK-UP DATE 11 11 81 mo da yr

B. HAULER JOB NUMBER

C. VEHICLE LICENSE NO STATE

D. HAULER CERTIFICATION:

This is to certify that the waste described in Part I/D 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

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY)

EPA I.D. NO.

A. NAME

ADDRESS

TELEPHONE NUMBER ACCEPTANCE DATE mo da 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 processing facility. It was acceptable material for processing under the terms of federal, state, and local regulations. I certify that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE

Keep one copy for your records. Send two (2) copies to Generator of Waste.

TO 125 R T-63 GRM. 11/16/81

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

MANIFEST DOCUMENT NO. _____

001990

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE — EPA I.D. NO. _____

NAME _____

ADDRESS _____

PRODUCER ORDER NO _____ SHIPMENT DATE mo da yr

PERSON TO CONTACT _____ PHONE _____

B. DESCRIPTION OF WASTE

SHIPPING NAME (DOT OR EPA) _____

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☒ Paint sludge
5. ☒ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☐ Mud and water
15. ☐ Urine

☒ Other (Specify) _____

MAJOR COMPONENTS

		CONCENTRATION Upper %	CONCENTRATION Lower %
1			
2			
3			
4			
5			
6			

Hazardous Properties of Waste:

pH _____ ☐ none ☐ toxic ☒ flammable ☐ corrosive ☐ explosive

Bulk Volume: _____ ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other _____ (specify)

Containers: 1 (number) ☐ drums ☐ cartons ☐ bags ☒ other _____ (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other _____ (specify)

Special Handling Instructions (if any): _____

C. NAME OF HAULER _____

BUSINESS ADDRESS _____

NAME OF PROCESSOR _____

SITE ADDRESS _____

D. GENERATOR CERTIFICATION:

This is to certify that the materials described in I/D are properly 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

Keep one copy for your records. Send four (4) copies to Hauler of Waste.

II. HAULER OF WASTE (MUST BE FILLED IN BY HAULER) — EPA I.D. NO. _____

A. NAME _____

ADDRESS _____

TELEPHONE NUMBER _____ PICK-UP DATE mo da yr

B. HAULER JOB NUMBER _____

C. VEHICLE LICENSE NO _____ STATE _____

D. HAULER CERTIFICATION:

This is to certify that the waste described in Part I/D 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

Keep one copy for your records. Send three (3) copies to Processor of Waste.

III. PROCESSOR OF WASTE (MUST BE FILLED IN BY TREATMENT/STORAGE/DISPOSAL FACILITY) — EPA I.D. NO. _____

A. NAME _____

ADDRESS _____

TELEPHONE NUMBER _____ ACCEPTANCE DATE mo da yr

B. PROCESS METHOD

☒ INCINERATION ☐ RECLAMATION ☐ OTHER (Specify) _____

C. CERTIFICATION:

THE HAULER NAMED ABOVE DELIVERED THE WASTE DESCRIBED IN PART B OF THIS MANIFEST TO THIS PROCESSING FACILITY. IT WAS ACCEPTABLE MATERIAL FOR PROCESSING UNDER THE TERMS OF FEDERAL, STATE, AND LOCAL REGULATIONS. I certify that the foregoing is true and correct.

NAME AND TITLE (please print)	SIGNATURE	DATE
DONLEE		12-14-81

Keep one copy for your records. Send two (2) copies to Generator of Waste.

To 125 K T-63 GPM 12/14/81

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☑ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0029739

Rev. 3/81

001991

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
THERMO CHEM INC	MR FRANK INC.	AMERICAN CHEMICAL SERVICE CO.
Site Address: 4321 EVANSTON AVE. MUSKEGON, MICH. 49442	Transporters Address: SOUTH HOLLAND, ILL.	Facility Address: GRIFFITH, INDIANA
Phone Number: (616) 777-2619	Phone Number: (312) 596-3377	Phone Number: (219) 924-4370
Generator's Site EPA I.D. Number: MID044567162	Transporter's EPA I.D. Number: ILD061950616	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	Solid	Liquid	Gas	Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	WASTE FLAMMABLE MIXED SOLVENTS N.O.S.	FLAMMABLE	NA-1142	017	1	CT		✓			2000	gal	F003
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

CLEAN UP ANY SPILLS. USE GLOVES & SAFETY GOGGLES.
ALSO INCLUDES F-005. PREVIOUSLY SHIPPED TO TSDF.

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 Thermo Chem Inc. Ronald B Beyersmith

Date Shipped MO. DAY YEAR: 5 1 2 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 0079/029

Subsequent Transporter Vehicle I.D. No's

Transporter Signature: ② Michael Martin

Subsequent transporter(s) signature(s): ③

Date(s) Received: 0 5 1 2 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 James Murphy

Facility Site EPA I.D. Number: IND016360265

☒ Accepted ☐ Rejected

Date Received: 0 5 1 2 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 WAGIT & DUMP BOX 5/12/81 T-50 JPM

HAZARDOUS WASTE MANIFEST

0003
MANIFEST DOCUMENT NUMBER

V-10002
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	OHD002493039	Teleflex, 1265 Industrial Ave. Van Wert, O. 45891	
TRANSPORTER # 1	MID03993902	Thomas Solvent 5605 Plane View Dr. Ft. Wayne, Ind. 46825 419/238-0070	
TRANSPORTER # 2 (if required)		219/482-9638	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service 420 S. Colfax Griffin, Ind 46319	6/3/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		219/924-4370 ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
2 (55 gal drums)		F 0 0 5	Waste Paint Thinning Compound	1142	~~5~~ X 2	-		110 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

This is to certify acceptance of the hazardous waste shipment.

Terry Lanzaw 5-24-81
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

William S. Meyer 5/29/81
GENERATOR'S SIGNATURE DATE

Timothy Cahillane 6-3-81
TSDF SIGNATURE DATE

3

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TRANSPORTER #2

001992

HAZARDOUS WASTE MANIFEST

0002
MANIFEST DOCUMENT NUMBER

V-10001
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	OHD002493039	Teleflex, 1265 Industrial Ave., Van Wert, O. 45891 419/238-0070	
TRANSPORTER # 1	MID03993902	Thomas Solvent 5605 Plane View Dr. Ft. Wayne, Ind. 46825 219/482-9638	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND)163602655	American Chemical Service 420 S. Colfax Griffin, Ind. 46319 219/924-4370	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
5 (55 gal drums)		F D 0 5	Waste Paint Thinning Compound	1142	5	-		275 gal.		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED
Yes ☒ No ☐

REMIT
C.O.D. TO:
ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

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

6

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FILE COPY

001993

HAZARDOUS WASTE MANIFEST

0004
MANIFEST DOCUMENT NUMBER

V-10004
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	OHD002493039	Teleflex, 1265 Industrial Ave. Van Wert, O. 45891 419/238-0070	
TRANSPORTER # 1	MID03993902	Thomas Solvent 5605 Plane View Dr. Ft. Wayne, Ind. 46825 219/482-9638	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DIS-POSAL FACILITY	IND016360265	American Chemical Service 420 S. Colfax Griffin, Ind 46319 219/924-4370	
TSDF TREATMENT STORAGE OR DIS-POSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
6 (55 gal drums)		F 0 0 5	Waste Paint Thinning Compound	1142	6			330 gal		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED
Yes ☒ No ☐

REMIT
C.O.D. TO:
ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

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

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

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

TOTAL CHARGES: $

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

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

CERTIFICATION

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

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

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

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

TSDF SIGNATURE DATE
TO 126 X T-63 10/8/81

5

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TSDF COPY

001994

HAZARDOUS WASTE MANIFEST

0001
MANIFEST DOCUMENT NUMBER

V-10000
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	OHD002493039	Teleflex 1265 Industrial Ave., Van Wert, Ohio 45891 1-419/238-0070	
TRANSPORTER # 1	MID03993902	Thomas Solvent 5605 Plane View Dr. Ft. Wayne, Ind. 46825 1-219/482-9638	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DIS—POSAL FACILITY	IND0163602655	American Chemical Service 420 S. Colfax Griffin, Ind. 46319 1-219/924-4370	
TSDF TREATMENT STORAGE OR DIS—POSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
12 (55 gal drums)		F 0 0 5	Waste Paint Thinning Compound	1142	12	-		660 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 3/1/

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

001995

HAZARDOUS WASTE MANIFEST

0001
MANIFEST DOCUMENT NUMBER

V-10000
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	OHD002493039	Teleflex 1265 Industrial Ave., Van Wert, Ohio 45891 1-419/238-0070	
TRANSPORTER # 1	MID03993902	Thomas Solvent 5605 Plane View Dr. Ft. Wayne, Ind. 46825 1-219/482-9638	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DIS-POSAL FACILITY	IND0163602655	American Chemical Service 420 S. Colfax Griffin, Ind. 46319 1-219/924-4370	
TSDF TREATMENT STORAGE OR DIS-POSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
12 (55 gal drums)		F005	Waste Paint Thinning Compound	1142	12	-		660 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.

This is to certify acceptance of the hazardous waste shipment.

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

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

GENERATOR'S SIGNATURE DATE 3/2/81 TSDF SIGNATURE DATE

Pumped to 125K 3/11/81 T-63 Jim Munch

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

001996

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0293689 (1–7)

Authorization Number 998453 (8–13)

TECHNICAL PETROLEUM (Company Name) — 6233 NO PULASKI RD (Address)
CHGO (City) — IL (State) — 60646. (Zip)
031600441 (14–24) Generator Number
ILD-005441696.

WASTE HAULER(S)

MR FRANK INC (Hauler Name) — 201 W 155TH ST (Hauler Address)
SO. HOLLAND, IL 60473
S.W.H. Registration Number 007902019 (25–31)
ILD069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SVC. (Facility Name) — 420 SO COLFAX (Address)
GRIFFITH (City) — IND (State) — 46319 (Zip)
91808702 (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: BULK — HAZARD CLASS: FLAMMABLE — WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 004500 (47–52) — (1) GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 01/12/81 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: 01 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: 1 12 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: 2000 GALS TO #3 STILL T-63 Jim Murphy 1/12/81
2500 GALS TO WEST AGIT R T-50 Jim Murphy 1/12/81

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

001997

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0335491

Authorization Number 998775

SYNCHRO-START PRODUCTS (Company Name) — 8109 N. LAWNDALE AVE (Address)
SKOKIE (City) — ILLINOIS (State) — 60076 (Zip)

0312880029 G (Generator Number)

WASTE HAULER(S)

JAYAR-HOAG CHEMICAL (Hauler Name) — 8620 FERRIS ST. MORTON GROVE, ILL 60053 (Hauler Address) — S.W.H. Registration Number 0247001

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — 420 S. COLFAX (Address) — 91808902 (Site Number)
GRIFFITH (City) — INDIANA (State) — Zip — IN0016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENT

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: 1-1-1 TRICHLOROETHANE — HAZARD CLASS: ORM-A

WEIGHT FOR D.O.T. USE 4200 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 000162

1 GALLONS (Circle One)
2 CU. YDS. 165

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-12-81 — W H Goodwin (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 Holian (Authorized Signature) — DATE: 1/12/81

(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:

[illegible] (Authorized Signature) — DATE: 03/26/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 3/26/81
PUMPED TO #1 STILL 4/29/81 T-63 JTM

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

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

SITE COPY - PART 3

001998

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0335492 (1–7)

Authorization Number 998775 (8–13)

SYNCHRO-START PRODUCTS (Company Name) 8109 N. LAWNDALE (Address)
SKOKIE (City) ILL. (State) 60076 (Zip)

0312880029 (14–24) Generator Number

WASTE HAULER(S)

JAYAR-HOAG (Hauler Name) 8620 FERRIS (Hauler Address) MORTON GROVE ILL.
S.W.H. Registration Number 0247201 (25–31)

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM SERVICE (Facility Name) 420 S COLFAX (Address)
GRIFFITH (City) IND. (State) ____ (Zip)
91808902 (39–46) Site Number
IND016360765

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:
WASTE-1-1-1	ORM-A
TRICHLORETHANE	

WEIGHT FOR D.O.T. USE 2400 (LBS / TONS (circle one))

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

QUANTITY OF WASTE DELIVERED: 220 (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: 7-20-81 (Authorized Signature) F001

WASTE HAULER

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

(1) ____ (Authorized Signature) DATE: 07/21/81 (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:

Jim Caballero (Authorized Signature) DATE: 7/29/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 7/29/81 TO TO 120R T-63 9/4/81 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

001999

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0335495 (1–7)

Authorization Number 998775 (8–13)

SYNCHRO-START (Company Name) — 8109 N. LAWNDALE AVE (Address)
SKOKIE (City) — ILLINOIS (State) — 60076 (Zip)

0312880029 (14–24) Generator Number

WASTE HAULER(S)

TAYAR-HOAG CHEMICAL (Hauler Name) — 8620 FERRIS ST (Hauler Address) — MORTON GROVE, ILL. 60053

S.W.H. Registration Number 0247001 (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 S. COLFAX (Address)
GRIFFITH (City) — INDIANA (State) — Zip

91808902 (39–46) Site Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENT

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: 1-1-1 TRICHLORETHANE

HAZARD CLASS: ORM-A

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

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

QUANTITY OF WASTE DELIVERED: 000216 (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: 8-13-81 — (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) Thomas Holan (Authorized Signature) — DATE: 8/14/81 (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: 8/28/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 8/28/81
TO 120X T-63 9/4/81 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

002000

TO BE COMPLETED BY WASTE GENERATOR

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

0335496
1 7

Authorization Number 998775
8 13

SYNCHRO-START (Company Name) — 8109 N LAWNDALE AVE (Address)
SKOKIE (City) — ILL. (State) — 60076 (Zip)

0312880029 G
14 Generator Number 24

WASTE HAULER(S)

JAYAR-HOAG CHEMICAL (Hauler Name) — 8620 FERRIS ST (Hauler Address) — S.W.H. Registration Number 0247001
25 31

(Hauler Name) — MORTON GROVE, ILL-60053 (Hauler Address) — S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERV (Facility Name) — 420 S. COLFAX (Address) — 91808902 Site Number
39 46

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

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: 1-1-1 TRICHLOROETHANE — HAZARD CLASS: ORM-A

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

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

QUANTITY OF WASTE DELIVERED: 000270
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: 11-25-81 — [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) Thomas Holian (Authorized Signature) — DATE: 11/30/81
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:

[signature] (Authorized Signature) — DATE: 12/16/81
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

On dock 12/16/81 GRM
TO IB T-63 GRM 12/31/81 GRM

SITE COPY - PART 3

002001

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0357477

Authorization Number 991974

SYMONS CORP. FIBERGLASS DIV. Glenridge Ind, Park (Company Name) — Address

1214220004 Generator Number

Contralia, I (City) — Illinois (State) — 62801 (Zip)

ILD 075888743

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) — 201 W 155th St. S. Holland, Ill (Hauler Address)

S.W.H. Registration Number 0079/027

ILD 069506160

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

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — 420 S. Colfax Ave. Griffith, Ind. (Address)

91808902 Site Number

LND 016360265

City — State — Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

ORGANIC SOLVENT

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

SHIPPING DESCRIPTION: Flammable Liquid

HAZARD CLASS: UN 1090

WEIGHT FOR D.O.T. 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: 6/16/81 — Bernie L. McKinney (Authorized Signature) UDOX

WASTE HAULER

I HEREBY CERTIFY 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: 6/16/81

(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: 6/17/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 202E T-50 6/17/81 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

002002

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0357478

Authorization Number 991974

SYMONS CORP. FIBERGLASS DIV. (Company Name) Glenridge Industrial Park (Address)

Centralia, (City) Illinois (State) 62801 (Zip)

1214220004 (Generator Number) G

ILD # 075888743

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) 201 W. 155th St. S. Holland (Hauler Address) Illinois

S.W.H. Registration Number 0079/027

ILD # 069506160

Hauler Name _____ Hauler Address _____

S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) 420 E. Colfax Ave. Griffith, Ind. (Address)

91808902 (Site Number)

City _____ State _____ Zip _____

LND # 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

Organic Solvent

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

SHIPPING DESCRIPTION: Flammable Liquid

HAZARD CLASS: UN 1090

WEIGHT FOR D.O.T. 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

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9/24/81 Bobbie M'Kinney (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 24 81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES X NO ____

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

(Authorized Signature) DATE: 9-24-81

COMMENTS OR SPECIAL INSTRUCTIONS: To 2043 T-50 9/24/81 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

002003

TO BE COMPLETED BY WASTE GENERATOR

STATE C

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

SPECIAL WASTE HAULING MANIFEST

0357479

Authorization Number 991974

SYMONS CORPORATION-FIBERGLASS DIV. (Company Name) Glenridge Industrial Park (Address)

Centralia (City) Illinois (State) 62801 (Zip)

1214220004 (Generator Number)

ILD # 075888743

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) 201 W. 155th St. S. Holland Ill. (Hauler Address)

S.W.H. Registration Number 0079/027

ILD # 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. (Facility Name) 420 S. Colfax Ave. Griffith, Ind. (Address)

91808902 (Site Number)

LND # 016360265

City State Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ACETONE

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

Organic Solvent

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

SHIPPING DESCRIPTION: Flammable Liquid

HAZARD CLASS: UN 1090

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

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

QUANTITY OF WASTE DELIVERED: 1300

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12/18/81 Bobbie J. McKinney (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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. C. B. L. (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 F T-50 GRM 12/18/81

SITE COPY - PART 3

002004

Mr. Frank

INDUSTRIAL WASTE DISPOSAL MANIFEST

MICHIGAN DEPARTMENT OF NATURAL RESOURCES — ENVIRONMENTAL PROTECTION BUREAU

No. 79855

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE: FACILITY NUMBER MID005068507

NAME Sundstrand Heat Transfer, Inc.

ADDRESS 415 E. Prairie Ronde St., Dowagiac, MI 49047

PRODUCER ORDER NO. 37652 SHIPMENT DATE 01 19 81 (mo. da. yr.)

PERSON TO CONTACT R. Ballou PHONE (616)782-2141

B. DESCRIPTION OF WASTE (Mandatory) HAZARD CLASS: T

SHIPPING NAME: (DOT OR EPA) Methyl Chloroform ORM-A

SIC CODE	PHYS. STATE	TYPE OF CONTAINER	QUANTITY	UNIT	WASTE TYPE	PERCENT SOLIDS
3362	2	2	10050 00	2	06	01

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.	Methyl Chloroform	95	90
2.	Petroleum Oil	9	4
3.			
4.			
5.			
6.			

INDICATE IF THE WASTE CONTAINS ANY OF THE MATERIALS LISTED IN TABLE TWO.

PARAMETER NO.	CONCENTRATION
___-___-___	
___-___-___	
___-___-___	
___-___-___	

EMERGENCY SPILL INFORMATION Protective Equipment required. Dike area and pump to storage. Absorb with sand, clay, earth or floor absorbant.

C. NAME OF HAULER Mr. Frank ILD069506160

BUSINESS ADDRESS So. Holland, Ill. 60437 Lic.334

NAME OF PROCESSOR American Chemical Services

SITE ADDRESS Griffith, Ind. IND016360265

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 AND TITLE (please print)	SIGNATURE	DATE
Mgr. of Labs R. L. Ballou	R. L. Ballou	1-19-81

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 So. HOLLAND IL 60473

TELEPHONE NUMBER 596-3377 PICK-UP DATE 01 19 81 (mo. da. yr.)

B. HAULER JOB NUMBER 009/008 FACILITY NUMBER ILD069506160

C. VEHICLE LICENSE NO. 45152 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
CE MILBURN	[illegible]	01-19-81

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 IND016360265

ADDRESS 420 So. Colfax Griffith, IND.

TELEPHONE NUMBER ACCEPTANCE DATE (mo. da. 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 Dumbee - FOUNTEE		1-19-81

Keep green copy for your records. Send white copy to:

DEPARTMENT OF NATURAL RESOURCES, WATER QUALITY DIVISION, P.O. BOX 30028, LANSING, MI 48909

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

000203

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 Chem. Services	Generator	Sundstrand Heat Transfer, Inc.
E.P.A. ID Code No.	IND016360265	E.P.A. ID Code No.	MID005063507
Address	420 S. Colfax 46319	Address	415 E. Prairie Ronde St.
Destination	Griffith, Indiana	Origin	Dowagiac, Michigan 49047
Phone		Phone	(616) 782-2141

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	Methyl Chloroform	ORM-A	UN2831	F001		

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 R. L. Ballou
Phone (616) 782-2141

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. L. Ballou Date _____

TRANSPORTER #1 [illegible] E.P.A. ID No. [illegible]
Address [illegible]
City [illegible] State [illegible] Zip [illegible] Phone [illegible]

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature [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 4200 GALS TO #1 STILL 1/19/81 T-63 Jim Murphy
800 GALS TO DRUMS

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

T/S/D FACILITY Signature [illegible] 800 GALS IN DRUMS TO #1 STILL 1/20/81 Date 1-19-81

T/S/D F COPY

002006

HAZARDOUS WASTE

HAZARDOUS WASTE

INDUSTRIAL WASTE DISPOSAL MANIFEST

MICHIGAN DEPARTMENT OF NATURAL RESOURCES — ENVIRONMENTAL PROTECTION BUREAU

NO. 79852

I. GENERATOR DESCRIPTION AND DISPOSITION OF WASTE (MUST BE FILLED IN BY PRODUCER)

A. GENERATOR OF WASTE: FACILITY NUMBER MID005068507

NAME Sundstrand Heat Transfer, Inc.

ADDRESS 415 E. Prairie Ronde St., Dowagiac, MI 49047

PRODUCER ORDER NO. 37652 SHIPMENT DATE 03 23 81 (mo. da. yr.)

PERSON TO CONTACT R. Ballou PHONE (616) 782-2141

B. DESCRIPTION OF WASTE (Mandatory) HAZARD CLASS: T

SHIPPING NAME: (DOT OR EPA) Methyl Chloroform ORM-A

SIC CODE	PHYS. STATE	TYPE OF CONTAINER	QUANTITY	UNIT	WASTE TYPE	PERCENT SOLIDS
3362	2	21	0400	2	06	01

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.	Methyl Chloroform	95	90
2.	Petroleum Oil	9	4
3.			
4.			
5.			
6.			

INDICATE IF THE WASTE CONTAINS ANY OF THE MATERIALS LISTED IN TABLE TWO.

PARAMETER NO.	CONCENTRATION %
____-__-__	
____-__-__	
____-__-__	
____-__-__	

EMERGENCY SPILL INFORMATION Protective Equipment required. Dike area and pump to storage. Absorb with sand, clay, earth or floor absorbent.

C. NAME OF HAULER Mr. Frank ILD069506160

BUSINESS ADDRESS South Holland, Illinois 60437 Lic. 334

NAME OF PROCESSOR American Chemical Services

SITE ADDRESS Griffith, Indiana IND016360265

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
R. Ballou Mgr. of Labs	R. Ballou	3-23-81

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 201 W. 155th ST. So. HOLLAND, ILL

TELEPHONE NUMBER 312 596 3377 PICK-UP DATE 3 23 81 (mo. da. yr.)

B. HAULER JOB NUMBER 0079/026 FACILITY NUMBER ILD 069506160

C. VEHICLE LICENSE NO. 333 87 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
CE MILBURN	CE Milburn	3-23-81

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 ____ ACCEPTANCE DATE 3 23 81 (mo. da. 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
	[signature]	3-23-81

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: #1 STILL T-63 3/23/81 Jim Murphy

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

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: 002

TO:		FROM:	
T/S/D FACILITY	American Chem. Services	Generator	Sundstrand Heat Transfer, Inc.
E.P.A. ID Code No.	IND016360265	E.P.A. ID Code No.	MID005068507
Address	420 S. Colfax 46319	Address	415 E. Prairie Ronde Street
Destination	Griffith, Indiana	Origin	Dowagiac, Michigan 49047
Phone		Phone	(616) 782-2141

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	Methyl Chloroform	ORM-A	UN2831	F001	4900gal.	

PLACARDS REQUIRED

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

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

(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

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

HAZARDOUS WASTE

HAZARDOUS WASTE

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name R. L. Ballou
Phone (616) 792-2141

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. L. Ballou Date 2-22-81

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 #1 STILL T-63 3/23/81 Jim Murphy

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

T/S/D FACILITY Signature _____ Date 3-13-81

T/S/D F COPY

002008

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0010806

Rev. 3/81

002009

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
SUNDSTRAND HEAT TRANSFER	MR. FRANK	AMERICAN CHEMICAL SERVICES
Site Address: 415 E. Prairie Ronde Street, Dowagiac, MI 49047	Transporters Address: 201 W. 155th, South Holland, Illinois 60437	Facility Address: 420 S. Colfax, Griffith, Indiana 46319
Phone Number: (616) 782-2141	Phone Number: (312) 596-3377	Phone Number: (219) 838-4370
Generator's Site EPA I.D. Number: MID005068507	Transporter's EPA I.D. Number: ILD069506160	Facility Site EPA I.D. Number: INDO16360265

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.	1,1,1 - Trichloroethane	ORMA-A	UN2831	NONE	1	Tr		X			4510	GAL	005R
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

TO #1 STILL T-63 6/2/81 JJM

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: ① Richard Smith

Date Shipped MO. DAY YEAR: 06 02 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 FLL 0079026

Subsequent Transporter Vehicle I.D. No's

Transporter Signature: ② Donald H Bult

Subsequent transporter(s) signature(s): ③

Date(s) Received: 06 02 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 [signature]

Facility Site EPA I.D. Number

☐ Accepted ☐ Rejected

Date Received: 6 2 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

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0010867

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Sundstrand Heat Transfer	Mr. Frank	American Chemical Services
Site Address 415 E. Prairie Ronde Dowagiac, MI 49047	Transporters Address 201 W. 155th South Holland, Illinois 60437	Facility Address 420 S. Colfax Griffith, Indiana 46319
Phone Number (616) 782-2141	Phone Number (312) 596-3377	Phone Number (219) 838-4370
Generator's Site EPA I.D. Number MID005068507	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.	1,1,1 - Trichloroethane	ORM-A	UN2831	None	1	Tr		X			4000	Gal.	005R
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 R. L. Ballou — Date Shipped MO. DAY. YEAR 06 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. 1 334-26

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② Robert Perkins — Date(s) Received 06 30 81

Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery. TO #1 STILL T-63 6/30/81 JRM.

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] — Facility Site EPA I.D. Number

☑ Accepted ☐ Rejected — Date Received 6 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

0020010

STATE OF MICHIGAN

Rev. 3/81

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0010878

002611

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Sundstrand Heat Transfer	Mr. Frank	American Chemical Services
Site Address	**Transporters Address**	**Facility Address**
415 E. Prairie Ronde Dowagiac, MI 49047	201 W. 155th South Holland, Illinois 60437	420 S. Colfax Griffith, Indiana 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 782-2141	(312) 596-3377	(219) 838-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MID005068507	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.	1,1,1 - Trichloroethane	ORM-A	UN2831	None	1	Tr.		X			4000	Gal.	005R
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 Richard Smith

Date Shipped MO. DAY YEAR 10 05 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. 10079026

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② [illegible]

Subsequent transporter(s) signature(s) ③

Date(s) Received 10 05 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 [illegible]

Facility Site EPA I.D. Number IND016360265

☑ Accepted ☐ Rejected

Date Received 10 5 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 #1 STILL-T-63 10/5/81 JJM

TSDF COPY

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0295800 (1–7)

Authorization Number 9 9 8 7 1 4 (8–13)

Sun Chemical Corp. (Company Name) — 3200 Festival Drive (Address) — ILD 075 603 886

Kankakee, IL (City) — IL (State) — 60901 (Zip) — 0 9 1 0 5 5 0 0 1 2 G (14–24) Generator Number

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) — 201 W. 155th St. South Holland, IL (Hauler Address) — S.W.H. Registration Number 0 0 7 9 0 0 9 (25–31)

XD ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals (Facility Name) — 420 S COLFAX (Address) — 9 1 8 0 8 9 0 2 (39–46) Site Number

Griffith (City) — IN (State) — Zip — IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: waste flammable 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 solvents — HAZARD CLASS: UN 1993 — WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 003000 (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: 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:

(Authorized Signature) — DATE: 11 20 81 (54–59)

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

FINAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) — DATE: 11 20 81 (60–65)

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

To 211 K T-50 11/20/81

SITE COPY - PART 3

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0295799

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998714

Sun Chemical Corp. (Company Name) — 3200 Festival Drive (Address) — ILD 079 603 886

Kankakee (City) — IL (State) — 60901 (Zip)

091055 0012 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 079/031

IND 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals (Facility Name) — 420 So Colfax (Address) — 918089 02 Site Number

Griffith (City) — IN (State) — Zip — IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste flammable 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 solvents — HAZARD CLASS: UN 1993 — WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 003000 — 1 GALLONS (Circle One) 2 CU. YDS. 1

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION.

DATE: 11/16/81 — x Don Nelson (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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: 11/16/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

D Nelson (Authorized Signature) — DATE: 11/16/81

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

T211 R T-50 GPM 11/16/81

SITE COPY - PART 3

002013

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 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 36096

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Sun Chemical *
2. EPA IDENTIFICATION NO.: WID080498769
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 450 Milwaukee St.
5. CITY, STATE, ZIP CODE: Menasha, Wisc. 54952
6. TELEPHONE NUMBER: (414) 722-4331

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Tank Truck 1-Load	5000	Waste & Flamable Liquid N.O.S.	Flamable	UN 1993	1. Solid 3. Mixture 2. Liquid [2]	K086	
					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): Edward F. Lukaszka
17. DATE SHIPPED M D Y: 5 18 81

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

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

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Donald H. Burt
26. Date Accepted M D Y: 5 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: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 So. Colfax Ave.
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: TO EAST AGIT T-50 5/28/81 JTM

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

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted M D Y: 5 [illegible]

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

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

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 36098

002015

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Sun Chemical
2. EPA IDENTIFICATION NO.: WID080498769
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 450 Milwaukee St
5. CITY, STATE, ZIP CODE: Menasha, Wisc 54952
6. TELEPHONE NUMBER: (414) 722-4331

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US 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 Tank Truck	5,000	Waste Flammable Liquid N.O.S.	Flammable	UN 1993	1. Solid 3. Mixture 2. Liquid [X]	K086	
					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): Edward F Lukaszka
17. DATE SHIPPED M D Y: 6 / 3 / 81

TRANSPORTER SECTION

18. COMPANY NAME: Ma Fanne Inc
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

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

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Donald H Bult
26. Date Accepted M D Y: 6 / 3 / 81

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

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

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 So Colfax Ave
35. CITY, STATE, ZIP CODE: Griffith Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: To 112E T-63 6/3/81 [initials]

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

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): H.F. Schmidt
40. Date Accepted M D Y: 6 / 3 / 81

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

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

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 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 36099

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Sun Chemical
2. EPA IDENTIFICATION NO.: WID 080498769
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 450 Milwaukee St.
5. CITY, STATE, ZIP CODE: Menasha, Wis 54952
6. TELEPHONE NUMBER: (414) 722-4331

7. NUMBER & TYPE OF CONTAINERS	8. GALLONS	9. WASTE NAME	10. US 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-Load Tank Truck	5,000	Waste Flammable Liquid N.O.S.	Flammable	UN 1993	1. Solid 3. Mixture 2. Liquid [2]	K086	
					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): Edward F. Lukaszka
17. DATE SHIPPED (M D Y): 8 17 81

TRANSPORTER SECTION

18. COMPANY NAME: Ma. Trans Inc
19. EPA IDENTIFICATION NO.: IL D067506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

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

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Donald H Bell
26. Date Accepted (M D Y): 8 17 81

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

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

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND 016360205
34. P.O. BOX OR STREET ADDRESS: 420 So. Clay Ave.
35. CITY, STATE, ZIP CODE: Griffith Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

2400 TO 112R T-63 8/17/81
2600 TO 210R T-50 8/17/81 gm

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

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): [illegible]
40. Date Accepted (M / D / Y): 8 17 81

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

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

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

002016

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: 1001

TO: T/S/D/F AMERICAN CHEMICAL SERVICES	FROM: Generator SUN CHEMICAL CORP.
E.P.A. ID Code No. IND 016360265	E.P.A. ID Code No.
Address 420 SOUTH COLFAX	Address 1540 FAIRVIEW AVENUE
Destination GRIFFITH IND. 46319	Origin ST. LOUIS, MISSOURI 63132
Phone #312-768-3400	Phone #314-427-6805

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.)
DRUMS 11	WASTE INK	COMBUSTABLE	UN 2267	K086		NONE 173.118A
RUMS 11	WASTE INK SOLVENTS	FLAMMABLE LIQUID	UN 1210	D001 K086		FLAMMABLE
	24 DR TO DUMP BOX 9/3/81	3005				
	T-50					

PLACARDS REQUIRED FLAMMABLE

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

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

(Signature of Consignor)

FREIGHT CHARGES PREPAID [X] COLLECT [ ]

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

HAZARDOUS WASTE

HAZARDOUS WASTE

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D/F SUN CHEMICAL CORP.
E.P.A. ID Code No.
Address 1540 FAIRVIEW AVENUE
Destination ST. LOUIS, MISSOURI, 63132

EMERGENCY RESPONSE INFORMATION

CONTACT Name LYNN WINEBERGER
Phone 314-427-6850

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 8/2/81

TRANSPORTER #1 MR. FRANK INC. E.P.A. ID No. ILD 069506160
Address 201 WEST 155TH ST.,
City SOUTH HOLLAND State ILL. Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

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

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL/FACILITY

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

T/S/D/F Signature [signature] Date 8/2/81

UNLOADED AT 23 DOCK 8/27/81 T/S/D/F COPY 24 STO 204R 8/28/81 T-50 GRM TO 210 R T-50 GRM 7.13.82

002017

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 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 36100

002018

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Sun Chemical
2. EPA IDENTIFICATION NO.: WI 208 [illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 450 Milwaukee St
5. CITY, STATE, ZIP CODE: Menasha Wisc 54952
6. TELEPHONE NUMBER: (414) 722-4331

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US 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 Long Tan Tank	5,000	Waste Flammable Liquid NOS	Flammable	UN 1993	1. Solid 3. Mixture 2. Liquid ☐	K086	
					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): Edward F. Dukaszka
17. DATE SHIPPED M D Y: 9/23/81

TRANSPORTER SECTION

18. COMPANY NAME: Mr Fanny Inc
19. EPA IDENTIFICATION NO.: [illegible]
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St
21. CITY, STATE, ZIP CODE: Sun Hillard, Ill 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

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

24. AUTHORIZED SIGNATURE: Donald H Bult
25. NAME (Print): Donald H Bult
26. Date Accepted M D Y: 9/23/81

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: [illegible] Chemical Service [illegible]
33. EPA IDENTIFICATION NO.:
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax Ave
35. CITY, STATE, ZIP CODE: Gary Indiana 46319
36. TELEPHONE NUMBER: (219) [illegible]
37. COMMENTS: To 210 R T-50 9/24/81 JM

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

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): EDWARD
40. Date Accepted M D Y: 9/24/81

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

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

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0352108

Authorization Number 998991

SUNBEAM CORP (Company Name) | 5400 W Roosevelt Rd (Address) | IL D001315134

Chicago (City) | ILL (State) | 60650 (Zip) | 0316000166 (Generator Number)

WASTE HAULER(S)

Mr Frank Inc (Hauler Name) | 201 W. 155th Street South Holland, Ill (Hauler Address) | S.W.H. Registration Number 0079/005

IL D069 506160

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) | 918028902 (Site Number)

Griffith (City) | INDIANA (State) | Zip | IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Reclaiming Fluid 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:
Chlorinated Solvents	Fool

WEIGHT FOR D.O.T. 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 4000 | (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: 2-12-81 | J. Evelyn (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 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: 2 12 81

COMMENTS OR SPECIAL INSTRUCTIONS: 40 1A + 5 DRUMS T-63 Jim Murphy 2/12/81

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

002019

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0352109

Authorization Number 998991

SUNBEAM CORP (Company Name) — 5400 W Roosevelt Rd (Address) — IL D001315134

Chicago (City) — IL (State) — 60650 (Zip) — 0316000166 G (Generator Number)

WASTE HAULER(S)

Mr Frank INC (Hauler Name) — 201 W 155th St (Hauler Address) — S.W.H. Registration Number 0079004

SOUTH HOLLAND, IL — IL D069 506160

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) — IND (State) — Zip — IND01636025

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: LIQUID DEGREser Sludge — WASTE PHASE: liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Chlorinated solvent — HAZARD CLASS: (F001) ORME

WEIGHT FOR D.O.T. 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. 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: 5/6/81 — B 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) Ronald Bridgewater (Authorized Signature) — DATE: 5/6/81

(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: 5/6/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 1A T-63 5/6/81 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

002020

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0352110

Authorization Number 998991

SUNBEAM CORP (Company Name) — 5400 W Roosevelt Rd (Address) — EPA# ILD001315134

CHICAGO (City) — IL (State) — 60650 (Zip) — Phone 312-854-2616

0316000166 G (Generator Number)

WASTE HAULER(S)

MY FRANK INC (Hauler Name) — 201 W 155th St (Hauler Address) — S.W.H. Registration Number 0079/004

SOUTH HOLLAND, IL 60473 — T.NO 312-596-3377 — EPA # ILD069506160

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) — IND (State) — 46319 (Zip) — Ph # 219-924-4370 — EPA # IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DEGRESING FLUID 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: CHLORINATED SOLVENT — HAZARD CLASS: 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: 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: 7-7-81 — B. [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) Ronald B. [signature] (Authorized Signature) — DATE: 7/7/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

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

COMMENTS OR SPECIAL INSTRUCTIONS: To 14 T-63 7/7/81 JAM

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

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

SITE COPY - PART 3

002021

STATE OF ILLINOIS

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

0433445

Authorization Number 928991

SUNBEAM CORP. (Company Name) 5400 W. ROOSEVELT RD. (Address) 3128543616 (Phone Number) 0316000166 (Generator Number)

CHICAGO (City) ILL (State) 60650 (Zip) ILD069506160 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) 201 W. 155th ST SOUTH HOLLAND, ILL. (Hauler Address) S.W.H. Registration Number 0079009

Phone Number ILD069506160 EPA Number

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

Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERVICE (Facility Name) P.O. 190 (Address) 91808902 (Site Number)

GRIFFITH (City) IND (State) 46319 (Zip) 2199244270 (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 CHLORINATED SOLVENT WASTE PHASE LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: TANK TRUCK HAZARD CLASS: F001 UN or NA Number NA9189 EPA HW Number 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: 3000 (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 B. Olson (Authorized Signature) DATE: 9-10-81

WASTE HAULER

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

(1) Duke Lind (Authorized Signature) DATE: 09 10 81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 9/10/81

COMMENTS OR SPECIAL INSTRUCTIONS: 1500 TO 1A 1500 TO 1A 9/10/81 T-63 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

002022

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0433448 (1–7)

Authorization Number 998991 (8–13)

SUNBEAM CORP. (Company Name) 5400 W. ROOSEVELT (Address) 3128543616 (Phone Number) 0316000166 (Generator Number, 14–24)

CHICAGO (City) ILL (State) 60650 (Zip) ILD013150134 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) 901 W 155th ST S. HOLLAND ILL (Hauler Address) S.W.H. Registration Number 0079004 (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) P.O. BOX 190 (Address) 9180890 2 (Site Number, 39–46)

GRIFFITH (City) IND (State) 46319 (Zip) 219924 4270 (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 PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: CHLORINATED SOLVENT

HAZARD CLASS: F001

UN or NA Number: NA9189

EPA HW Number: F017

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

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

QUANTITY OF WASTE DELIVERED: 003000 (47–52) (1) GALLONS (Circle One) (2) CU YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION R.D. Patel (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) [signature] (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 WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

[signature] (Authorized Signature) DATE: 12-2-81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782-[illegible]

DISTRIBUTION: PART - 1 GENERATOR

REV. # 3

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

SITE COPY - PART 3

To 122 K T-63 GRM 12/2/81

002023

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0433800

Authorization Number 998969

Sullivan Varnish Co (Company Name) | 410 No Hart Street (Address) | 3126668080 (Phone Number) | 031 6000663 G (Generator Number)

City | State | Zip | ILD053219259 (EPA Number)

WASTE HAULER(S)

Mr. Franks, Inc. (Hauler Name) | 201 West 155th St. So. Holland, Il (Hauler Address) | S.W.H. Registration Number DXX 007003

312-596-3377 (Phone Number) | Fed. Id. #ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | Colfax Ave., Griffith, IND (Address) | 918089 02 (Site Number)

City | State | Zip | 2199x4-1370 (Phone Number) | ~~002400~~ (EPA Number) IND016360265

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Flammable waste solvents | WASTE PHASE Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Waste Solvent UN1993 | 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: 003000 | 1 GALLONS (Circle One) 2 CU. YDS.

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 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) [signature] (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 WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE: 10 5 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO, IB 10/5/81 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

002024

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0375709

Authorization Number 998969

Sullivan Varnish Co (Company Name) | 410 No. Hart Street (Address) | 0316000663 EPA ILD053219259 Generator Number

Chicago (City) | Illinois (State) | 60622 (Zip)

WASTE HAULER(S)

Mr. Franks, Inc. (Hauler Name) | 201 West 155th St. So. Holland, Il (Hauler Address) | S.W.H. Registration Number 007003

Hauler Name | Hauler Address | S.W.H. Registration Number Fed. Id. #ILD069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 So. Colfax Ave. Griffith, IN (Address) | 91808902 Site Number

City | State | Zip | EPA. IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Flammable waste solvents

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Waste Solvent UN1993

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: _____

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: November 10, 1981 — Will Kenan 3000 (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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: 11/10/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

(Authorized Signature) DATE: 11/10/81

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

To DA: 1B T-63 GRM 11/10/81

SITE COPY - PART 3

002025

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0270972

Authorization Number 997005

Standard T Chemical Co. (Company Name) | 10th & Washington Streets (Address) | U.S. E.P.A. NO. ILD 005536164

Chicago Heights (City) | Illinois (State) | 60411 (Zip) | 0310450007 (Generator Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 701 W. 155th St. South Holland, Ill. 60473 (Hauler Address) | S.W.H. Registration Number 0079018 | U.S. E.P.A. NO. 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) | 918089 02 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | U.S. E.P.A. NO. IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: K-078 | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

Solvent Cleaning Wastes

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

SHIPPING DESCRIPTION: Wastes Flammable Liquid N. O. S. | 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: 00505Q 5050 | 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. IEPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: January 15, 1981 | R.W. Nieri (Authorized Signature) R. W. Nieri

WASTE HAULER

I HEREBY CERTIFY 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: 01 15 81

COMMENTS OR SPECIAL INSTRUCTIONS: Pumped to 125R 1/15/81 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

002026

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0270974

Authorization Number 997005

Standard T Chemical Co. (Company Name) — 10th & Washington Sts. (Address)

Chicago Heights (City) — Illinois (State) — 60411 (Zip)

0310450007 (Generator Number)

U.S. E.P.A. NO. ILD 005536164

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) — 701 W. 155th St. South Holland, Ill. 60473 (Hauler Address)

S.W.H. Registration Number 0079019

U.S. E.P.A. NO. 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)

Site Number 91808902

Griffith (City) — Indiana (State) — 46319 (Zip)

U.S. E.P.A. NO. IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: K-078

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

Solvent Cleaning Wastes

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

SHIPPING DESCRIPTION: Wastes Flammable Liquid N. O. S.

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: 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: January 20, 1981 (Authorized Signature) R. L. Ward

WASTE HAULER

I HEREBY CERTIFY 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: 1 20 81

COMMENTS OR SPECIAL INSTRUCTIONS: To 124E 1/20/81 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

002027

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0270986

Authorization Number 997005

Standard T Chemical Co. (Company Name) | 10th & Washington Streets (Address)

Chicago Heights (City) | Illinois (State) | 60411 (Zip)

0310450007 (Generator Number)

U.S. E.P.A. NO. ILD 005536164

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 701 W. 155th Street (Hauler Address) South Holland, Illinois 60473

S.W.H. Registration Number 0079018

U.S. E.P.A. NO. 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)

Site Number 91808902

Griffith (City) | Indiana (State) | 46319 (Zip)

U.S. E.P.A. NO. IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: K-078

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

Solvent Cleaning Wastes

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

SHIPPING DESCRIPTION: Wastes - Flammable Liquid

HAZARD CLASS: 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: 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: March 11, 1981

R W Niemi (Authorized Signature) R. W. Niemi

WASTE HAULER

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

(1) Donald H Burt (Authorized Signature) DATE: 03 / 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:

Bob Mauel (Authorized Signature) DATE: 03 / 11 / 81

COMMENTS OR SPECIAL INSTRUCTIONS: To 142 R 3/11/81 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

002028

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0270976

Authorization Number 9 9 7 0 0 5

Standard T Chemical Co. (Company Name) — 10th & Washington Streets (Address)

0 3 1 0 4 5 0 0 0 7 G (Generator Number)

Chicago Heights (City) — Illinois (State) — 60411 (Zip) — U.S. E.P.A. NO. ILD 005536164

WASTE HAULER(S)

Mr. Frank, INC. (Hauler Name) — 701 W. 155th Street (Hauler Address) South Holland, IL 60473 — S.W.H. Registration Number 0 0 7 9 0 1 9

U.S. E.P.A. NO. 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 (City) — Indiana (State) — 46319 (Zip) — U.S. EPA NO. ILD 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: K-078 — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

Solvnet Cleaning Wastes

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

SHIPPING DESCRIPTION: Wastes Flammable Liquid — HAZARD CLASS: 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: 0 0 5 0 0 0 — (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 + EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: January 27, 1981 — R. W. Niemi (Authorized Signature) — R. W. Niemi

WASTE HAULER

I HEREBY CERTIFY 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 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: 1 27 81

COMMENTS OR SPECIAL INSTRUCTIONS: To 125 X 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

002029

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0369376 (1–7)

Authorization Number 997005 (8–13)

Standard T Chemical Co. (Company Name) — 10th & Washington Streets (Address)

Chicago Heights (City) — Illinois (State) — 60411 (Zip)

0310450007 G (14–24) Generator Number

U.S. E.P.A. NO. ILD 005536164

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) — 701 W. 155th Street South Holland, Ill. 60473 (Hauler Address)

S.W.H. Registration Number 0079/018 (25–31)

U.S. E.P.A. NO. ILD 069506160

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)

91808902 (39–46) Site Number

Griffith (City) — Indiana (State) — 46319 (Zip)

U.S. E.P.A. NO. IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: [redacted]

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

Solvent Cleaning Wastes F002

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

SHIPPING DESCRIPTION: Wastes - [redacted] — HAZARD CLASS: [redacted]

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) 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.

K078

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: April 1, 1981 — R. W. Niemi (Authorized Signature) — R. W. Niemi

WASTE HAULER

I HEREBY CERTIFY 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: 04/01/81 (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:

[signature] (Authorized Signature) — DATE: 4/1/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 125K T-63 4/1/81 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

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0452096

Authorization Number 997005

Standard T Chemical Co. (Company Name) | 10th & Washington Sts. (Address) | 3127551223 (Phone Number) | 0310450007 (Generator Number)

Chicago Heights (City) | Illinois (State) | 60411 (Zip) | ILD055361164 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th Street South Holland, Ill. (Hauler Address) | S.W.H. Registration Number 0079029 | 3125963377 (Phone Number) | ILD069506160 (EPA Number)

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

Griffith (City) | Indiana (State) | 46319 (Zip) | 2199244370/ (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Spent Mixed 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. | HAZARD CLASS: ORM-E | NA1993 (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 | 1 GALLONS (Circle One) 2 CU. YDS. 1

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) R. W. Niemd | DATE: May 29, 1981

WASTE HAULER

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

(1) ____ (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 WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

____ (Authorized Signature) | DATE: 5/29/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125R T-63 5/29/81 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

002031

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0452085

Authorization Number 997005

Standard T Chemical Co. (Company Name) — 10th & Washington (Address) — 3127551223031045000 7 (Phone Number) — G (Generator Number)

Chicago Heights (City) — Illinois 60411 (State, Zip) — ILD055361641 (EPA Number)

WASTE HAULER(S)

Mr. Frank, INC. (Hauler Name) — 201 W. 155th Street (Hauler Address) — S.W.H. Registration Number 0079/084

Industrial Disposal — South Holland — 312 554 3377 (Phone Number) — ILD069506160 (EPA Number)

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

Phone Number — EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Company (Facility Name) — 420 South 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: Spent Mixed 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 — F005 — UN or NA Number — EPA HW Number

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one) — WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 005000 — 1 GALLONS / 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 — R. W. Miemi (Authorized Signature) — DATE: April 21, 1981

WASTE HAULER

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

(1) ____ (Authorized Signature) — DATE: 04/21/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

____ (Authorized Signature) — DATE: 4/21/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 1427 T-50 4/21/81 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

002032

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0452099 (1–7)

Authorization Number 997005 (8–13)

Standard T Chemical Co. (Company Name) | 10th & Washington Sts. (Address) | 3127551223 (Phone Number) | 0310450007 (14–24) (G) Generator Number

Chicago Heights (City) | Illinois (State) | 60411 (Zip) | ILD055361 64 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th Street 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 Co. (Facility Name) | 420 South Colfax (Address) | 91808902 (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: Spent Mixed 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. | HAZARD CLASS: ORM-E | NA1993 (UN or NA Number) | K078 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 005000 (47–52) (GALLONS / 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) R. W. Niemi | DATE: June 3, 1981

WASTE HAULER

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

(1) _____ (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 WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) | DATE: 6/3/81 (65)

COMMENTS OR SPECIAL INSTRUCTIONS: 1000 TO 124R T-63 6/3/81
4000 TO 125R T-63

IN ILLINOIS: 217 / 782-3637 — *24 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

002033

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0471250

Authorization Number 997005

Standard T Chemical Co. (Company Name) | 10th & Washington Sts (Address) | 3127551223 (Phone Number) | 0310450007 (Generator Number) G

Chicago Heights (City) | Illinois (State) | 60411 (Zip) | ILD05536164 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St. South Holland, IL (Hauler Address) | S.W.H. Registration Number 0079-025

3125963377 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

Griffith (City) | Indiana (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: /Spent Mixed 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. | HAZARD CLASS: ORM-E | NA1993 (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 | 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 R W Niemi (Authorized Signature) R. W. Niemi | DATE: July 1, 1981

WASTE HAULER

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

(1) Donald H Bult (Authorized Signature) | DATE 00/01/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

_____ (Authorized Signature) | DATE: 7/1/81

COMMENTS OR SPECIAL INSTRUCTIONS: [signature] TO 126E T-63 7/1/81 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

002034

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0471256

Authorization Number 997005

Standard T Chemical	10th & Washington	3127551223	0310450007
(Company Name)	Address	Phone Number	Generator Number

Chicago Heights	Illinois	60411	ILD05536164
City	State	Zip	EPA Number

WASTE HAULER(S)

Mr. Frank, Inc.	201 W. 155th St. South Holland, Ill.	S.W.H. Registration Number 0079009
Hauler Name	Hauler Address	

3125963377 — Phone Number
ILD069506160 — EPA Number

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

Phone Number — EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Co.	420 So. Colfax			918089X02
(Facility Name)	Address			Site Number

Griffith	Indiana	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: Spent Mixed 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. — HAZARD CLASS: ORM-E — UN or NA Number: NA1993 — EPA HW Number: K078

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) — WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 005000 — 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 — R. W. Niemi (Authorized Signature) R. W. Niemi — DATE: August 24, 1981

WASTE HAULER

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

(1) [signature] (Authorized Signature) — DATE: 08/24/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY — HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

[signature] (Authorized Signature) — DATE: 8/24/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 124 K T-63 8/24/81 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

002035

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0471259

Authorization Number 997005

Standard T Chemical Co.	10th & Washington St.	3127551223	0310450007 G
(Company Name)	Address	Phone Number	Generator Number
Chicago Heights	Illinois 60411		ILD05536164
City	State Zip		EPA Number

WASTE HAULER(S)

Mr. Frank, Inc.	201 W. 155th St. South Holland, Ill.	S.W.H. Registration Number 00790018
Hauler Name	Hauler Address	
	3125963377	ILD069506160
	Phone Number	EPA Number
Hauler Name	Hauler Address	S.W.H. Registration Number
	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Co	420 s. Colfax			91808902
(Facility Name)	Address			Site Number
Griffith	Indiana	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: Spent Mixed 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
Solvent N.O.S.	ORM-E	NA1993	K078

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 004700 (GALLONS) (Circle One) 2 CU. YDS. 1

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) R. W. Niemi DATE: Sept. 23, 1981

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 09/23/81

(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: 9/23/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125E- T-63 9/23/81 JSM

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

002036

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0471263 (1–7)

Authorization Number 997005 (8–13)

Standard T Chemical (Company Name) | 10th & Washington (Address) | 3127551223 (Phone Number, 14) | 0310450007 (Generator Number, 24) G

Chicago Heights (City) | Illinois (State) | 60411 (Zip) | ILD055361 64 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St. South Holland, Ill. (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 Co. (Facility Name) | 420 S. Colfax (Address) | 91808902 (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: Spent Mixed Solvents (Organic) WASTE 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. | HAZARD CLASS: ORM-E | NA1993 (UN or NA Number) | K078 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 004500 (47–52) 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 R. W. Niemi (Authorized Signature) R. W. Niemi DATE: Oct. 1, 1981

WASTE HAULER

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

(1) Michael B. Martin (Authorized Signature) DATE: 10/01/81 (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.

N. Schmitt (Authorized Signature) DATE: 10/1/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 211 E T-50 10/1/81 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

002037

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0471271

Authorization Number 997005

(Company Name)	Address	Phone Number	Generator Number
Standard T Chemical Co.	10th & Washington St.	3127551223	0310450007

City	State	Zip	EPA Number
Chicago Heights	Illinois	60411	ILD05536164

WASTE HAULER(S)

Hauler Name	Hauler Address	S.W.H. Registration Number	Phone Number	EPA Number
Mr. Frank, Inc.	201 W. 155th St. South Holland, Ill. 60477	0079/029	3125963377	ILD069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number	City	State	Zip	Phone Number	EPA Number
XAmerican Chemical Co.	420 S. Colfax	91808902	Griffith	Indiana	46319	2199244370	IND016360261

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Spent Mixed 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
Solvent N.O.S.	ORM-E	NA1993	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 (GALLONS) (Circle One) 1 2 CU. YDS 1

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) R. W. Niemi DATE October 23, 1981

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 10/23/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 10/23/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 126X T-63 10/23/81 JM

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

[illegible]ON: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

SITE COPY - PART 3

002038

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

0471268

Authorization Number 997005

SPECIAL WASTE HAULING MANIFEST

STANDARD 7 CHEMICAL CO.

10th & Washington St. 3127551223 0310450007 G

Address | Phone Number | Generator Number

Illinois 60411 ILD055361164

City | State | Zip | EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. 201 W. 155th St. South Holland, Ill. 60473 S.W.H. Registration Number 0079023

Hauler Name | Hauler Address | Phone Number | EPA Number

3125963377 ILD069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Co. 420 S. Colfax 91808902

(Facility Name) | Address | Site Number

Griffith Indiana 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: Spent Mixed 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. HAZARD CLASS: ORM-E

NA1993 (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 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 _____ (Authorized Signature) R. W. Niemi DATE: October 16, 1981

WASTE HAULER

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

(1) Tony Grad (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 WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 10/16/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 125R 7-63 10/16/81 gam

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

002039

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0471275 (1–7)

Authorization Number 997005 (8–13)

Standard T Chemical Co. (Company Name) | 10th & Washington St. (Address) | 3127551223 (Phone Number) | 0310450007 (14–24 Generator Number)

Chicago Heights (City) | Illinois (State) | 60411 (Zip) | ILD055361 64 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St. South Holland, Ill. (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 Chemical Co. (Facility Name) | 420 S. Colfax (Address) | 91808902 (39–46 Site Number)

Griffith (City) | Inidiana (State) | 46319 (Zip) | 2199244370 / IND016360265 (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: Spent Mixed 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. | HAZARD CLASS: ORM-E | NA1993 (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: ~~XXXXXXXX~~ 4600 (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 R. W. Niemi (Authorized Signature) R. W. Niemi | DATE: November 18, 1981

WASTE HAULER

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

(1) _____ (Authorized Signature) | DATE: 11/18/81 (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: 11/18/81 (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 210 R - T-50 GRM 11/18/81

002040

0471277

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

Authorization Number 997005

Standard T Chemical Co. (Company Name) | 10th & Washington St. (Address) | 3127551223 (Phone Number) | 0310450007 (Generator Number)

Chicago Heights (City) | Illinois (State) | 60411 (Zip) | ILD055361 64 (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 0079/029

3125963377 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

Griffith (City) | INDiana (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Spent Mixed 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. | HAZARD CLASS: ORM-E | NA1993 (UN or NA Number) | K078 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 004500 | 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 R. W. Niemi (Authorized Signature) R. W. Niemi DATE: December 1, 1981

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE: 12/01/81

(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: 12/1/81

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 210K T-50 GRM 12/1/81

002041

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0471276 (1–7)

Authorization Number 997005 (8–13)

Standard T Chemical Co. (Company Name) | 10th & Washington (Address) | 3127551223 (Phone Number) | 0310450007 (14–24) Generator Number

Chicago Heights (City) | Illinois (State) | 60411 (Zip) | ILD055361 64 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St. South Holland, Ill. 60477 (Hauler Address) | S.W.H. Registration Number 0079/029 (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 (39–46) Site Number

Griffith (City) | Indiana (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360 26 (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: Spent Mixed 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. | HAZARD CLASS: ORM-E | NA1993 (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~~ 06450 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 R. W. Niemic (Authorized Signature) R. W. Niemic | DATE: November 24, 1981

WASTE HAULER

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

(1) [illegible] (Authorized Signature) | DATE: 11/24/81 (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.

PO [illegible] (Authorized Signature) | DATE: 11/24/81 (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 211 R TSO GRM 11/24/81

002042

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

TO BE COMPLETED BY WASTE GENERATOR

SPECIAL WASTE HAULING MANIFEST

0378749

312-544-3500

Authorization Number 997482

IL GENERATOR 0310150002

Generator Number

R. C. R. A. IL D005456033

Stanadyne (Company Name) — 2701 Washington (Address)
Bellwood (City) — ILL. (State) — 60104 (Zip)

WASTE HAULER(S)

Contract Hauler for American Chem.
Strand Trucking (Hauler Name) — Crestwood ILL. (Hauler Address) — 312-383-8440
S.W.H. Registration Number 0024002
Tractor only (Trailer belongs to American Chem.) ILT000646810

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE Reclaim Site

American Chem. Services (Facility Name) — 420 S. Colfax Avenue (Address) — 91808902 (Site Number)
Griffith (City) — IND. (State) — 46319 (Zip)
INDIANA Waste Hauler Trailer #262

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: (Reclaim) Chlorinated Solvents — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

wt = 14.556#/gal

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

SHIPPING DESCRIPTION: Waste Chlorinated Solvents — HAZARD CLASS: HAZARDOUS

WEIGHT FOR D.O.T. USE 546,707 LBS TONS (circle one)

EPA Waste No U228 — DOT ID. # UN1710 — NON-FLAMMABLE

Generic: F002

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

QUANTITY OF WASTE DELIVERED: 003575 (1 GALLONS (Circle One) / 2 CU. YDS.)

65 gal

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/3/81 — (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: 6/3/81

(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: 6/3/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 6/3/81
49 TO #1A 6/12/81 T-63 gm 16 TO #3 STILL 6/15/81 T-63 gm

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

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

SITE COPY - PART 3

002043

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0176474

WASTE GENERATOR

Authorization Number 997482

Stonadyne (Company Name) — 2701 WASHINGTON BLVD. (Address) — IL GENERATOR 0310150002 (Generator Number)

Bellwood (City) — IL (State) — 60104 (Zip) — R.C.R.A. IL D005456033

WASTE HAULER(S):

Contract hauler for American Chem. Service Inc. (Amer. Chem. Trailer)

(1) Strand Trucking (Hauler Name) — Crestwood, IL. (Hauler Address) — S.W.H. Registration Number 0024/001

ILT000646810

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Service Inc. (Facility Name) — 4205 S. Colfax Ave. (Address) — 918088902 (Site Number)

Griffith (City) — IN. (State) — 46319 (Zip) — IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: (Reclaim) CHLORINATED SOLVENTS — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

wt = 14,556#/gal.

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

SHIPPING DESCRIPTION: WASTE CHLORINATED SOLVENTS — HAZARD CLASS: HAZARDOUS NON-FLAMMABLE

E.P.A. WASTE NO. U228 Generic F002 — DOT I.D.# UN1710

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/21/81 — (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2530 — 1 GALLONS 2 CU. YDS. (Circle One)

METHOD OF SHIPMENT (Circle One) 46 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: 1/21/81

(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: 1/21/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 1/21/81 - UNLOADED 1/22/81 Jim Murphy
PUMP 20 DRUMS TO #2 STILL 2/23/81 T-63 Jim Murphy 19 DRS TO #1 STILL (6/6B) 4/7/81 T-63 JTM
7 DRUMS TO #3 STILL

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

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

SITE COPY - PART 3 T-63 6/16/81 JTM.

002044

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 7 1 1 0 (8–13)

U.S. EPA No. ILD005140108

Specialty Coatings Company (Company Name) — 2500 Delta Lane (Address)

Elk Grove Village (City) — Illinois (State) — 60007 (Zip)

0 3 1 4 4 0 0 0 2 9 (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 0 0 7 9 0 1 8 (25–31)

US EPA No. 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)

9 1 8 0 8 9 0 2 (39–46) Site Number

Griffith (City) — INdiana (State) — 46319 (Zip)

US EPA No. 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: Solvent N.O.S.

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: 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.

UN1993

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: Feb 24 1981 — Lucille Bobbitt (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 Owens (Authorized Signature) — DATE: 02 / 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:

Bob Moore Jr. (Authorized Signature) — DATE: 02 24 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 125R 2/24/81 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

002045

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0333679 (1–7)

Authorization Number 9 9 7 1 1 0 (8–13)

U.S.EPA No.ILD005140108

Specialty Coatings Co. (Company Name) — 2500 Delta Lane (Address)

Elk Grove Village, (City) — Illinois (State) — 60007 (Zip)

0 3 1 4 4 0 0 0 2 9 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 0 0 7 9 /028 (25–31)

U.S.EPA No.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)

9 1 8 0 8 9 0 2 (39–46) Site Number

Griffith (City) — Indiana (State) — 46319 (Zip)

U.S.EPA No.IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvent 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: Solvent, N.O.S.

HAZARD CLASS: Flammable Liquid (UN 1993)

WEIGHT FOR D.O.T. USE 40,000 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 (47–52)

1 GALLONS (Circle One) 2 CU. YDS. 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: 10/16/81 — Lucille Bobbitt (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 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: / / (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125R T-03 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

002046

TO BE COMPLETED BY WASTE GENERATOR

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

0116007

Authorization Number 997110
US EPA No. ILD005140108

Specialty Coatings Co. (Company Name) | 2500 Delta Lane (Address)
Elk Grove Village, (City) | Illinois (State) | 60007 (Zip)

031440002 9 G (Generator Number)

WASTE HAULER(S)

(1) Mr. Frank (Hauler Name) | 201 W. 155th St. South Holland, IL (Hauler Address)
S.W.H. Registration Number 0079/021
US EPA No. 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)
Site Number 9180890 2
Griffith (City) | Indiana (State) | 46319 (Zip)
US EPA No. IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvent 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: Solvent, N.O.S.
HAZARD CLASS: Flammable Liquid 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: Nov. 23, 1981 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005500 (1 GALLONS / 2 CU. YDS.) (Circle One) 1

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

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

(1) (Authorized Signature) DATE: 11/23/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

(Authorized Signature) DATE: 11/23/81

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 211 K J-50 GRM 11/23/81

002047

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

SB 12-1
MANIFEST DOCUMENT NUMBER

PO 32927
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 005070750	South Bend Toy Mfg. Co, Inc PO Box 3675, S.B. IN 46619 219/289-9275	12/9/81
TRANSPORTER # 1	ILD069506160	Mr. Frank, Inc. 201 W 155th St S. Holland Ill 60473 312/596-3377	12/9/81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service, Inc PO Box 190, Griffith, IN 46319 219/924-4370	12/9/81
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)
26 DRUMS	X	F017	WASTE FLAMMABLE LIQUID N.O.S	UN 1993	FLAMMABLE	LESS THAN 60°C	55 gal	1430 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

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

COD Amt: $

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)

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

TOTAL CHARGES. $

FREIGHT CHARGES
FREIGHT PREPAID [illegible] ☐

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

Benny Lubelski
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

[signature] 12-9-81
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

[signature] 12-9-81
TSDF SIGNATURE DATE

1

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

ORIGINAL - RETURN TO GENERATOR

002048

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	IND 064702889	South Bend Medical Foundation 531 N. Main Street So. Bend, IN 46601 234-4176	
TRANSPORTER # 1	IND 009842824	Landgrebe State Road 130 W Valparaiso, IN 46383	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DIS-POSAL FACILITY	IND 016360265	American Chemical Services 420 So. Colfax Griffith, IN 46319 924-4320	5/27
TSDF TREATMENT STORAGE OR DIS-POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
Drum		D001	Solvent N.O.S./Flammable Liquid				55 gal			

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

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

$ _____ per _____

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

Signature

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

(Signature of Consignor)

TOTAL CHARGES: $

FREIGHT CHARGES

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

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

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

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

This is to certify acceptance of the hazardous waste shipment.

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

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

GENERATOR'S SIGNATURE DATE

UNLOADED AT DOCK 5/26/81

TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TO 142R T-63 5/29/81 JTM

TSDF COPY

002049

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	IND 064702889	South Bend Medical Foundation 531 N. Main Street So. Bend, IN 46601 234-4176	
TRANSPORTER # 1	IND009842824	LANDGREBE STATE RD 130W VALPARAISO IN 46383	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Services 420 S. Colfax Griffith, IN 46319 924-4390	4/7/81
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)
Drum		D001	Solvent N.O.S./Flammable Liquid				55 gal			

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

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

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

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

TOTAL CHARGES: $

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

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

CERTIFICATION

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

This is to certify acceptance of the hazardous waste shipment.

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

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

GENERATOR'S SIGNATURE DATE

UNLOADED AT DOCK 4/7/81

TSDF SIGNATURE DATE 4/7/81

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STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TO 124TR T-63 4/24/81 JJM

TSDF COPY

002050

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	IND 064702889	South Bend Medical Foundation 531 N. Main Street So. Bend, IN 46601 234-4176	5/1
TRANSPORTER # 1	IND 009842824	Landgrebe State Road 130 W Valparaiso, IN 46383	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Services 420 So. Colfax Griffith, IN 46319 924-4370	6/26/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1 drum		D001	Solvent N.O.S./Flammable Liquid				55 gal			

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

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

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

_____ Signature

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

_____ (Signature of Consignor)

TOTAL CHARGES: $

FREIGHT CHARGES

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

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

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

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

This is to certify acceptance of the hazardous waste shipment.

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

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

GENERATOR'S SIGNATURE DATE TSDF SIGNATURE DATE

UNLOADED AT DOCK 6/26/81 TO 126R T-63 6/30/81 9AM

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TSDF COPY

002051

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	IND 064702889	South Bend Medical Foundation 531 N. Main Street So. Bend, IN 46601 234-4176	
TRANSPORTER # 1	IND 009842824	Landgrebe State Road 130 W Valparaiso, IN 46383	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Services 420 So. Colfax Griffith, IN 46319 924-4370	8/13
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		D001	Solvent N.O.S./Flammable Liquid				55 gal			

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

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 8/13/81

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 Jim Cichellam DATE 8-13-81

TO 124E T-63 8/13/81 9 pm

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TSDF COPY

002052

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	IND 064702889	South Bend Medical Foundation 531 N. Main Street So. Bend, IN 46601 234-4176	
TRANSPORTER # 1	IND 009842824	Landgrebe State Road 130 W Valparaiso, IN 46383	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Services 420 So. Colfax Griffith, IN 46319 924-4370	10/16
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)
2 drums		D001	Solvent N.O.S./Flammable Liquid				55 gal			

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

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

UNLOADED AT DOCK 10/16/81 TO 124 TL T-63 10/21/81 JRM

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TSDF COPY

002053

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	IND 064702889	South Bend Medical Foundation 531 N. Main Street So. Bend, IN 46601 234-4176	
TRANSPORTER # 1	IND 009842824	State Road 130 W Landgrebe Valparaiso, IN 46383	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Services 420 S. Golfax Griffith, IN 46319 924-4370	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1 drum		D001	Solvent N.O.S./Flammable Liquid				55 gal			

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES

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

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

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

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

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

CERTIFICATION

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

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

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

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

TSDF SIGNATURE DATE 11/10/81

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To 126 TK T-63 EPW 11/10/81

TSDF COPY

002054

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0269636

Authorization Number 998111

SIMKINS (Company Name) — 5701 W. OGDEN (Address)

CICERO (City) — ILL (State) — (Zip)

031051 0095 G (Generator Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) — SO HOLLAND, ILL (Hauler Address) — S.W.H. Registration Number 0079 625

ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SER. (Facility Name) — 420 SO CALFAX AVE (Address) — 918089 02 (Site Number)

GRIFFITH (City) — IND (State) — 43619 (Zip) — IND. 016360265

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: WASTE SOLVENT — HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE _____ 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: 8-3-81 — [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) Tom Berry (Authorized Signature) — DATE: 8 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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) — DATE: 8 3 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125R T-63 8/3/81 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

002055

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0276625

Authorization Number 998719

Sloan Valve Company (Company Name) — 10500 Seymour Avenue (Address) — ILD 005121033

Franklin Park (City) — Illinois (State) — 60131 (Zip) — 0310960009 (Generator Number)

WASTE HAULER(S)

Mr. Frank Inc (Hauler Name) — 201 W. 155th St So Holland Ill (Hauler Address) — S.W.H. Registration Number 0079026

Hauler Name — Hauler Address — ILD 069506160 S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

Griffith (City) — Indiana (State) — Zip — IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Tri Chlorethane — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: — HAZARD CLASS: ORM-A — WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 001500 — 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: 7/6/81 — (Authorized Signature) — ORM-A

WASTE HAULER

I HEREBY CERTIFY 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 Bult (Authorized Signature) — DATE: 7 / 6 / 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 Mauch (Authorized Signature) — DATE: 07/06/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO #1 STILL T-63 7/6/81 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

002056

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0332503

Authorization Number 998719

ILD005121033

Sloan Valve Company (Company Name) — 10500 Seymour Avenue (Address)

10500 Seymour Ave. Franklin Park, Illinois 60131 (City, State, Zip)

0310960009 G (Generator Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) — 201 W 155th St (Hauler Address) So Holland, Ill

S.W.H. Registration Number 007900 27

ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chamical Service (Facility Name) — 420 COLFAX (Address) — 91808902 (Site Number)

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ~~Chlorinated Solvent~~ 111 TRI CHLOROETHANE

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: — HAZARD CLASS: ORM-A

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

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

QUANTITY OF WASTE DELIVERED: 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.

UN2831

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/27/81 — X Diana Keser (Authorized Signature) — ORM-A

WASTE HAULER

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

(1) [signature] (Authorized Signature) — DATE: 1/27/81 (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:

[signature] (Authorized Signature) — DATE: 1/27/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED TO 7A - 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

002057

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0382203

Authorization Number 991524

SHIELD COATINGS, INC. (Company Name) 3216-24 So. Shields (Address)

Chicago (City) ILL. (State) 60616 (Zip)

031-6000725 G (Generator Number)

WASTE HAULER(S)

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

S.W.H. Registration Number 0079025

ILD069506160

Hauler Name Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) IND. (State) (Zip) IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC 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: UN 1993

SHIPPING DESCRIPTION: HAZARD CLASS: FLAMABLE

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

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

QUANTITY OF WASTE DELIVERED: 004500

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 07/20/81 Zika Stamenkovich (Authorized Signature)

WASTE HAULER

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

(1) Mike Martin (Authorized Signature) DATE 07/20/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 07/20/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 124TL T-63 7/20/81 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

002058

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

XL 002623
MANIFEST DOCUMENT NUMBER

XL 002623
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	OHD074552258	Sherwin-Williams Co., 601 Lime Rd., Cleve., Oh. 44113 216-566-2065	11-3-81
TRANSPORTER # 1	ILD069506160	Mr. Frank, Inc., 201 W. 155th St., So. Holland, Il. 60473	11-3-81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DIS-POSAL FACILITY	IND016360265	American Chemical Service, 420 S. Colfax, Griffith, In. 46319	11/4/81
TSDF TREATMENT STORAGE OR DIS-POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGE (For Carri Use Only
1 T/W	X	D001	Waste Paint, Flammable Liquid	1263			Gals.	3,200 Gl.		

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 (tol free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are dischargec creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

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

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

_____ Signature

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

(Signature of Consignor)

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

CERTIFICATION

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

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

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

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

TSDF SIGNATURE DATE

5

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To 210 R T-50 TRIP COPY 11/4/81

002059

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

XL 002534
MANIFEST DOCUMENT NUMBER

XL 002534
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	OHD074552258	Sherwin-Williams Co., 601 Lime Road, Cleve., Oh. 44113 216-566-2865	10-7-81
TRANSPORTER # 1	ILD069506160	Mr. Frank, Inc., 201 W. 155th St., So. Holland, Ill. 60473	10-7-81
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service, 420 S. Colfax, Griffith, In.46319	10/2/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1 T/W	x	D001	Waste Paint, Liquid	1263			Gals.	4,500		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

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

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

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

TOTAL CHARGES: $

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

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

CERTIFICATION

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

This is to certify acceptance of the hazardous waste shipment.

[signature] 10-7-81
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

GENERATOR'S SIGNATURE DATE

TSDF SIGNATURE DATE

To 210 I T-50 10/8/81 JM

5

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TSDF COPY

002060

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

XL 002470
MANIFEST DOCUMENT NUMBER

XL 002470
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	OHD074552258	Sherwin-Williams Co., 601 Canal Rd., Cleve., Oh. 44113 216-566-2865	7-22-81
TRANSPORTER # 1	ILD069506160	Mr. Frank, Inc., 201 W. 155th, So. Holland, Ill. 60473	7-22-81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	NAmerican Chemical Service, 420 S. Colfax, Griffith, In.46319 219-924-4370	9/23/81
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 Carrie Use Only)
1 T/W	X	D001	Waste Paint, Liquid Flammable	1263			Gals.	~~4,500~~ 4,000 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

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

GENERATOR'S SIGNATURE DATE

TSDF SIGNATURE DATE 9/23/81

To 210 X FT-50 9/23/81 JJM.

5

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TSDF COPY

002061

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

XL 002065
MANIFEST DOCUMENT NUMBER

XL 002065
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	OHD074552258	216-566-2865 Sherwin-Williams Co., 601 Lime Road, Cleve., Oh. 44113	8-4-81
TRANSPORTER # 1	ILD069506160	Mr. Frank Inc., 201 W. 155th, So. Holland, Ill. 60473	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DIS—POSAL FACILITY	IND016360265	219-924-4370 American Chemical Service, 420 S. Colfax, Griffith, In.46319	8/5/83
TSDF TREATMENT STORAGE OR DIS—POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrie Use Only)
1 T/W		D001	Waste Paint, Liquid	1263			Gals.	4,200		

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 8 4 81 DATE

This is to certify acceptance of the hazardous waste shipment.
8/4/81
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 8/5/83 DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TRANSPORTER #2

002062

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

XL 002065
MANIFEST DOCUMENT NUMBER

XL 002065
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	OHD074552258	216-566-2865 Sherwin-Williams Co., 601 Lime Road, Cleve., Oh. 44113	8-4-81
TRANSPORTER # 1	ILD069506160	Mr. Frank Inc., 201 W. 155th, So. Holland, Ill. 60473	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DIS—POSAL FACILITY	IND016360265	219-924-4370 American Chemical Service, 420 S. Colfax, Griffith, In. 46319	8/5/81
TSDF TREATMENT STORAGE OR DIS—POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1 T/W		D001	Waste Paint, Liquid	1263			Gals.	4,200		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED
Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

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

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

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

TOTAL CHARGES: $

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

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

CERTIFICATION

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

This is to certify acceptance of the hazardous waste shipment.

8/4/81
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

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

GENERATOR'S SIGNATURE 8-4-81 DATE TSDF SIGNATURE 8/5/81 DATE

TO EAST AGIT T-50 8/4/81 9AM

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TRANSPORTER #1

002063

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

XL 001507
MANIFEST DOCUMENT NUMBER

XL 001507
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	OHD074552258	Sherwin-Williams Co., 601 Canal Rd., Cleve., Ohio 44113 216-566-2865	6-30-81
TRANSPORTER # 1	ILD069506160	Mr. Frank, Inc. 201 W. 155th, So. Holland, Ill. 60473	6-30-81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service, 420 S. Colfax, Griffith, In. 46319 219-924-4370	7/1/81
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 T/W		D001	Waste Paint, Liquid	1263			Gals.	~~4,300~~ 4,200		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

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

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

CERTIFICATION

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

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

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

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

TSDF SIGNATURE DATE

TO WEST AGIT T-50 1/1/81 [illegible]

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

002064

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

XL 001408
MANIFEST DOCUMENT NUMBER

~~Xlx0010~~ XL 001408
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	OHD074552258	Sherwin-Williams Co., 601 Lime Rd., Cleveland, Oh. 44113 216-566-2865	6-2-81
TRANSPORTER # 1	ILD069506160	Mr. Frank Inc., 201 W. 155th St., So. Holland, Ill. 60473	6-2-81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DIS—POSAL FACILITY	IND016360265	American Chemical Service, 420 S. Colfax, Griffith, In. 46319 219-924-4370	6/3/81
TSDF TREATMENT STORAGE OR DIS—POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrie Use Only)
1 T/W		D001	Waste Paint, Liquid	1263			Gals.	~~4300~~ Gl. 4300		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

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

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

CERTIFICATION

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

This is to certify acceptance of the hazardous waste shipment.

6-2-81
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

GENERATOR'S SIGNATURE 6/2/81 DATE

TSDF SIGNATURE 6/3/81 DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TRANSPORTER #1

002065

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

XL 001236
MANIFEST DOCUMENT NUMBER

XL 001236
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	OHD074552258	Sherwin-Williams Co., 601 Lime Rd., Cleve., Ohio 44113 216-566-2865	4-23-81
TRANSPORTER # 1	ILD069806160	Mr. Frank Inc., 201 W. 155th, So. Holland, Ill. 60473	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DIS-POSAL FACILITY	IND016360265	American Chemical Service, 420 S. Colfax, Griffith, In. 46319 219-924-4370	4/24/81
TSDF TREATMENT STORAGE OR DIS-POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrie Use Only)
1 T/W		D001	Waste Paint, Liquid	1263			Gals.	4,500		

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

4 24 81

TO WEST 9CUT R 4/24/81 T-50 9PM

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

002066

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

XL 002654
MANIFEST DOCUMENT NUMBER

XL 002654
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	OHD074552258	Sherwin-Williams Co., 601 Lime Rd., Cleve., Oh. 44113 216-566-2863	11-10-81
TRANSPORTER # 1	ILD069506160	Mr. Frank, Inc., 201 W. 155th St. So. Holland, Il. 60473	11-10-81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DIS—POSAL FACILITY	IND016360265	American Chemical Service, 420 S. Colfax, Griffith, In.46319	11-11-81
TSDF TREATMENT STORAGE OR DIS—POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGE (For Carri Use Only
1 T/W	X	D001	Waste Paint, Flammable Liquid	1263			Gals.	4,500		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the inciden must be promptly reported to the Federal government at 1-800-424-8802 (tol free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharge 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

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

To 210 R T-50 6214 11/11/81

TSDF COPY

002067

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0364770

Authorization Number 998433

Sherwin Williams Co. (Company Name)
Transportation Department
11541 South Champlain Avenue (Address)
Chicago, (City) Illinois (State) 60628 (Zip)
Generator Number 0316000020 G
FED ID ILD 005456439

WASTE HAULER(S)

Mr. Franks, Inc. (Hauler Name)
201 W. 155th St. (Hauler Address)
S.W.H. Registration Number 0079005

(Hauler Name)
South Holland, Ill. (Hauler Address)
S.W.H. Registration Number
FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name)
P. O. Box 190 (Address)
Site Number 91808902
Griffith, (City) Indiana (State) 46319 (Zip)
FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint
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: 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: 11-9-81 (Authorized Signature) K078

WASTE HAULER

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

(1) Ronald Brickenstein (Authorized Signature) DATE: 11/09/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 11/09/81

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 11/9/81

SITE COPY - PART 3

002068

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0390037 (1–7)

Authorization Number 998433 (8–13)

Sherwin Williams Company Transportation Department (Company Name) — 11541 South Champlain Avenue (Address)

Chicago, (City) — Illinois, (State) — 60628 (Zip) — FED ID ILD 005456439

031600002 0 (14–24) Generator Number

WASTE HAULER(S)

Mr. Franks, Inc. (Hauler Name) — 201 West 155th Street (Hauler Address) — S.W.H. Registration Number 007902 1 (25–31)

(Hauler Name) — South Holland, Illinois (Hauler Address) — FED ID ILD 069506160 S.W.H. Registration Number (38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P. O. Box 190 (Address) — 91808902 (39–46) Site Number

Griffith, (City) — Indiana (State) — 46319 (Zip) — FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint — 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: 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: 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11-10-81 — O. Mini (Authorized Signature) — K078

WASTE HAULER

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

(1) Robert Perkins (Authorized Signature) — DATE: 11/10/81 (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: 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 123 TR T-63 GPM 11/10/81

SITE COPY - PART 3

002069

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0390041 (1–7)

Authorization Number 998433 (8–13)

Sherwin Williams Company Transportation Department (Company Name) — 11541 South Champlain Avenue (Address)

Generator Number 0316000020 (14–24)

Chicago, (City) — Illinois (State) — 60628 (Zip) — FED ID ILD 005456439

WASTE HAULER(S)

Mr. Franks, Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 007902 (25–31)

(Hauler Name) — South Holland, Illinois (Hauler Address) — S.W.H. Registration Number FED ID ILL 069520 6160 (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P. O. Box 190 (Address) — Site Number 91808902 (39–46)

Griffith, (City) — Indiana (State) — 46319 (Zip) — FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint — 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: 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 005500 (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: 11/12/81 — Oscar Meoni (Authorized Signature) — K078

WASTE HAULER

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

(1) (Authorized Signature) — DATE: 11/12/81 (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: 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 123 K T-63 GPM 11/12/81

SITE COPY - PART 3

002070

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

Authorization Nu

SHERWIN WILLIAMS COMPANY
TRANSPORTATION DEPARTMENT (Company Name)

11541 S. CHAMPLAIN AVE. Address

(312) 821-3809 Phone Number

03160

CHICAGO, City

ILLINOIS State

60628 Zip

FED ID ILD 0 0 5 4 Gen

EPA

WASTE HAULER(S)

MR. FRANKS, INC. Hauler Name

201 WEST 155th STREET Hauler Address

(312) 596-3377 Phone Number

S.W.H. Registration Number FED ID ILD 0 6

EP

Hauler Name

Hauler Address

Phone Number

S.W.H. Registration Number

EPA

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL ~~XXXXXXXXXXXXXX~~ SERVICE (Facility Name)

P. O. BOX 190 Address

Griffith, City

Indiana State

46319 Zip

(312) 768-3400 Phone Number

FED ID IND 0 9 1 8

EPA NU

Alternate (Facility Name)

Address

City

State

Zip

Phone Number

EPA Num

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE ~~XXX~~ PAINT

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

WASTE PHASE: LIQUID (Liquid, Gaseous, S

SHIPPING DESCRIPTION:

HAZARD CLASS: FLAMMABLE

UN 1 2 6 3 UN or NA Number

K 0 7 8 EPA HW Number

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

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

QUANTITY OF WASTE DELIVERED: 0 0 4 5 0 0 GALL 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 TRANSPORTATI IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION O. Moore (Authorized Signature) DATE: 11/1

WASTE HAULER

I HEREBY 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)

(2) _____ (Authorized Signature) DATE: 11/19

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

DATE: / /

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 _____

(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

DATE 11/19

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 /

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

REV. # 3

SITE COPY - PART 3

To 123 K - T63 GPM 11/19/81

002071

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0393993

Authorization Number 998433

Sherwin Williams Company Transportation Department (Company Name) — 11541 South Champlain Avenue (Address)

Chicago, (City) — Illinois (State) — 60628 (Zip)

0316000020 G (Generator Number)

FED ID ILD 005456439

WASTE HAULER(S)

Mr. Franks, Inc. (Hauler Name) — 201 West 155th Street (Hauler Address) — S.W.H. Registration Number 007902 1

So. Holland, Illinois

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

FED ID ILD 069506160

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)

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint — 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: 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: 005300 (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: 11/17/81 — D. Meone / for (Authorized Signature) — K078

WASTE HAULER

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

(1) Gary Owen (Authorized Signature) — DATE: 11/17/81 (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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

F. Drufee (Authorized Signature) — DATE: 11/17/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

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

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

To 123 K T-63 GAW 11/17/81

SITE COPY - PART 3

002072

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0536768

Authorization Number 998433

SHERWIN WILLIAMS COMPANY
TRANSPORTATION DEPARTMENT 11541 SOUTH CHAMPLAIN (312)821-3809 ILD 005456439
(Company Name) Address Phone Number Generator Number

CHICAGO, ILLINOIS 60628 031600000020
City State Zip EPA Number

WASTE HAULER(S)

MR. FRANKS, INC. 201 WEST 155TH ST. S.W.H. Registration Number 0079021
Hauler Name Hauler Address

(312) 596-3377 ILD 069506160
Phone Number EPA Number

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

Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH, IND. 46319 (312) 768-3400 IND 016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number

City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: HAZARD CLASS: FLAMMABLE UN 1263 (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 00 45 00 (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 O. Moore (Authorized Signature) DATE: 12-1-81

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) Tom Berry (Authorized Signature) DATE: 12/01/81 (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:

F Dunfee (Authorized Signature) DATE: 12/1/81 (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 123 FT T-63 GRM 12/1/81

002073

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0536791 (1–7)

Authorization Number 998433 (8–13)

Sherwin Williams Company Transportation Department (Company Name) | 11541 South Champlain (Address) | 312/ 821-3809 (Phone Number) | 0316000020 (14–24) Generator Number

Chicago, (City) | Illinois (State) | 60628 (Zip) | ILD005456439 EPA Number

WASTE HAULER(S)

Mr. Franks, Inc. (Hauler Name) | 201 West 155th Street (Hauler Address) | 312/596-3377 (Phone Number) | S.W.H. Registration Number 00790 (25–31) | ILD069506160 EPA Number

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | P. O. Box 190 (Address) | 91808902 (39–46) Site Number

Griffith, (City) | Ind. (State) | 46319 (Zip) | 312/768-3400 (Phone Number) | IND016360265 EPA Number

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint | WASTE PHASE: Liquid (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 | UN1263 (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: 003000 (47–52) GALLONS (Circle One) / 2 CU. YDS. (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION O. Moore /on (Authorized Signature) DATE: 12-8-81

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) Mike Reifer (Authorized Signature) DATE: 12/8/81 (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: 12/8/81 (55)

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 211R T-506204 12/8/81

002074

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0536813

Authorization Number 998433

Sherwin Williams Company Transportation Department (Company Name) | 11541 South Champlain (Address) | 312/ 821-3809 (Phone Number) | 0316000020 (Generator Number)

Chicago, (City) | Illinois (State) | 60628 (Zip) | ILD005456439 (EPA Number)

WASTE HAULER(S)

Mr. Franks, Inc. (Hauler Name) | 201 West 155th Street (Hauler Address) | S.W.H. Registration Number 00790 18

312/ 596-3377 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | Post Office Box 190 (Address) | 91808902 (Site Number)

Griffith, (City) | Ind. (State) | 46319 (Zip) | 312/ 768-3400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: | HAZARD CLASS: Flammable | UN1263 (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 | 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 O. Moni for (Authorized Signature) DATE 12/17/81

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) Gary Nuen (Authorized Signature) DATE: 12/17/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

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

(Authorized Signature) DATE: 12/17/81

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 123 K T-63 GKM 12/17/81

002075

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0536807

Authorization Number 998433

Sherwin Williams Company (Company Name) | Transportation Department
11541 S. Champlain (Address) | 312/ 821-3809 (Phone Number) | 0316000020 (Generator Number)
Chicago, (City) | Illinois (State) | 60628 (Zip) | ILD005456439 (EPA Number)

WASTE HAULER(S)

Mr. Franks, Inc. (Hauler Name) | 201 West 155th Street (Hauler Address) | S.W.H. Registration Number 0079/0 28
South Holland, Illinois 312/ 596-3377 (Phone Number) | ILD069506160 (EPA Number)

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | P. O. Box 190 (Address) | 91808902 (Site Number)
Griffith, (City) | Indiana (State) | 46319 (Zip) | 312/ 768-3400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number
City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint WASTE PHASE: Liquid (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

UN1263 (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 D. Miori (Authorized Signature) DATE: 12/10/81

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) Ross C Bridgewater (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 WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 12/10/81 (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 123 Tk T-63 GRM 12/10/81

002076

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229173

Authorization Number 998433

SHERWIN WILLIAMS CO.
TRANSPORTATION DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL (State) — 60628 (Zip)

0316000020 (Generator Number)

FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 007902

SO. HOLLAND, ILL.

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

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

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

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRY 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: DIRTY PAINT SOLVENT — HAZARD CLASS: FLAMMABLE

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: 00550 — 1 GALLONS (Circle One) 2 CU. YDS.

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/6/81 FDD3 [signature] (Authorized Signature)

WASTE HAULER

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

(1) Robert Perkins (Authorized Signature) DATE: 01 06 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

Bob Mauck (Authorized Signature) DATE: 01 06 81

COMMENTS OR SPECIAL INSTRUCTIONS: Tc 123T T-63 1/6/81 [signature]

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

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

SITE COPY - PART 3

002077

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229185

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSPORTATION DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address) — ILD005456439

CHICAGO (City) — ILL. (State) — 60628 (Zip) — 0316000020G (Generator Number)

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. SO. HOLLAND, ILL. (Hauler Address) — S.W.H. Registration Number 0079023

Hauler Name — Hauler Address — S.W.H. Registration Number ILD069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) — IND. (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: — HAZARD CLASS: FLAMMABLE — WEIGHT FOR D.O.T. USE 33,500 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 050000 — 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: Jan 13, 1981 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) Robert Rubins (Authorized Signature) — DATE: 01 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: 01 13 81

COMMENTS OR SPECIAL INSTRUCTIONS: PUMPED TO 123 R 1/13/81 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

002078

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229190

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSPORTATION DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL (State) — 60628 (Zip) — 0316000020 (Generator Number) — FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 007918

SO. HOLLAND, ILL.

Hauler Name — Hauler Address — S.W.H. Registration Number — FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH, IN (City) — IND (State) — 46319 (Zip) — FED ID 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: — 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: 050000 — 1 GALLONS (Circle One) 2 ~~CU. YDS.~~

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-20-81 F003 — (Authorized Signature) 357

WASTE HAULER

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

(1) CBowski (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: 1 20 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 1/23E T-63 1/20/81 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

002079

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229191

SHERWIN WILLIAMS CO. TRANSPORTATION DEPT. (Company Name) — ATT OSCAR VATONI — 11541 S. CHAMPLAIN AVE. (Address)

Authorization Number 998433

CHICAGO, (City) — ILL. (State) — 60628 (Zip) — Generator Number 0316000020 — FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 007901 9

SO. HOLLAND, ILL.

(Hauler Name) — (Hauler Address) — S.W.H. Registration Number — FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH, (City) — IND (State) — 46319 (Zip) — FED ID 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: — HAZARD CLASS: FLAMMABLE — WEIGHT FOR D.O.T. USE ____ LBS TONS (circle one)

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-22-81 FDOB [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) Gary Druen (Authorized Signature) — DATE: 01 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:

[signature] (Authorized Signature) — DATE: 1 / 2 / 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 142R 1/22/81 T-63 Jim Murphy

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

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

SITE COPY - PART 3

002080

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229225

Authorization Number 998433

SHERWIN WILLIAMS CO.
TRANSP. DEPT. (Company Name)
11541 S. CHAMPLAIN AVE. (Address)
CHICAGO, (City) ILL (State) 60628 (Zip)
0316000020 Generator Number
EED ID ILD 005456439

WASTE HAULER(S)

MR FRANKS (Hauler Name)
201 W. 155TH ST. (Hauler Address)
SO HOLLAND, ILL
S.W.H. Registration Number 007904

Hauler Name
Hauler Address
S.W.H. Registration Number
EED ID ILD 069526160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE P O BOX 190 (Facility Name) (Address)
918089026 Site Number
GRIFFITH, (City) IND (State) 46319 (Zip)
EED ID 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:
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: 0300
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: 2-23-81 (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) C Bowers (Authorized Signature) DATE: 02/23/81
(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ✓

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

BOB (Authorized Signature) DATE: 02/23/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 123R 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

002081

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229226

Authorization Number 998433

SHERWIN WILLIAMS CO TRANSP. DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL. (State) — 60628 (Zip)

Generator Number 0316000020G

FED ID ILD 005456439

WASTE HAULER(S)

MR FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 007900 5

SO. HOLLAND, ILL.

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

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH, (City) — IND (State) — 46319 (Zip)

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT — 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: Paint 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. 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: 2-23-81 — [signature] (Authorized Signature)

WASTE HAULER

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

(1) Tom Berry (Authorized Signature) — DATE: 02 23 81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

[signature] (Authorized Signature) — DATE: 2/23/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 123R 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

002082

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229222

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSP. DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL. (State) — 60628 (Zip)

Generator Number 0316000020G

FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 007902 3

SO. HOLLAND, ILL.

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

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — Site Number 918089 02

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

FED ID 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: — HAZARD CLASS: FLAMMABLE

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

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52)

1 GALLONS (Circle One)
2 CU. YDS.

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY 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: 2-20-81 — 1905 — Gary L Ericson (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 Druen (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:

Bob Mauck (Authorized Signature) — DATE: 02/20/81

COMMENTS OR SPECIAL INSTRUCTIONS: TMO 123E T-63 2/20/81 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

002083

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229219

Authorization Number 998433

SHERWIN WILLIAMS CO.
TRANSPORTATION DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)
CHICAGO, (City) — ILL. (State) — 60628 (Zip)
Generator Number 0316000020G

FED ID ILD 005456439

WASTE HAULER(S)

MR FRANKS INC (Hauler Name) — 201 W 155TH ST. (Hauler Address) — S.W.H. Registration Number 007902
SO. HOLLAND, ILL.

Hauler Name — Hauler Address — S.W.H. Registration Number
FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE P O BOX 190 (Facility Name) — Address — Site Number 918089002
GRIFFITH, (City) — IND (State) — 46319 (Zip)
FED ID IND 016302 65

TO BE COMPLETED BY WASTE GENERATOR

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

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

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

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 05000 — 1 GALLONS 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. + EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/18/81 1903 — X (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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: 2/18/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 123R 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

002084

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229216

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSPORTATION DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL. (State) — 60628 (Zip)

0316000020 G (Generator Number)

FED ID IID 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 007902 3

SO. HOLLAND, ILL.

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

FED ID IID 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH, (City) — IND. (State) — (Zip)

FED ID 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: — HAZARD CLASS: FLAMMABLE

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

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

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0

1 GALLONS (Circle One)
2 CU. YDS

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION 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 — Victor Ponce (Authorized Signature) — & EPA

WASTE HAULER

I HEREBY CERTIFY 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 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:

Bob Mauck (Authorized Signature) DATE: 02 16 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123K T-63 2/16/81 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

002085

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0229208

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSPORTATION DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL. (State) — 60628 (Zip)

0316000020 G (Generator Number)

FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 007901 8

SO. HOLLAND, ILL.

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

FED ID ILD 069506169

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

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

FED ID 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: — HAZARD CLASS: FLAMMABLE — WEIGHT FOR D.O.T. USE 40000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 00 50 00 — 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: 2/11/81 — X John Galvan (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) Miguel Garcia (Authorized Signature) — DATE: 02 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: 02 11 81

COMMENTS OR SPECIAL INSTRUCTIONS: T-123 2/11/81 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

002086

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

Oscar Mioni

0229200

Authorization Number 998433

SHERWIN WILLIAMS CO.
TRANSPORTATION DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)
CHICAGO, (City) — ILL (State) — 60628 (Zip)
0316000020G (Generator Number)
FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address)
SO. HOLLAND, ILL.
S.W.H. Registration Number 007901 8

Hauler Name — Hauler Address — S.W.H. Registration Number
FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address)
GRIFFITH, (City) — IND. (State) — 46319 (Zip)
91808902 (Site Number)
FED ID 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: — HAZARD CLASS: FLAMMABLE

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

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52)

1 GALLONS (Circle One)
2 CU. YDS.

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7.2.3, 1981 F003 — O. Mioni/RS (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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:

F Dunfee (Authorized Signature) — DATE: 2/3/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123R 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

002087

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229193

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSPORTATION DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL. (State) — 60628 (Zip)

Generator Number 0316000020 G

FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 007902 9

SO. HOLLAND, ILL.

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

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

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

FED ID 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: — 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: 0050 00 — 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: 1-27-81 — F003 Jim Arrivo #357 (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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: 01 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: 1 27 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123E 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

002088

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

0229195

TO BE COMPLETED BY WASTE GENERATOR

Oscar Mioni

Authorization Number 998433

SHERWIN WILLIAMS CO.
TRANSPORTATION DEPT. (Company Name) — 11541X S. CHAMPLAIN AVE. (Address)
CHICAGO, (City) — ILL. (State) — 60628 (Zip)
0316000020 G (Generator Number)
FED ID IID 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 0079059
SO. HOLLAND, ILL.
(Hauler Name) — (Hauler Address) — S.W.H. Registration Number
FED ID IID 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — 91808902 (Site Number)
GRIFFITH, (City) — IND. (State) — 46319 (Zip)
FED ID 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: — HAZARD CLASS: FLAMMABLE — WEIGHT FOR D.O.T. USE 40000 LBS/TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 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: 1/29/81 F003 — Jim Arrivo — Ralph J. Moncada #352 (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 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 Mauck (Authorized Signature) — DATE: 01 29 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123 E 1/29/81 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

002089

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229232

Authorization Number 998433

SHERWIN WILLIAMS CO.
TRANSP. DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL. (State) — 60628 (Zip) — FED ID ILD 005456439

Generator Number 0316000020G

WASTE HAULER(S)

MR. FRANKS (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 007908

SO. HOLLAND, ILL.

Hauler Name — Hauler Address — FED ID ILD 069506160 — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH, (City) — IND. (State) — 46219 (Zip) — FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

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

~~FLAMMABLE~~

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: 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: 2-25-81 F005 Gary L. Ericson (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 Ericson (Authorized Signature) DATE: 02 25 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

R B Mauck (Authorized Signature) DATE: 02 25 81

COMMENTS OR SPECIAL INSTRUCTIONS: 4000 TO 123K T-63 2/25/81 Jim Murphy
1000 TO 125K 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

002090

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229233

Authorization Number 998433

SHERWIN WILLIAMS CO.
TRANSP. DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL. (State) — 60628 (Zip)

0316000020 G (Generator Number)

FED ID IID 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address)

SO. HOLLAND, ILL.

S.W.H. Registration Number 007901 8

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

FED ID IID 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

91808902 (Site Number)

GRIFFITH, (City) — IND. (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: — HAZARD CLASS: FLAMMABLE

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

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

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 (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

UN1993

DATE: 2-27-81 — Gary L. Ewison (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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: 02 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:

Bob Mauck (Authorized Signature) DATE: 02 27 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 124E T-63 2/27/81 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

002091

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229236

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSP. DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address) — 0316000020G (Generator Number)

CHICAGO, (City) — ILL (State) — 60628 (Zip) — FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 007908

SO. HOLLAND, ILL.

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

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — 918089002 (Site Number)

GRIFFITH, (City) — IND. (State) — 46319 (Zip) — FED ID 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: — 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: 00500 — 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: 3-2-81 — (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: 03 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: 03 03 81

COMMENTS OR SPECIAL INSTRUCTIONS: To 124R T-63 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

002092

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229237

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSP. DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

0316000020G (Generator Number)

CHICAGO, (City) — ILL (State) — 60628 (Zip) — FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 007901

SO. HOLLAND, ILL. (Hauler Address) — S.W.H. Registration Number

Hauler Name — Hauler Address — FED ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH, (City) — IND. (State) — 46319 (Zip) — IN0016360265

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: — HAZARD CLASS: FLAMMABLE

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: 0 05 000 — 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: 3-4-81 — [signature] (Authorized Signature) — F005

WASTE HAULER

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

(1) Robert Perkins (Authorized Signature) — DATE: 03 04 81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ✓

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

Bob Mauck (Authorized Signature) — DATE: 03 04 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123R T-63 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

002093

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229242

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSP. DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL. (State) — 60628 (Zip)

Generator Number 0316000020G

FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address)

SO. HOLLAND, ILL.

S.W.H. Registration Number 079021

Hauler Name — Hauler Address

S.W.H. Registration Number

FED ID ILD 005506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

Site Number 91808902

GRIFFITH, (City) — IND (State) — 46319 (Zip)

FED ID 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: 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: 05500

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: 3-6-81 (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: 03 06 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

Bob Manuck (Authorized Signature) DATE: 03 06 81

COMMENTS OR SPECIAL INSTRUCTIONS: 3000 TO 124R T-63 3/4/81 Jim Murphy
2000 TO 123R T-63 3/4/81

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

002094

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229270

Authorization Number 998433

SHERWIN WILLIAMS CO TRANSPORTATION DEPT (Company Name) — 11541 S CHAMPLAIN AVE (Address) — FED ID-ILD- 005456439

CHICAGO (City) — ILLINOIS (State) — 60628 (Zip) — 0316000020 (Generator Number)

WASTE HAULER(S)

MR FRANKS INC (Hauler Name) — 201 W 155TH ST (Hauler Address) — S.W.H. Registration Number 007902

(Hauler Name) — SO HOLLAND ILL (Hauler Address) — S.W.H. Registration Number XXXXXXXXXX

FED ID-ILD 069506160

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) — FED ID-IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: — HAZARD CLASS: FLAMMABLE 4005 — WEIGHT FOR D.O.T. USE ____ LBS TONS (circle one)

40,000

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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-27-81 — O. Mioni (Authorized Signature) — O MIONI SUPVR TRANSPORATION DEPT

WASTE HAULER

I HEREBY CERTIFY 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 [signature] (Authorized Signature) — DATE: 03 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: 3/27/81

COMMENTS OR SPECIAL INSTRUCTIONS: PTO 123E T-63 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

002095

TO BE COMPLETED BY WASTE GENERATOR

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

0229278

Authorization Number 998433

SHERWIN WILLIAMS CO TRANSPORTATION DEPT (Company Name) — 11541 S CHAMPLAIN AVE FED ID-ILD- 005456439 (Address)

CHICAGO (City) — ILLINOIS (State) — 60628 (Zip) — 0316000020 (Generator Number)

WASTE HAULER(S)

MR FRANKS INC (Hauler Name) — 201 W 155TH ST (Hauler Address) — S.W.H. Registration Number 007902 1

(Hauler Name) — SO HOLLAND ILL (Hauler Address) FED-ID-ILD-0695061 6 0 — 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) — 46419 (Zip) FED ID-IND-0 1 6 3 6 0 2 6 5

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ~~WARNISH SLUDGE~~ PAINT SOLVENT WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE 40,000 LBS/TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 — 1 GALLONS (Circle One) 2 CU. YDS.

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION 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 — O. Miami IRS — O MIONI SUPVR TRANSP. DEPT. (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 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: 4-2-81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123R T-63 4/2/81 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

002096

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

0229145

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSPORTATION DEPT. (Company Name)
11541 S. CHAMPLAIN AVE. (Address) FED. ID-ILD 005456439
CHICAGO, (City) ILL. (State) 60628 (Zip)
031600000020 (Generator Number)

WASTE HAULER(S)

Mr. FRANKS INC. (Hauler Name) 201 W. 155th ST. (Hauler Address) S.W.H. Registration Number 007901 9
SO. HOLLAND, ILL. FED. ID-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) 918089029 (Site Number)
GRIFFITH, (City) IND. (State) 46319 (Zip) FED. ID-IND 016360255

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: VARNISH SLUDGE WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE _____ 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: 3-25-81 (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) Gary Swan (Authorized Signature) DATE: 03 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: 3 25 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 123R T-63 3/25/81 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

002097

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSP. DEPT. (Company Name) | 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) | ILL. (State) | 60628 (Zip)

031600002 0G (Generator Number)

FED ID ILD 005456439

WASTE HAULER(S)

MR FRANKS (Hauler Name) | 201 W. 155TH ST. SO. HOLLAND, ILL. (Hauler Address)

S.W.H. Registration Number 0079009

Hauler Name | Hauler Address

S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

918089 02 (Site Number)

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

FED ID 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: | 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: 00500 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: 3-18-81 (Authorized Signature)

WASTE HAULER

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

(1) Michael Morton (Authorized Signature) DATE: 03 18 81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

(Authorized Signature) DATE: 3/18/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 123K T-63 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

002098

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229148

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSPORTATION DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO (City) — ILL. (State) — 60628 (Zip)

0316000020 (Generator Number)

FED-ID-ILD 005456439

WASTE HAULER(S)

MR. FRANKS, INC (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — SO. HOLLAND, ILL.

S.W.H. Registration Number 007907

Hauler Name — Hauler Address

S.W.H. Registration Number

FED-ID-ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

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

91808902 (Site Number)

FED-ID-IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT ~~XXXXXX~~ SOLVENT

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: — HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE 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: 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: 3-13-81 — [signature] (Authorized Signature)

WASTE HAULER

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

(1) Robert Perkins (Authorized Signature) DATE: 03 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:

Bob Mauck (Authorized Signature) DATE: 03 13 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123R T-63 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

002099

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229365

Authorization Number 998433

SHERWIN WILLIAMS CO TRANSPORTATION (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL. (State) — 60628 (Zip) — 0316000020 G (Generator Number) — FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 0079069

Hauler Name — SO. HOLLAND, ILL. (Hauler Address) — S.W.H. Registration Number — FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — 918089002 (Site Number)

GRIFFITH, (City) — IND (State) — 46319 (Zip) — FED ID 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: — 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: 005600 — 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: 5/25/81 — (Authorized Signature) — 5P 3651

WASTE HAULER

T Munkel

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

(1) 5-28-81 (Authorized Signature) — DATE: 05 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:

T Munkel (Authorized Signature) — DATE: 5/28/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 1237 T-63 5/28/81 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

002100

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229351

Authorization Number 998433

SHERWIN WILLIAMS CO TRANSPORTATION (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL (State) — 60628 (Zip)

Generator Number 0316000020

FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC (Hauler Name) — 201 W 155TH ST. SO. HOLLAND, ILL (Hauler Address)

S.W.H. Registration Number 0079029

Hauler Name — Hauler Address

S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

Site Number 918089002

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

FED ID 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: — HAZARD CLASS: FLAMMABLE

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

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

QUANTITY OF WASTE DELIVERED: 005000

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: May 20, 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 05 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: 05 20 81

COMMENTS OR SPECIAL INSTRUCTIONS: To 123E 5/20/81 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

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229355

Authorization Number 998433

SHERWIN WILLIAMS CO.
TRANSPORTATION (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL. (State) — 60628 (Zip)

0316000020 G (Generator Number)

FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INCL (Hauler Name) — 201 W. 155TH ST. (Hauler Address)

SO. HOLLAND, ILL.

S.W.H. Registration Number 0079004

Hauler Name — Hauler Address

S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH, (City) — IND (State) — 46319 (Zip)

91808902 (Site Number)

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SLUDGE

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: — HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. 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: May 21, 1981 — O. Morris /RS 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) Ronald Bridgewater (Authorized Signature) DATE: 5/21/81

(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: 5/21/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST 9GIT T-50 5/21/81 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

002102

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229359

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSPORTATION (Company Name) — 11541 S. CHAMPLAIN AVE. (Address) — 0316000020 (Generator Number)

CHICAGO, (City) — ILL. (State) — (Zip) — FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC (Hauler Name) — 201 W 155TH ST. (Hauler Address) — S.W.H. Registration Number 0079029

SOW.HOLLAND, ILL.

(Hauler Name) — (Hauler Address) — S.W.H. Registration Number FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH, (City) — IND. (State) — 46319 (Zip) — FED ID 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: — HAZARD CLASS: FLAMMABLE — 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.

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION 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 — O. Miam / RS (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 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: 5 26 81

COMMENTS OR SPECIAL INSTRUCTIONS: To 123R T-63 5/26/81 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

002103

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229338

Authorization Number 998433

SHERWIN WILLIAMS CO TRANSPORTATION (Company Name) — 11541 S, CHAMPLAIN AVE. (Address) — 0316000020 G (Generator Number)

CHICAGO, (City) — ILL. (State) — 60628 (Zip) — FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 0079/004

SO. HOLLAND, ILL.

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

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH, (City) — IND. (State) — 46319 (Zip) — FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: — HAZARD CLASS: Flammable — WEIGHT FOR D.O.T. 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 GAL — 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 May 14, 1981 — [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) Ronald Bridgewater (Authorized Signature) — DATE: 5/14/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

[signature] (Authorized Signature) — DATE: 5/14/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT T-50 5/14/81 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

002104

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229347

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSPORTATION DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, I (City) — ILL. (State) — 60628 (Zip)

Generator Number 0316000020G

FED ID ILD 005456439

WASTE HAULER(S)

MR FRANKS INC (Hauler Name) — 201 W. 155TH ST. SO. HOLLAND, ILL (Hauler Address)

S.W.H. Registration Number 007900 5

Hauler Name — Hauler Address

S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

Site Number 918089 02

GRIFFITH, (City) — IND (State) — 46319 (Zip)

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SLUDGE

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Paint Sludge + 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: 5/19/81 — (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) Tom Berry (Authorized Signature) — DATE: 5/19/81

(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: 5/19/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST PIT T-50 5/19/81 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

002105

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0229320

SPECIAL WASTE HAULING MANIFEST

Authorization Number 996433

SHERWIN WILLIAMS CO. TRANSP. DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL (State) — 60628 (Zip)

0316000020 (Generator Number)

FED ID ILD 005456439

WASTE HAULER(S)

MR FRANKS INC (Hauler Name) — 201 W. 155TH ST. SO. HOLLAND, ILL. (Hauler Address) — S.W.H. Registration Number 007902

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

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — 918089002 (Site Number)

GRIFFITH, (City) — IND (State) — 46319 (Zip)

FED ID IND 016360255

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: — HAZARD CLASS: FLAMMABLE — WEIGHT FOR D.O.T. 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 TANK TRUCK OPEN TRUCK OTHER (Specify)

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-6-81 — Gregory Menconi (Authorized Signature) F005

WASTE HAULER

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

(1) [signature] (Authorized Signature) — DATE: 05 06 81

(2) ____ (Authorized Signature) — DATE: ___ ___ ___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

[signature] (Authorized Signature) — DATE: 5 6 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123R T-63 5/6/81 JJM

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

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

SITE COPY - PART 3

002106

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

022S

Authorization Number 996433

SHERWIN WILLIAMS CO. TRANSPORTATION (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL. (State) — Zip — Generator Number 0316000020

FED ID ILD 005456439

WASTE HAULER(S)

MR FRANKS INC (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 007900 9

SO. HOLLAND, ILL.

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

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — Site Number 918089 02

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

FED ID IND 016302 65

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: — HAZARD CLASS: FLAMMABLE — WEIGHT FOR D.O.T. 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 — 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: 5/13/81 — J. Orrin (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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: OCT 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: 17 13 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123R T-63 5/13/81 gm

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

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

SITE COPY - PART 3

002107

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229294

Authorization Number 998433

SHERWIN WILLIAMS CO
TRANSPORTATION DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)
CHICAGO, (City) — ILL (State) — 60628 (Zip)
0316000020G (Generator Number)
FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 007904
SO. HOLLAND, ILL.

Hauler Name — Hauler Address — S.W.H. Registration Number
FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — 91808902 (Site Number)
GRIFFITH, (City) — IND. (State) — 46319 (Zip)
FED ID 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: — 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: 00400 — 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: ____ (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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
(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

COMMENTS OR SPECIAL INSTRUCTIONS: To 123R T-63 4/10/81 JTM

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

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

SITE COPY - PART 3

002108

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229293

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSP. DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL (State) — 60628 (Zip)

0316000020 (Generator Number)

FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 0079005

SO HOLLAND, ILL.

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

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

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

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: Flammable — HAZARD CLASS: FLAMMABLE — WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

NA-9189

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: 4/9/81 — [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) Tom Berry (Authorized Signature) — DATE: 4 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:

[signature] (Authorized Signature) — DATE: 4/9/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT E 4/9/81 7-50 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

002109

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0229298 (1–7)

Authorization Number 998433 (8–13)

SHERWIN WILLIAMS CO. TRANSP. DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO (City) — ILL. (State) — 60628 (Zip) — 0316000020 (Generator Number, 14–24) — FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. SO. HOLLAND, ILL. (Hauler Address) — S.W.H. Registration Number 007905 (25–31)

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — 91808902 (Site Number, 39–46)

GRIFFITH (City) — IND. (State) — 46319 (Zip) — FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: Paint Sludge + 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: ____ (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 (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 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST 4GIT 4/15/81 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

002110

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0229301

Authorization Number 998433

SHERWIN WILLIAMS CO TRANSP. DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL. (State) — 60628 (Zip)

0316000020 (Generator Number)

EPA ID ILD005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 00790

SO. HOLLAND, ILL

Hauler Name — Hauler Address — S.W.H. Registration Number

EPA ID ILD069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P. O BOX 190 (Address) — 918089002 (Site Number)

GRIFFITH, (City) — IND. (State) — 46319 (Zip)

EPA ID 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: — 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: 005500 — 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: 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: 04 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: 4/16/81

COMMENTS OR SPECIAL INSTRUCTIONS: TD 123E 4/16/81 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

002111

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0229307

Authorization Number 998433

SHERWIN WILLIAMS CO TRANSP. DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

Generator Number 0316000020

CHICAGO, (City) — ILL (State) — 60628 (Zip) — FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 0079018

SO. HOLLAND, ILL.

Hauler Name — Hauler Address — S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — Site Number 91808902

GRIFFITH, (City) — IND. (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: — HAZARD CLASS: FLAMMABLE — WEIGHT FOR D.O.T. USE ____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 — 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: 4-21-81 — Gregory Mencini (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 Grad (Authorized Signature) — DATE: 4/21/81

(2) ____ (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) — DATE: 4/22/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123 TC 4/22/81 T-63 gm

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

002112

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0229309

Authorization Number 998433

SHERWIN WILLIAMS CO.
TRANSP. DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)
CHICAGO, (City) — ILL. (State) — 60628 (Zip)
0316000020 G (Generator Number)
FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 0079005

(Hauler Name) — SO. HOLLAND, ILL (Hauler Address) — S.W.H. Registration Number
FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — 91808902 (Site Number)
GRIFFITH, (City) — IND. (State) — 46319 (Zip)
FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SLUDGE — WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Paint Sludge + 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: 0030 00 — 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: 4/23/81 — O. [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 23 81

(2) _____ (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) — DATE: 4 23 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT 4/23/81 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

002113

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0229308

Authorization Number 098433

SHERWIN WILLIAMS CO. TRANSP. DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

0316000020 G (Generator Number)

CHICAGO (City) — ILL (State) — 60628 (Zip)

FED ID IID 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 0079021

SO. HOLLAND, ILL.

Hauler Name — Hauler Address — S.W.H. Registration Number

FED ID IID 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — 91808902 (Site Number)

GRIFFITH, (City) — IND. (State) — 46319 (Zip)

FED ID IND 016360365

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT — WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: — HAZARD CLASS: FLAMMABLE — WEIGHT FOR D.O.T. 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 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: 4-24-81 — [signature] (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) — DATE: 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:

[signature] (Authorized Signature) — DATE: 04/24/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 13BR 4/24/81 T-63 [initials]

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

SITE COPY - PART 3

002114

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0229313

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSP. DEPT. (Company Name) | 11541 S. CHAMPLAIN AVE. (Address) | 0316000020 (Generator Number)

CHICAGO, (City) | ILL. (State) | 60628 (Zip) | FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | S.W.H. Registration Number 007902

SO. HOLLAND, ILL. (Hauler Address) | S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | P O BOX 190 (Address) | 918089 02 (Site Number)

GRIFFITH, (City) | IND. (State) | 46319 (Zip) | FED ID 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: | HAZARD CLASS: FLAMMABLE | WEIGHT FOR D.O.T. USE 36,000 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 04/28/81 | Gregory Mercurio (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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

(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

COMMENTS OR SPECIAL INSTRUCTIONS: To 123R 4/28/81 T-63 gm

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

002115

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0229314

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSP. DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL. (State) — 60628 (Zip)

0316000020 (Generator Number)

FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 007902

SO. HOLLAND, ILL.

Hauler Name — Hauler Address — S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — 91808902 (Site Number)

GRIFFITH, (City) — IND. (State) — 46319 (Zip)

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT — WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

F005

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: — 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: 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-30-81 — Gregory Manconi (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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: 04/30/81

(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:

[signature] (Authorized Signature) — DATE: 4/30/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123F 4/30/81 T-63 gm

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

002116

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0229370

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSPORTATION DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL. (State) — 60628 (Zip)

0316000020 G (Generator Number)

FED ID ILD 069506160

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 0079005

SO. HOLLAND, ILL.

Hauler Name — Hauler Address — S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P.O BOX 190 (Address) — 91808902 (Site Number)

GRIFFITH, (City) — IND. (State) — 46319 (Zip)

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SLUDGE — WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Paint Sludge — 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 Gallons — 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: June 2, 1981 — O. Miami/RS (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 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:

J Humfee (Authorized Signature) — DATE: 6 2 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT 6/2/81 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

002117

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 8 7 1 (8)

SHERWIN WILLIAMS CO. TRANSP. DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

0 3 1 6 0 0 0 0 2 0 G (14–24) Generator Number

CHICAGO, (City) — ILL. (State) — 60628 (Zip) — FED ID ILD 00 5 4 5 6 4 3 9

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 0 0 7 9 0 0 9 (25–31)

SO. HOLLAND, ILL.

(Hauler Name) — (Hauler Address) — S.W.H. Registration Number (38)

FED ID ILD 0 6 9 5 0 6 1 8 0

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) — IND (State) — 46319 (Zip) — FED ID IND 0 1 6 3 6 0 2 6 5

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 — 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: 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) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION 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 — (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 1232 T-63 6/3/81 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

002118

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0229374

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSPORTATION (Company Name) | 11541 S. CHAMPLAIN AVE. (Address) | 0316000020 (Generator Number)

CHICAGO, (City) | ILL. (State) | 60628 (Zip) | FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079004

SO. HOLLAND, ILL.

Hauler Name | Hauler Address FED ID ILD 069506160 | 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) | IND. (State) | 46319 (Zip) | FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SLUDGE | 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: 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: June 4, 1981 | O. Moore/BB (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 B. [illegible] (Authorized Signature) DATE: 6/4/81

(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: 6/4/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT T-50 6/4/81 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

002119

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0229383

Authorization Number 998433

SHERWIN WILLIAMS CO TRANSPORTATION DEPT (Company Name) | 11541 S CHAMPLAIN AVE (Address)

CHICAGO (City) | ILLINOIS (State) | 60628 (Zip) | 0316000020 (Generator Number)

FED-ID-ILD 005456439

WASTE HAULER(S)

MR FRANKS INC (Hauler Name) | 201 W 155TH ST (Hauler Address) | S.W.H. Registration Number 0079005

SO HOLLAND ILL

Hauler Name | Hauler Address | S.W.H. Registration Number FED ID-ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | PO BOX 190 (Address) | Site Number 918089002

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | FED ID-IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SLUDGE F005 | WASTE PHASE: ~~XXXXX~~ LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Paint Sludge | 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: 00300 | 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: 6-9-81 | O. Miami (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 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:

J Dunfee (Authorized Signature) | DATE: 6 9 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT T-50 6/9/81 JDM

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

002120

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

022930

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSPORTATION (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

0316000020 G (Generator Number)

City — State — Zip — FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS (Hauler Name) — 201 W. 155TH ST. (Hauler Address) SO. HOLLAND, ILL. — S.W.H. Registration Number 0079029

Hauler Name — Hauler Address — S.W.H. Registration Number — FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — 91808902 (Site Number)

GRIFFITH, (City) — IND. (State) — 46319 (Zip) — FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT — WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

FJ05

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 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. 2

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION 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 — [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 Reitens (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:

[signature] (Authorized Signature) — DATE: 6/10/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123R 6/10/81 T-63 [initials]

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

SITE COPY - PART 3

002121

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0229397

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSPORTATION (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO (City) — ILL. (State) — 60628 (Zip)

Generator Number 0316000020G

FED ID ILD 005456439

WASTE HAULER(S)

MR FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number X0079008

SO. HOLLAND, ILL.

Hauler Name — Hauler Address — S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — Site Number 918089002

GRIFFITH (City) — IND. (State) — 46319 (Zip)

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT — WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

F005

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: — 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: 00500 — 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) — 6/16/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry (Authorized Signature) — DATE: 6 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 123X T-63 6/16/81 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

002122

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0290093

Authorization Number 998433

SHERWIN WILLIAMS CO TRANSPORTATION (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL. (State) — 60628 (Zip) — FED ID ILD 005456439

Generator Number 031600002 0

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. SO. HOLLAND, ILL. (Hauler Address) — S.W.H. Registration Number 0079021

Hauler Name — Hauler Address — FED ID ILD 069506180 — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — Site Number 91808902

GRIFFITH, (City) — IND. (State) — 46319 (Zip) — FED ID 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: — HAZARD CLASS: FLAMMABLE 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: 00550 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: 6/19/81 — (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) Tom Berry (Authorized Signature) — DATE: 6/19/81

(2) ____ (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) — DATE: 6/19/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 123X T-63 6/19/81 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

002123

0290097

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998433

SHERWIN WILLIAMS CO TRANSPORTATION (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL. (State) — 60628 (Zip)

Generator Number 0316000020

WASTE HAULER(S)

MR. FRANKS (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 007902

SO. HOLLAND, ILL.

Hauler Name — Hauler Address — S.W.H. Registration Number

FED ID ILD 069506180

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — Site Number 91808902

GRIFFITH, (City) — IND. (State) — 46319 (Zip)

FED ID 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: — HAZARD CLASS: F005

FLAMMABLE — WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: ~~0 0 5 0 0 0~~ 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: 6/22/81 — (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: 06/23/81

(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: 6/23/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123R 6/23/81 · TA-63 [illegible]

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

002124

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0290099

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSPORTATION (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL (State) — 60628 (Zip)

0316000020 G (Generator Number)

FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 007901 9

SO. HOLLAND, ILL (Hauler Address) — S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — 91808902 (Site Number)

GRIFFITH, (City) — IND (State) — 46319 (Zip)

IND016360265

FED ID ~~ILD 069506160~~

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT — 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: 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: ~~0005000~~ 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: 5/26/81 — [signature] (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) — DATE: 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:

[signature] (Authorized Signature) — DATE: 6/26/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123K T-63 6/26/81 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

002125

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0294826

Authorization Number 998433

SHERWIN WILLIAMS CO.
TRANSPORTATION DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

0316000020 G (Generator Number)

CHICAGO, (City) — ILL (State) — 60628 (Zip) — FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 00790004

SO. HOLLAND, ILL.

(Hauler Name) — (Hauler Address) — S.W.H. Registration Number FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — 91808902 (Site Number)

GRIFFITH, (City) — IND. (State) — 46319 (Zip) — FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SLUDGE — WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: — HAZARD CLASS: FLAMMABLE — WEIGHT FOR D.O.T. USE ____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 003 000 — 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: 6/30/81 — [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) Ronald Bridgewater (Authorized Signature) — DATE: 6/30/81

(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:

[signature] (Authorized Signature) — DATE: 6/30/81

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

002126

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0294828

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSPORTATION (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

CHICAGO, (City) — ILL. (State) — 60628 (Zip)

0316000020 G (Generator Number)

FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 007901 9

SO. HOLLAND, ILL.

Hauler Name — Hauler Address — S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — 91808902 (Site Number)

GRIFFITH, (City) — IND. (State) — 46319 (Zip)

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint Solvents 4905

WASTE PHASE: Liquid (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)

UN 1993

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 00 45 000 (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 — [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: 7/02/81 (54–59)

(2) _____ (Authorized Signature) — DATE: __/__/__

...AL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ✓

...THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

...d Signature [signature] — DATE: 7/2/81 (60–66)

TO 123K T-63 7/2/81 [initials]

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS — OUTSIDE ILLINOIS: 800 / 424-8802

...RT - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

SITE COPY - PART 3

002127

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0294830

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSPORTATION DEPT. (Company Name) — 11541 S. CHAMPLAIN AVE. (Address)

0316000020 G (Generator Number)

CHICAGO, (City) — ILL (State) — 60628 (Zip) — FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 0079003

SO. HOLLAND, ILL

(Hauler Name) — (Hauler Address) — S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — 91808902 (Site Number)

GRIFFITH, (City) — IND (State) — 46319 (Zip) — FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SLUDGE — WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

7005

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: 0 0 3 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: 7/7/81 — O. [signature]/RL (Authorized Signature) — 7/7/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) — DATE: 07/07/81 (54–59)

(2) [signature] (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) — DATE: 7/7/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGTO T-50 7/7/81 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

002128

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0294835

Authorization Number 9 9 8 4 3 3

Sherwin Williams Co. Transportation Dept. (Company Name) — 11541 S. Champlain Ave. (Address)

Chicago, (City) — Ill. (State) — 60628 (Zip)

0 3 1 6 0 0 0 0 2 0 G (Generator Number)

WASTE HAULER(S)

Mr. Franks Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 0 0 7 9 0 0 9

So. Holland, Ill.

(Hauler Name) — (Hauler Address) — FED.ID-ILD 0 6 9 5 0 6 1 6 0 (S.W.H. Registration Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — ~~RM~~ P.O. Box 198 (Address) — 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) — Ind. (State) — (Zip) — FED. ID-IND 0 1 6 3 6 0 2 6 5

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Sludge — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Paint Sludge — HAZARD CLASS: Flammable — WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 — 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. UN 1866

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/09/81 — O. Mioni / [signature] (Authorized Signature) — None

WASTE HAULER

I HEREBY CERTIFY 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: 07/09/81

(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:

[signature] (Authorized Signature) — DATE: 07/09/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT T-50 7/9/81 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

002129

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0294840

Authorization Number 998433

Sherwin Williams Co. Transportation Dept. (Company Name) — 11541 S. Champlain Ave. (Address)

Chicago, (City) — Ill. (State) — 60628 (Zip)

03160 00020 G (Generator Number)

FED ID IID 005456439

WASTE HAULER(S)

Mr. Franks Inc (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 0079029

So. Holland, Ill.

(Hauler Name) — (Hauler Address) — S.W.H. Registration Number

FED ID IID 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P.O. Box 190 (Address) — 91 80 8902 (Site Number)

Griffith, Ind. (City) — (State) — 46319 (Zip)

FED ID 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: Paint Solvent — HAZARD CLASS: ~~XXXXX~~ Flammable — WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 005000 — 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/9/81 — O. Mcom/BN (Authorized Signature) 4805

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry (Authorized Signature) — DATE: 7/09/81

(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: To 123K T-63 7/9/81 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

002130

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0294839

Authorization Number 9 9 8 4 3 3

Sherwin Williams Co. Transportation Dept. (Company Name) — 11541 S. Champlain Ave. (Address) — FED. ID-ILD 0 0 5 4 5 6 4 3 9

Chicago, (City) — Ill. (State) — 60628 (Zip) — 0 3 1 6 0 0 0 2 0 G (Generator Number)

WASTE HAULER(S)

Mr. Franks Inc. (Hauler Name) — 201 W. 155th St. S. Holland, Ill. (Hauler Address) — S.W.H. Registration Number 0 0 7 9 0 0 3

FED. ID-ILD 0 6 9 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) — Ind. (State) — 46319 (Zip) — FED. ID-IND 0 1 6 3 6 0 2 6 5

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Sludge — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: F005

SHIPPING DESCRIPTION: Paint Sludge — 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 — 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/10/81 — (Authorized Signature) — None

WASTE HAULER

I HEREBY CERTIFY 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 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: 7 10 81

COMMENTS OR SPECIAL INSTRUCTIONS: To WEST AGIT T-50 7/10/81 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

002131

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0294

Authorization Number 99843

SHERWIN WILLIAMS CO (Company Name)
TRANSPORTATION DEPY
11541 S CHAMPLAIN AVE (Address) FED ID-ILD 005456439
CHICAGO (City) ILLINOIS (State) 60628 (Zip)
0316000020 (Generator Number)

WASTE HAULER(S)

MR FRANKS INC (Hauler Name) 201 W 155TH ST (Hauler Address) S.W.H. Registration Number 0079039
SO HOLLAND ILL
FED ID 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) FED ID-IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT
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: 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: 4800 (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: 7-13-81 O MIONI SUPVR TRANSP DEPT (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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: 7/13/81

(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: 7/13/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT T-50 gpm 7/13/81

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

002132

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0294845

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998433

Sherwin Williams Co. (Company Name)
Transportation Dept.

11541 S. Champlain Ave. (Address)

0316000020 (Generator Number)

Chicago, (City) Ill. (State) 60628 (Zip)

FED ID IND 005456439

WASTE HAULER(S)

Hauler Name: Mr. Franks Inc.
Hauler Address: 201 W. 155th St.
S.W.H. Registration Number: 0079026

Hauler Name:
Hauler Address: So. Holland, Ill
S.W.H. Registration Number:

FED ID IND 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Facility Name: American Chemical Service
Address: P O Box 190
Site Number: 9180890 2

City: Griffith, State: Ind. Zip: 46319

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

1263

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable
HAZARD CLASS: 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: 005000 (1 GALLONS (Circle One) 2 CU. YDS.) 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-14-81 O. Mioni (Authorized Signature) None

WASTE HAULER

I HEREBY CERTIFY 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 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: 7/14/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123K T-63 1/14/81 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

002133

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0294849

Authorization Number 998433

Sherwin Williams Co. Transportation Dept. (Company Name) — 11541 S. Champlain Ave. (Address) — 0316000020 (Generator Number)

Chicago, (City) — Ill. (State) — 60628 (Zip) — FED ID ILD 069506160

WASTE HAULER(S)

Mr. Franks Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 0079005

S. Holland, Ill.

Hauler Name — Hauler Address — S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P O Box 190 (Address) — 918089002 (Site Number)

Griffith, (City) — Ind. (State) — 46319 (Zip) — FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint — 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: 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) None

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: July 15 1981 — O. Moni (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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: 7/15/81

(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:

T Dumbell (Authorized Signature) — DATE: 7/15/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT T-50 7/15/81 [illegible]

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

002134

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

0297128

Authorization Number 998433

SHERWIN WILLIAMS CO TRANSPORTATION DEPT (Company Name) — 1154S SO CHAMPLAIN AVE (Address)

CHICAGO XXX (City) — ILLINOIS (State) — 60628 (Zip)

Generator Number 0316000020 G

FED ID- ILD 005456439

WASTE HAULER(S)

MR FRANKS INC (Hauler Name) — 201 W 155TH ST (Hauler Address) — S.W.H. Registration Number 0079009

SO HOLLAND ILL — FED ID-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) — Site Number 91808902

GRIFFITH (City) — IND (State) — 46319 (Zip) — FED ID-IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT 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: WASTE PAINT

HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-16-81 — O. Mioni (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) Tom Berry (Authorized Signature) — DATE: 7/16/81

(2) _____ (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) — DATE: 7/16/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123R 7/16/81 -- I-63 gpm.

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

002135

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0297137

Authorization Number 998433

Sherwin Williams Co. Transportation Dept. (Company Name) — 11541 S. Champlane Ave. (Address)

Chicago, (City) — Ill. (State) — 60628 (Zip)

0316000020 (Generator Number) G

FED ID ILD 005456439

WASTE HAULER(S)

Mr. Franks Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 0079029

(Hauler Name) — So. Holland, Ill. (Hauler Address) — S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P.O. Box 190 (Address) — 91808902 (Site Number)

Griffith, (City) — IND. (State) — 46319 (Zip)

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint — 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: FOOT

SHIPPING DESCRIPTION: — HAZARD CLASS: XXX Flammable

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 (47–52) — 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-21-81 — O. Mioni (Authorized Signature) — None

WASTE HAULER

I HEREBY CERTIFY 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: 7/21/81 (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 123R T-63 7/21/81 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

002136

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0297142

Authorization Number 998433

Sherwin Williams Co. Transportation Dept. (Company Name) — 11541 S. Champlain Ave. (Address)

Chicago, (City) — Ill. (State) — (Zip)

0316000020 G (Generator Number)

FED ID ILD 005456439

WASTE HAULER(S)

Mr. Franks Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 0079029

(Hauler Name) — So. Holland, Ill (Hauler Address) — S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P. O. Box 190 (Address) — 91808902 (Site Number)

Griffith, (City) — IND. (State) — 46319 (Zip)

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint — 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: 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: ~~0050000~~ 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: 7-23-81 — [signature] (Authorized Signature) — None

WASTE HAULER

I HEREBY CERTIFY 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: 7/23/81

(2) _____ (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) — DATE: 7/23/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT T-50 7/23/81 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

002137

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0297139

Authorization Number 9 9 8 4 3 3

Sherwin Williams Co. Transportation ~~XXX DSSS~~ (Company Name) — 11541 S. Champlain Ave. (Address)

Chicago, (City) — Ill. (State) — Zip

0 3 1 6 0 0 0 0 2 0 G (Generator Number)

FED ID ILD 0 0 5 4 5 6 4 3 8

WASTE HAULER(S)

Mr. Franks Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 0 0 7 9 0 2 1

(Hauler Name) — S. Holland, Ill. (Hauler Address) — S.W.H. Registration Number

FED ID ILD 0 6 9 5 0 6 1 6 0

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) — 46319 (Zip)

FED ID IND 0 1 6 3 6 0 2 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint — 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: Flammable — WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 (5500) — 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: 7-23-81 — D. Moore / bn (Authorized Signature) — None 7005

WASTE HAULER

I HEREBY CERTIFY 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: 07/23/81

(2) _____ (Authorized Signature) — DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) — DATE: 7/23/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123R T-63 7/23/81 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

002138

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0297146 (1–7)

Authorization Number 998433 (8–13)

Sherwin Williams Co. (Company Name)
Transportation Dept.
11541 S. Champlain Ave. (Address)
Chicago, (City) Ill. (State) 60628 (Zip)
Generator Number 0316000020G (14–24)
FED ID ILD 005456439

WASTE HAULER(S)

Mr. Franks Inc. (Hauler Name) 201 W. 155th St. (Hauler Address)
S.W.H. Registration Number 007902 5 (25–31)

(Hauler Name) So. Holland, Ill. (Hauler Address)
S.W.H. Registration Number (32–38)
FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) P O Box 190 (Address)
Site Number 91808902 (39–46)
Griffith, (City) Ind. (State) 46319 (Zip)
FED ID 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: HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 (47–52)

1 GALLONS (Circle One)
2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-28-81 D. Moniz/br (Authorized Signature) NONE

WASTE HAULER

I HEREBY CERTIFY 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: 7/28/81 (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: 7/28/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 123x T-63 7/28/81 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
002139

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0297149

Authorization Number 998433

Sherwin Williams Co. Transportation Dept. (Company Name) — 11541 S. Champlain AVe. (Address)

Chicago, (City) — Ill. (State) — 60628 (Zip) — FED ID ILD 005456439

0316000020 (Generator Number) G

WASTE HAULER(S)

Mr. Franks Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 007902 5

(Hauler Name) — So. Holland, Ill (Hauler Address) FED ID ILD 069506160 — 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) — Ind. (State) — 46319 (Zip) FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint — 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: Flammable — WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 005000 — 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-30-81 — O. Mioni / None (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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: 7/30/81

(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: 7/30/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123Z T-63 7/30/81 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

002140

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0297152

Authorization Number 998433

Sherwin Williams Co. Transportation Depts. (Company Name) — 11541 S. Champlain Ave. (Address)

Chicago, (City) — Illl. (State) — 60628 (Zip) — FED ID ILD 005456439

0316000020 (Generator Number) G

WASTE HAULER(S)

Mr. Franks, Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 0079009

(Hauler Name) — So. Holland, Ill (Hauler Address) FED ID ILD 069506160 — 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) — Ind, (State) — 46319 (Zip) FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint — 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: 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. 5000

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-31-81 — O Mioni (Authorized Signature) — NONE

WASTE HAULER

I HEREBY CERTIFY 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: 07/31/81

(2) _____ (Authorized Signature) — DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) — DATE: 7/31/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST ACIT T-50 7/31/81 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

002141

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0297158

Authorization Number 998433

Sherwin Williams Co. Transportation Dept. (Company Name) — 11541 S. Champlain Ave. (Address)

Chicago, (City) — Ill. (State) — 60628 (Zip)

0316000020 (Generator Number) G

FED ID ILD 005456439

WASTE HAULER(S)

Mr. Franks Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 007902

S. Holland, Ill (Hauler Address) — S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P O Box 190 (Address) — 91808902 (Site Number)

Griffith, (City) — IND. (State) — 46319 (Zip)

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint — 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: 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~~ 005500 — 1 GALLONS (Circle One) 2 CU. YDS. 5000

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION 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 — D. Mioni /dn (Authorized Signature) — None F005

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry (Authorized Signature) — DATE: 8/04/81

(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:

[signature] (Authorized Signature) — DATE: 8/4/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123R T-63 8/7/81 JM

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

002142

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0297162

998433
Authorization Number

Sherwin Williams Co. [redacted] Transp. Dept. — (Company Name)
11541 S. Champlain Ave. — Address
Chicago, — City
Ill. — State
60628 — Zip
FED ID ILD 0 0 5 4 5 6 5 3 9

0 3 1 6 0 0 0 0 2 0 G
Generator Number

WASTE HAULER(S)

Mr. Franks Inc. — Hauler Name
201 W. 155th St. — Hauler Address
S.W.H. Registration Number 0 0 7 9 0 2 5

So. Holland, — Hauler Name
Ill. — Hauler Address
FED ID ILD 0 6 9 5 0 6 1 6 0
S.W.H. Registration Number [redacted]

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
46319 — Zip
FED ID IND 0 1 6 3 6 0 2 6 5

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint
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: [redacted] Flammable
WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 0 0 5 ~~[illegible]~~ 0 0 0
1 GALLONS (Circle One)
2 CU. YDS. ~~[illegible]~~

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

None

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) Tom Berry (Authorized Signature) — DATE: 8 1 0 6 1 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: 8/6/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 123z T-63 8/6/81 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

002143

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

0297166

Authorization Number 998433

Sherwin Williams Co. Transportation Department (Company Name) — 11541 S. Champlain Ave. (Address)

Chicago, (City) — Illinois (State) — 60628 (Zip) — FED ID ILD 005456439

Generator Number 0316000020 G

WASTE HAULER(S)

Mr. Franks Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 00790

(Hauler Name) — So. Holland, Ill. (Hauler Address) — FED ID ILD 069506160 — S.W.H. Registration Number [illegible]

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P. O. Box 190 (Address) — Site Number 91808902

Griffith, (City) — Ind. (State) — 46319 (Zip) — FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint — 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: Flammabel — WEIGHT FOR D.O.T. 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. 3000

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION 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 — (Authorized Signature) — NONE K878

WASTE HAULER

I HEREBY CERTIFY 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: 08/10/81

(2) ____ (Authorized Signature) — DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

____ (Authorized Signature) — DATE: 8/10/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 270 X T-50 8/10/81 JTM

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

002144

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0297165

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998433

Sherwin Williams Co. (Company Name) | 11541 S. Champlain Ave. (Address) | 0316000020 (Generator Number)

Chicago, (City) | Ill. (State) | 60628 (Zip) | FED ID ILD 005456439

WASTE HAULER(S)

Mr. Franks Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address) | S.W.H. Registration Number 00790-24

(Hauler Name) | S. Holland, Ill. (Hauler Address) | FED ID ILD 069506160 | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | P O Box 190 (Address) | 918089 02 (Site Number)

Griffith, (City) | IND. (State) | 46319 (Zip) | FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint | 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: 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 04500 | 1 GALLONS (Circle One) 2 CU. YDS. 4500

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION 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 | D. Moore (Authorized Signature) | NONE

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry (Authorized Signature) | DATE: 8/07/81

(2) ____ (Authorized Signature) | DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) | DATE: 8-7-81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT T-50 8/7/81 JM

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

002145

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0297168

Authorization Number 998433

Sherwin Williams Co. Transportation Dept. (Company Name) — 11541 S. Champlain AVe. (Address)

Chicago, (City) — Ill. (State) — 606 28 (Zip) — 0316000020 (Generator Number) G

FED ID ILD 005456439

WASTE HAULER(S)

Mr. Franks Inc. (Hauler Name) — 201 W. 155th ST. (Hauler Address) — S.W.H. Registration Number 007902 5

(Hauler Name) — So. Holland, Ill. (Hauler Address) — S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P O Box 190 (Address) — 91808902 (Site Number)

Griffith, (City) — Ind. (State) — 46319 (Zip) — FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint — 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: Flammabe

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 (47–52)

1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/11/81 — O. Mione / (Authorized Signature) — NONE

WASTE HAULER

I HEREBY CERTIFY 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: 08/11/81 (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: 08/11/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 123 K T-63 8/11/81 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

002146

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0297174

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 998433

Sherwin Williams Co. Transportation Dept. (Company Name) — 11541 S. Champlain Ave. (Address)

Chicago, (City) — Ill. (State) — 60628 (Zip) — FED ID ILD 005456439

Generator Number 0316000020

WASTE HAULER(S)

Mr. Franks Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 00794029

So. Holland, (Hauler Name) — Ill. (Hauler Address) — FED ID ILD 069506160 — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P. O. Box 190 (Address) — Site Number 91808902

Griffith, (City) — Ind. (State) — 46319 (Zip) — FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint — 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: 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. 5000

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION 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) — NONE

WASTE HAULER

I HEREBY CERTIFY 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: 08/13/81

(2) _____ (Authorized Signature) — DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) — DATE: 8/13/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 123R T-63 8/13/81

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

002147

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0297178

Authorization Number 998433

Sherwin Williams Co. Transportation Dept. (Company Name) — 11541 S. Champlain AVe. (Address)

Chicago, (City) — Ill. (State) — 60628 (Zip) — FED ID ILD 005456439

Generator Number 0316000020 G

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 0079021

So. Holland, (Hauler Name) — Ill. (Hauler Address) — FED ID ILD 069061 60 — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P. O. Box 190 (Address) — Site Number 91808902

Griffith, (City) — Ind. (State) — 46319 (Zip) — FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint — 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: 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. 5000

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION 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) — K078

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry (Authorized Signature) — DATE: 8/18/81

(2) _____ (Authorized Signature) — DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) — DATE: 8/18/81

TO 123R T-63 8/18/81 gm

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS — OUTSIDE ILLINOIS: 800 / 424-8802

IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

002148

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0297187

Authorization Number 998433

SHERWIN WILLIAMS CO
TRANSPORTATION DEPT 11541 S CHAMPLAIN AVE FED ID-ILD 005456439
(Company Name) Address

CHICAGO ILLINOIS 60628
City State Zip

0316000020 G
Generator Number

WASTE HAULER(S)

MR FRANKS I C 201 W 155TH ST
Hauler Name Hauler Address

S.W.H. Registration Number 0079029

SO HOLLAND ILL FED ID-ILD 069506160
Hauler Name Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE PO BOX 190
(Facility Name) Address

91808902
Site Number

GRIFFITH INDIANA 46319
City State Zip

FED ID-IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT
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: FLAMMABLE

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-25-81 O. Moini (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) Jim Bult (Authorized Signature) DATE: 08/25/81

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 8/25/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 123 TR T-63 8/25/81 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

002149

0297186

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998433

Sherwin Williams Co. Transportation Dept. (Company Name) — 11541 S. Champlain Ave. (Address)

Chicago, (City) — Ill. (State) — 60628 (Zip) — FED ID ILD 005456439

Generator Number 0316000020

WASTE HAULER(S)

Mr. Franks Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 0079009

Hauler Name — S. Holland, Ill. (Hauler Address) — FED ID ILD 069450616 — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P. O. Box 190 (Address) — Site Number 91808902

~~Gxx~~ Griffith, (City) — Ind. (State) — 46319 (Zip) — FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint — 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: 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.) 5000

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION 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 — O Mimi (Authorized Signature) — NONE K078

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry (Authorized Signature) — DATE: 8/21/81

(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: 8/21/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 210K T-50 8/21/81 JAM

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

002150

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0297196

Authorization Number 998433

Sherwin Williams C. Transportation Dept. (Company Name)
11541 S. Champlain Ave. (Address)
Chicago, Ill. (City) Ill. (State) 60628 (Zip)
Generator Number 0316000020 G
FED ID ILD 005456439

WASTE HAULER(S)

Mr. Franks Inc. (Hauler Name) 201 W. 155th St. (Hauler Address)
S.W.H. Registration Number 0079023

(Hauler Name) S. Holland, Ill. (Hauler Address)
FED ID ILD 069508160
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) P O Box 190 (Address)
Site Number 91808902
Griffith, (City) Ind. (State) 46319 (Zip)
FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint
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: Flammable

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 (1 GALLONS (Circle One) 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-31-81 (Authorized Signature) NONE

WASTE HAULER

I HEREBY CERTIFY 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: 8/31/81

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 8/31/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123R T-63 8/31/81

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

002151

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
- (217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0297200

Authorization Number 998433

Sherwin Williams Transp. Dept. (Company Name) — 11541 S. Champlain Ave. (Address)

Chicago, (City) — Ill. (State) — 60628 (Zip)

Generator Number 0316000020 G

FED ID ILD 005456439

WASTE HAULER(S)

Mr. Franks, Inc (Hauler Name) — 201 W. 155th St. (Hauler Address)

S.W.H. Registration Number 00790 09

Hauler Name — S. Holland, Ill. (Hauler Address)

FED ID ILD 069500160

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P O Box 190 (Address)

Site Number 91808902

Griffith, (City) — Ind. (State) — 46319 (Zip)

FED ID IND 016380265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint

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: Flammable

WEIGHT FOR D.O.T. USE: _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

NONE

DATE: 9-9-81 — O Mlonis (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) Jim Bradley (Authorized Signature) — DATE: 9/9/81

(2) _____ (Authorized Signature) — DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) — DATE: 9/9/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 123R T-63 9/9/81 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

002152

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0319663

Authorization Number 998433

SHERWIN WILLIAMS CO. (Company Name)
TRANSPORTATION DEPARTMENT
11541 S. CHAMPLAIN AVE. (Address)
CHICAGO, (City) ILLINOIS (State) 60628 (Zip) FED ID ILD 005456439

Generator Number 0316000020

WASTE HAULER(S)

MR. FRANKS, INC. (Hauler Name) 201 W. 155TH ST. (Hauler Address)
S.W.H. Registration Number 00790021

SO. HOLLAND, (Hauler Name) ILL. (Hauler Address)
S.W.H. Registration Number fed ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) P.O. BOX 190 (Address)
Site Number 91808902
GRIFFITH, (City) IND. (State) 46319 (Zip) FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT
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: 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. ~~5000~~ 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9-15-81 O Moni (Authorized Signature) FOB NONE

WASTE HAULER

I HEREBY CERTIFY 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 Williamson (Authorized Signature) DATE: 9/15/81

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 9/15/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123R T-63 9/25/81 gem

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

002153

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0319670

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 998433

Sherwin Williams Co. (Company Name) — Transportation Department

11541 S. Champlain Ave. (Address)

Chicago, (City) — Ill. (State) — 60628 (Zip)

Generator Number 0316000020

FED ID ILD 005456439

WASTE HAULER(S)

Mr. Franks, Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address)

S.W.H. Registration Number 00790 21

S. Holland, Ill. (Hauler Name) — (Hauler Address)

S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P O Box 190 (Address)

Site Number 91808902

Griffith, (City) — Ind. (State) — 46319 (Zip)

FED ID IND 016436026 5

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint

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: Flammable

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9-23-81 — (Authorized Signature) — NONE

WASTE HAULER

I HEREBY CERTIFY 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 Bowchi (Authorized Signature) — DATE: 09/23/81

(2) _____ (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) — DATE: 9/23/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 123I T-63 9/23/81 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

002154

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0328466

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 998433

Sherwin Williams Co. (Company Name)
Transportation Department
11541 S. Champlain Ave. (Address)
Chicago, (City) Ill. (State) 60628 (Zip)
Generator Number 0316000020 G
FED ID ILD 005456439

WASTE HAULER(S)

Mr. Franks Inc. (Hauler Name) 201 W. 155th St. (Hauler Address) S.W.H. Registration Number 00790 25
S. Holland, Ill. (Hauler Address) S.W.H. Registration Number
FED ID ILD 069506120

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) P O Box ~~XXX~~ 190 (Address) Site Number 91808902
Griffith, (City) Ind. (State) 46319 (Zip)
FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint
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: ~~XXX~~ Flammable Paint
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. 5000

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9-24-81 (Authorized Signature)

NONE

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Robert Perkins (Authorized Signature) DATE: 09/24/81

(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: 9/24/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 123X T-63 5/24/81

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

002155

0319668

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998433

Sherwin Williams Co. — (Company Name)
Transportation Department
11541 S. Champlain Ave. — Address
Chicago, — City
Ill. — State
60628 — Zip

Generator Number 0316000020

FED ID ILD 005456439

WASTE HAULER(S)

~~SXI~~ Mr. Franks Inc. — Hauler Name
201 W. 155th St. — Hauler Address
S.W.H. Registration Number 0079025

Hauler Name
S. Holland, Ill. — Hauler Address
S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service — (Facility Name)
P. O. Box 190 — Address
Site Number 91808902
Griffith, — City
Ind. — State
46319 — Zip

FED ID 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:
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: 085000

1 GALLONS (Circle One)
2 CU. YDS. ~~5000~~ 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9-16-81
(Authorized Signature)

NONE

WASTE HAULER

I HEREBY CERTIFY 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: 9/21/81

(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 123R T-63 9/22/81 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

002156

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0319667

Authorization Number 998433

Sherwin Williams Co. Transportation Dept. (Company Name) — 11541 S. Champlain Ave. (Address)

Chicago, (City) — Ill. (State) — 60628 (Zip)

0316000020 (Generator Number)

FED ID ILD 005456439

WASTE HAULER(S)

Mr. Franks, Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 0079009

(Hauler Name) — So. Holland, Ill. (Hauler Address) — S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — PXO. Box 190 (Address) — 91808902 (Site Number)

Griffith, (City) — Ind. (State) — 46319 (Zip)

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint — 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: 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. 5000

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9-16-81 — O. Mioni (Authorized Signature) — NONE 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) [signature] (Authorized Signature) — DATE: 09/16/81

(2) _____ (Authorized Signature) — DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) — DATE: 9/16/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 210 E T-50 9/16/81 Jim.

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

002157

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0360619

Authorization Number 998433

Sherwin Williams Co. Transportation Dept. (Company Name) — 11541 S. Champlain Ave. 60628 (Address)

Chicago, (City) — Ill. (State) — 60628 (Zip)

Generator Number 0316000020 G

FED ID ILD 005456439

WASTE HAULER(S)

Mr. Franks, Inc. (Hauler Name) — 201 W. 155th St. So. Holland, Ill. (Hauler Address) — S.W.H. Registration Number 00790 29

Hauler Name — Hauler Address — S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P O Box ~~1890~~ 190 (Address) — Site Number 918089029

Griffith, (City) — Ind. (State) — 46319 (Zip)

FED ID 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: HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-21-81 — O Mini (Authorized Signature) — K078 — NONE

WASTE HAULER

I HEREBY CERTIFY 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 Buck (Authorized Signature) — DATE: 10/21/81

(2) _____ (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) [illegible] — DATE: 10/21/81

COMMENTS OR SPECIAL INSTRUCTIONS: Tot 123R T-63 10/21/81 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

002158

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0360617

Authorization Number 998433

Sherwin Williams Co. Transportation Dept. (Company Name) — 11541 S. Champlain AVe. (Address)

Chicago, (City) — Ill. (State) — 60628 (Zip)

0316000020 G (Generator Number)

FED ID ILD 005456439

WASTE HAULER(S)

Mr. Franks, Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 0079001

(Hauler Name) — So. Holland, Ill. (Hauler Address) — S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P O Box 190 (Address) — 91808902 (Site Number)

Griffith, (City) — IND. (State) — 46319 (Zip)

FED ID 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: 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 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: 10-20-81 (Authorized Signature) none

WASTE HAULER

I HEREBY CERTIFY 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 Grad (Authorized Signature) DATE: 10/20/81

(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: 10/20/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 211R T-50 10/20/81 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

002159

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0360616

Authorization Number 998433

Sherwin Williams Co. Transportation Dept. (Company Name) — 11541 S. Champlain Ave. (Address)

Chicago, (City) — Ill. (State) — 60628 (Zip)

0316000020 G (Generator Number)

FED ID ILD 005456439

WASTE HAULER(S)

Mr. Franks, Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 0079003

(Hauler Name) — So. Holland, Ill. (Hauler Address) — S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P O Box 190 (Address) — 91808902 (Site Number)

Griffith, (City) — Ind. (State) — 46319 (Zip)

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT — 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: 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 (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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-16-81 — D. Mioni / on (Authorized Signature) — NONE

WASTE HAULER

I HEREBY CERTIFY 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: 10/16/81 (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:

[signature] (Authorized Signature) — DATE: 10/16/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 210 K T-50 10/16/81 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

002160

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0328484

Authorization Number 9 9 8 4 3 3

SHERWIN WILLIAMS CO TRANSPORTATION DEPT (Company Name) — 11541 S CHAMPLAIN AVE (Address)

CHICAGO (City) — ILLINOIS (State) — 60628 (Zip) — Generator Number 0 3 1 6 0 0 0 0 2 0 G

FED ID ILD 0 0 5 4 5 6 4 3 9

WASTE HAULER(S)

MR FRANKS (Hauler Name) — 201 W 155TH ST SO HOLLAND ILL (Hauler Address) — S.W.H. Registration Number 0 0 7 9 0 25

FED ID ILD 0 6 9 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) — Site Number 9 1 8 0 8 9 0 2

GRIFFITH (City) — IND (State) — 46319 (Zip)

FED ID IND 0 1 6 3 6 0 2 6 5

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT
DOT 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: FLAMMABLE

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 — 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-5-81 — (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: 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 203E T-50 10/5/81 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

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0360613

Authorization Number 998433

Sherwin Williams Co. (Company Name) — Transportation Dept.
11541 S. Champlain AVe. (Address)
Chicago, (City) Ill. (State) 60628 (Zip)
Generator Number 0316000020
FED ID ILD 005456439

WASTE HAULER(S)

Mr. Franks, Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 007900 9

(Hauler Name) — So. Holland, Ill. (Hauler Address) — S.W.H. Registration Number
FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P O Box 190 (Address) — Site Number 91808902
Griffith, (City) Ind. (State) 46319 (Zip)
FED ID 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: — HAZARD CLASS: FLAMMABLE — WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 005000 — 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/15/81 — (Authorized Signature) — NONE

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) ____ (Authorized Signature) — DATE: 10/15/81

(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: 10/15/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 123R T-63 10/15/81 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

002162

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

0360611

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998433

Sherwin Williams Co. (Company Name) | 11541 S. Champlain Ave. (Address) | 0316000020 (Generator Number)

Chicago, (City) | Ill. (State) | 60628 (Zip) | FED ID ILD 005456439

WASTE HAULER(S)

Mr. FRanks Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address) | S.W.H. Registration Number 007901

So. Holland, Ill. (Hauler Address) | Hauler Name | S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemcial SErvice (Facility Name) | P O Box 190 (Address) | 91808902 (Site Number)

Griffith, (City) | Ind. (State) | 46319 (Zip) | FED ID 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: | 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. 3000

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/13/81 | (Authorized Signature) | NONE

WASTE HAULER

I HEREBY CERTIFY 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: 10/13/81

(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: 10/13/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 210X T-50 10/13/81 gm

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

002163

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0360610

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998433

SHERWIN WILLIAMS CO.
11541 S. CHAMPLAIN AVE.
(Company Name)

TRANSPORTATION DEPT.
Address

CHICAGO, ILL. 60628
City State Zip

0316000020 G
Generator Number

FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS, INC.
Hauler Name

201 W. 155TH ST.
Hauler Address

SO. HOLLAND, ILL.

S.W.H. Registration Number 007902 1

Hauler Name

Hauler Address

S.W.H. Registration Number

FED ID ILD 0695061 60

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE
(Facility Name)

P O BOX 190
Address

91808902
Site Number

GRIFFITH, IND. 46319
City State Zip

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT

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: FLAMMABLE

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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-13-81

O. Mioni / [illegible]
(Authorized Signature)

10/13/81
NONE

WASTE HAULER

I HEREBY CERTIFY 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: 10/13/81

(2)
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature]
(Authorized Signature)

DATE: 10/13/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 123X T-63 10/13/81 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

002164

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0335830

Authorization Number 998433

SHERWIN WILLIAMS CO. TRANSPORTATION DEPARTMENT (Company Name) — 11541 S. CHAMPLAIN AVE. (Address) — 60628

CHICAGO, (City) — ILL. (State) — 60628 (Zip) — 031600002 (Generator Number) — FED ID ILD 005456439

WASTE HAULER(S)

FRANKS, INCL (Hauler Name) — 201 W. 155TH ST. SO. HOLLAND, ILL (Hauler Address) — S.W.H. Registration Number 00790

Hauler Name — Hauler Address — S.W.H. Registration Number — FED ID ILN

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — 918089 02 (Site Number)

GRIFFITH, (City) — IND, (State) — 46319 (Zip) — FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT — 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: FLAMMABLE — WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 005000 — (1) GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-12-81 — O. Morrison (Authorized Signature) — NONE

WASTE HAULER

I HEREBY CERTIFY 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: 10/12/81

(2) ____ (Authorized Signature) — DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

____ (Authorized Signature) — DATE 10 12 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 211X T-50 10/12/81 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

002165

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0328486

Authorization Number 998433

Sherwin Williams Co. Transportation Dept. (Company Name) — 11541 S. Champlain Ave. (Address)

Chicago, (City) — Ill. (State) — 60628 (Zip) — FED ID ILD 005456439

0316000020 G (Generator Number)

WASTE HAULER(S)

Mr. Franks, Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 007909

S. Holland, Ill. (Hauler Name) — (Hauler Address) — FED ID ILD 069506160 — 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) — Ind. (State) — 46319 (Zip) — FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint — 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: Flammable

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 (47–52) — 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-7-81 — D. Meoni / for (Authorized Signature) — F005 NONE

WASTE HAULER

I HEREBY CERTIFY 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: 10/8/81 (54–59)

(2) _____ (Authorized Signature) — DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) — DATE: 10/8/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 123TS T-63 10/8/81 [initials]

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

002166

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0328473

Authorization Number 998433

Sherwin Williams Co. — (Company Name)
Transportation Dept.
11541 S. Champlain Ave. — Address
Chicago, — City
Ill. — State
60628 — Zip
FED ID ILD 0 0 5 4 5 6 4 3 9

Generator Number 0 3 1 6 0 0 0 0 2 0 G

WASTE HAULER(S)

Mr. Franks, Inc. — Hauler Name
201 W. 155th St. — Hauler Address
S.W.H. Registration Number 0 0 7 9 0 29

Hauler Name
So. Holland, Ill. — Hauler Address
FED ID ILD 0 6 9 5 0 6 1 6 0
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service — (Facility Name)
P O Box 190 — Address
Site Number 9 1 8 0 8 9 0 2
Griffith, — City
Ind. — State
46319 — Zip
FED ID IND 0 1 6 3 6 0 2 6 5

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint
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: Flammable

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 — 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION 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)

NONE

WASTE HAULER

I HEREBY CERTIFY 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: 10/01/81

(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 123Z T-63 10/1/81 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

002167

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0328469

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998433

SHERWIN WILLIAMS CO.
TRANSPORTATION DEPARTMENT (Company Name)
11541 S. CHAMPLAIN AVE. (Address)
0316000020
931599 (Generator Number)
CHICAGO (City) ILL. (State) 60628 (Zip) FED ID ILD 005456439

WASTE HAULER(S)

MR. FRANKS INC. (Hauler Name) 201 W. 155th St - (Hauler Address) S.W.H. Registration Number 00790018

(Hauler Name) SO. HOLLAND, ILL. (Hauler Address) S.W.H. Registration Number FED ID ILD 0695061 6320

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) P. O. BOX 190 (Address) 91808902 (Site Number)
GRIFFITH, (City) IND. (State) 46319 (Zip) FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT 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: 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.) 5000

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION 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 (Authorized Signature) NONE

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 09/28/81

(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: 9/28/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 210 π T-50 9/28/81 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

002168

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0360626

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 998433

SHERWIN WILLIAMS CO.
TRANSPORTATION DEPARTMENT (Company Name) — 11541 SO. CHAMPLAIN (Address)

CHICAGO, (City) — ILL. (State) — 60628 (Zip)

0316000020 (Generator Number)

FED ID ILD 005455643 9

WASTE HAULER(S)

MR. FRANKS, INC. (Hauler Name) — 201 W. 155TH ST. (Hauler Address) — S.W.H. Registration Number 0079029

Hauler Name — SO. HOLLAND, ILL (Hauler Address) — S.W.H. Registration Number

FED ID ILD 069506160

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address) — 91808902 (Site Number)

GRIFFITH, (City) — IND. (State) — 46319 (Zip)

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT — 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: FLAMMABLE

WEIGHT FOR D.O.T. USE 33,260 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: 11-4-81 — (Authorized Signature) — K 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) Robert [illegible] (Authorized Signature) — DATE: 11 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: 11 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 123 K T-63 GPM 11/4/81

SITE COPY - PART 3

002169

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0360623 (1–7)

Authorization Number 998433 (8–13)

Sherwin Williams Co. (Company Name)
Transportation Dept.

11541 S. Champlain Ave. (Address)

Chicago, (City) Ill. (State) 60628 (Zip) FED ID ILD 0 0 5 4 5 6 4 3 9

0 3 1 6 0 0 0 0 2 0 (14) Generator Number G (24)

WASTE HAULER(S)

Mr. Franks, Inc. (Hauler Name) 201 W. 155th St. (Hauler Address) S.W.H. Registration Number 0 0 7 9 0 0 9 (25–31)

Hauler Name: So. Holland, Ill. (Hauler Address) FED ID ILD 0 6 9 5 0 6 1 6 0 S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American ~~E&K~~ Chemical Service (Facility Name) P O Box 190 (Address) 9 1 8 0 8 9 0 2 (39–46) Site Number

Griffith, (City) Ind. (State) 46319 (Zip) FED ID IND 0 1 6 3 6 0 2 6 5

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint

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: ~~Waste Solvents~~ HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 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: 10-28-81 (Authorized Signature) K078

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry (Authorized Signature) DATE: 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:

(Authorized Signature) DATE: 10 28 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 123X T-63 10/28/81 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

002170

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0360620

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 998433

Sherwin Williams Co. Transportation Dept. (Company Name)
11541 S. Champlain Ave. (Address)
Chicago (City) Ill. (State) 60628 (Zip)
Generator Number 0316000020
FED ID ILD 005456439

WASTE HAULER(S)

Mr. Franks, Inc. (Hauler Name)
201 W. 155th St. (Hauler Address)
So. Holland, Ill.
S.W.H. Registration Number 007900 01

Hauler Name
Hauler Address
S.W.H. Registration Number FED ID ILD 069503160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name)
P O Box 190 (Address)
Site Number 91808902
Griffith, (City) Ind. (State) 46319 (Zip)
FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint
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: 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 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

NONE

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

(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: 10/27/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 211K T-50 10/27/81 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

002171

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

70063

TO:	FROM:
T/S/D FACILITY American Chemical Co.	Generator Shelby Paint & Enamel Co., Inc
E.P.A. ID Code No. IND016360225	E.P.A. ID Code No. Ind 003064828
Address 420 S. Colfax	Address 5601 Progress Road
Destination Griffith, Indiana	Origin Indpolis, Indiana 46241
Phone [illegible]	Phone 317-243-3277

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5000 Gal.	Blended Lacquer Thinner	Flammable	UN 1263	Un199	38000 lbs	Red Label
	Flammable Liquid Waste	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 X _____ Date 11-2-81

TRANSPORTER #1 Mr. Frank, Inc. E.P.A. ID No. 069506160
Address 201 W. 155th. St.
City South Holland, Ill. Truck # 0079 018 State Ind. Zip 60473 Phone 312 596 3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature X _____ Date Nov. 2, 1981

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 11/4/81

To 124 R T-63
GRM 11/9/81

T/S/D F COPY

002172

HAZARDOUS WASTE

HAZARDOUS WASTE

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0373364

Authorization Number 991301

Service Gravure Corp. (Company Name) | 2727 W. Madison (Address)
Chicago (City) | Ill. (State) | 60612 (Zip)

0316000705 Generator Number G

WASTE HAULER(S)

Phillips & Martin (Hauler Name) | 138 Factory Rd. (Hauler Address) | S.W.H. Registration Number 0594001

ILD041550559

Hauler Name | Hauler Address | S.W.H. Registration Number 041550559

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemcial (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 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~~ 17 x 55	~~xx~~ 3
1 x 30	3

WEIGHT FOR D.O.T. USE 8,440 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 1 GALLONS (Circle One) / 2 CU. YDS. 965 gal.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

X DATE: 1-23-81 FD03 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:

X(1) [signature] (Authorized Signature) X DATE: 1/27/81

(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:

BOB MAUCK (Authorized Signature) DATE: 01/27/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOAD AT DOCK 1/27/81
PUMPED TO 204/E 2/2/81 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

002173

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0373365

Authorization Number 991301

Service Gravure Corp (Company Name) | 2727 W. Madison (Address) | 0316000705 (Generator Number)

Chicago (City) | Illinios (State) | 60612 (Zip)

WASTE HAULER(S)

Phillips & Martin (Hauler Name) | 138 Factory Rd. (Hauler Address) | S.W.H. Registration Number 0594001

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number ILD041550559

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemicla (Facility Name) | 420 S. Colfax (Address) | 91808902 (Site Number)

Griffith (City) | Ind. (State) | 46319 (Zip) | IND0016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic 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:
17 x 55	3
1 x 30	3

WEIGHT FOR D.O.T. USE 2500 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED:

1 GALLONS (Circle One) 2 CU. YDS. 275

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9/14/81 (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Jeff Fite (Authorized Signature) DATE: 9/14/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

BOB MAUCK (Authorized Signature) DATE: 09/14/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 9/14/81

TO 112R T-63 9/15/81 JAM

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

002174

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0189976
1 7

WASTE GENERATOR

Authorization Number 997562
8 13

SERVICE COATINGS, INC. (Company Name) — 15600 S. LATHROP AVENUE (Address)

ILD005535190
0311110010 G
14 Generator Number 24

HARVEY (City) — ILLINOIS (State) — 60426 (Zip)

WASTE HAULER(S)

ILD069506160

(1) MR. FRANK, INC. (Hauler Name) — 201 - 155th ST, SO HOLLAND, IL (Hauler Address) — S.W.H. Registration Number 007900 45
25 31

(2) _____ (Hauler Name) _____ (Hauler Address) — S.W.H. Registration Number _____
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

IND016360265

AMERICAN CHEMICAL SERVICE (Facility Name) — P O BOX 190 (Address)

91808902
39 Site Number 46

GRIFFITH (City) — INDIANA (State) — 46319 (Zip)

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: PAINT SOLVENT

HAZARD CLASS: FLAMMABLE LIQUID

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2-17-81

Kay Hansen (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000 (47 52)

1 GALLONS (Circle One)
2 CU. YDS.
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) Tom Berry (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:

B O B Marcel (Authorized Signature) DATE: 2 17 81 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: PUMPED TO 124 E 2/17/81 T-63 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

002175

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0189977

Authorization Number 997562

Service Coatings, Inc. (Company Name) | 15600 S. Lathrop Ave. (Address) | ILD005535190 0311110010 G (Generator Number)

Harvey (City) | Illinois (State) | 60426 (Zip)

WASTE HAULER(S)

(1) Mr. Frank, Inc. (Hauler Name) | 201 - 155th St., So. Holland, Ill. (Hauler Address) | S.W.H. Registration Number ILD069506160 007900 5

(2) (Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | P.O. Box 190 (Address) | IND016360265 918089 02 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint 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: Paint Solvent | HAZARD CLASS: Flammable Liquid

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-8-81 | Kathy Mattson (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 003000 (1 GALLONS / CU. YDS.) (Circle One)

METHOD OF SHIPMENT (Circle One) DRUMS | TANK TRUCK | OPEN TRUCK | OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry (Authorized Signature) | DATE: 6 08 81

(2) (Authorized Signature) | DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature) | DATE: 6/8/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 124R T-63 6/8/81 JGM

ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

002176

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0189978

Authorization Number 997552

Service Coatings, Inc. (Company Name) — 15600 S. Lathrop Ave. (Address)

ILD005535190

Harvey (City) — Illinois (State) — 60426 (Zip)

031111001 0 G (Generator Number)

WASTE HAULER(S)

ILD069506160

(1) Mr. Frank, Inc. (Hauler Name) — 201 - 155th St., So. Holland, Ill. (Hauler Address) — S.W.H. Registration Number 007900 4

(2) (Hauler Name) — (Hauler Address) — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

IND016360265

American Chemical Service (Facility Name) — P.O. Box 190 (Address)

Griffith (City) — Indiana (State) — 46319 (Zip)

918089 02 (Site Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvent — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Paint Solvent — HAZARD CLASS: Flammable Liquid

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-30-81 — Kathy Mattson (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000 (47–52) — 1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) C Barnes (Authorized Signature) — DATE: 07 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: 7/30/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125X - T-63 7/30/81 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

002177

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0189979

WASTE GENERATOR

Authorization Number 997562

Service Coatings, Inc. (Company Name) — 15600 S. Lathrop Ave. (Address)

ILD005535190

Harvey (City) — Illinois (State) — 60426 (Zip)

0311110010 (Generator Number)

WASTE HAULER(S)

ILD069506160

(1) Mr. Frank, Inc. (Hauler Name) — 201 - 155th St., So. Holland, Ill. (Hauler Address) — S.W.H. Registration Number 007907

(2) (Hauler Name) — (Hauler Address) — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P.O. Box 190 (Address) — 91808902 (Site Number)

Griffith (City) — Indiana (State) — 46319 (Zip) — IN0016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvent — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Paint Solvent — HAZARD CLASS: Flammable Liquid

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Kathy Mattson F005

DATE: 9-21-81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 001500 — 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) Jim Bradley (Authorized Signature) — DATE: 9/21/81

(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: 9/21/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 126R - T-63 9/21/81

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

002178

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0189980

WASTE GENERATOR

Authorization Number 997562

Service Coatings, Inc. (Company Name) — 15600 Lathrop Ave. (Address)

ILD005535190 (Generator Number)

Harvey (City) — Illinois (State) — 60426 (Zip)

WASTE HAULER(S)

ILT000646810

(1) Strand Trucking (Hauler Name) — 13642 Kenton (Hauler Address) — S.W.H. Registration Number 0024 002

(2) (Hauler Name) — (Hauler Address) — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — P.O. Box 190 (Address) — 918089 02 (Site Number)

Griffith (City) — Indiana (State) — 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Paint Solvent

HAZARD CLASS: Flammable Liquid

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-10-81 — Kathy Mattson (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 003800 — 1 GALLONS, 2 CU. YDS. (Circle One) — 1

METHOD OF SHIPMENT (Circle One): DRUMS — TANK TRUCK — OPEN TRUCK — OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Thomas Strand (Authorized Signature) — DATE: 12 10 81

(2) (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(1) (Authorized Signature) — DATE: 12 / 10 / 81

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

SITE COPY - PART 3

On Dock 12/10/81

33 to 125K 12/10/81
23 to 125K 12/11/81
20 to 204K 12/12/81

002179

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0064740

PLEASE RETURN COMPLETED FORM TO:
Sandee Champion

Authorization Number 997 236

WASTE GENERATOR

Fed. ID. # ILD 068 458 835

G.D. SEARLE & CO. (Company Name) — 4901 Searle Parkway (Address)

031 288 0004 G (Generator Number)

Skokie (City) — Illinois (State) — 60077 (Zip)

WASTE HAULER(S)

(1) MR. FRANK, INC. (Hauler Name) — 201 W. 155th Street (Hauler Address) — So. Holland, IL 60472

FED. ID. # ILD 069 506 160

S.W.H. Registration Number 00 79/D/8

(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)

9 180 69 02 (Site Number)

Griffith (City) — IND (State) — 46319 (Zip)

FED. ID. # IND 016 360 265

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: CHEMICAL WASTE N.O.S.

HAZARD CLASS: FLAMMABLE 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.

EPA CODE # F002 f005 F003 P053 U002 U112 U154 U220 K004

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/7/81

Bill McMillan (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004400 (47–52) — 1 GALLONS / 2 CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [signature] (Authorized Signature) DATE: 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:

Bob Mauck (Authorized Signature) DATE: 01/07/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 203R T-50 1/7/81 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

002180

TO BE COMPLETED BY WASTE GENERATOR

PLEASE RETURN COMPLETED FORM TO: Sandee Champion

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0064728

Authorization Number 99 7236

WASTE GENERATOR

G. D. SEARLE & COMPANY (Company Name) — 4901 Searle Parkway (Address) — Fed. ID. # ILD 068 458 835

Skokie (City) — Illinois (State) — 60077 (Zip)

03 1288 0004 (Generator Number)

WASTE HAULER(S)

(1) MR. FRANK, INC. (Hauler Name) — 201 W. 155th Street, So. Holland, IL 60472 (Hauler Address) — Fed. ID. # ILD 069 506 160 — S.W.H. Registration Number 0079/018

(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) — 91 80 8902 (Site Number)

Griffith (City) — IND (State) — 46319 (Zip) — Fed. ID. # IND 016 360 265

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: CHEMICAL WASTE N.O.S.

HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/13/81 — (Authorized Signature)

EPA CODE # F002 P053 U154 F005 U002 U220 F003 U112 U213 K004

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005050 — 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: 01/13/81

(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: 01/13/81

COMMENTS OR SPECIAL INSTRUCTIONS: Pumped to 204E 1/13/81 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

002181

TO BE COMPLETED BY WASTE GENERATOR

PLEASE RETURN COMPLETED FORM TO: Sandee Champion

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0064746

Authorization Number 997236

WASTE GENERATOR

G. D. SEARLE & COMPANY (Company Name) — 4901 Searle Parkway (Address) — Fed. ID. # ILD 068 458 835

Skokie (City) — Illinois (State) — 60077 (Zip)

Generator Number 0312880004

WASTE HAULER(S)

(1) MR. FRANK, INC. (Hauler Name) — 201 W. 155th Street, So. Holland, IL 60472 (Hauler Address) — Fed. ID. # ILD 069 506 160 — S.W.H. Registration Number 0079/018

(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) — Site Number 91808902

Griffith (City) — IND (State) — 46319 (Zip) — Fed. ID. # IND 016 360 265

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: CHEMICAL WASTE N.O.S.

HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

EPA CODE # F002 U002 U213 F005 U112 K004 F003 U154 P053 U220

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/19/81 — (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) Robert Perkins (Authorized Signature) — DATE: 01 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: 01 19 81

COMMENTS OR SPECIAL INSTRUCTIONS: To West Agt 2 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

TO BE COMPLETED BY WASTE GENERATOR

0064751

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

PLEASE RETURN COMPLETED FORM TO: Sandee Champion

Authorization Number 9 9 7 2 3 6

WASTE GENERATOR

G. D. SEARLE & COMPANY (Company Name) — 4901 Searle Parkway (Address) — Fed. ID. # ILD 068 458 835

Generator Number 0 3 1 2 8 0 0 0 4 G

Skokie (City) — Illinois (State) — 60077 (Zip)

WASTE HAULER(S)

(1) MR. FRANK, INC. (Hauler Name) — 201 W. 155th Street (Hauler Address) — Fed. ID. # ILD 069 506 160 — S.W.H. Registration Number 0 0 7 9/025

So. Holland, ILL 60472

(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) — Site Number 9 1 8 0 8 9 0 2

Griffith (City) — IND (State) — 46316 (Zip) — Fed. ID. # IND 016 360 265

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: CHEMICAL WASTE N.O.S.

HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

EPA CODE # F002 F005 F003 P053 U002 U112 U154 U220 U213 K004

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/30/81 — (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 5000 (1 GALLONS / 2 CU. YDS) (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK BARGE 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 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: 01 30 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST SITE 1/30/81 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

002183

TO BE COMPLETED BY WASTE GENERATOR

PLEASE RETURN COMPLETED FORM TO: Sandee Champion

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0141494 (1–7)

WASTE GENERATOR

Authorization Number 9 9 7 2 3 6 (8–13)

G. D. SEARLE & COMPANY (Company Name) — 4901 Searle Parkway (Address) — Fed. ID. # ILD 068 458 835

Skokie (City) — Illinois (State) — 60077 (Zip)

0 3 1 2 8 8 0 0 0 4 G (14–24) Generator Number

WASTE HAULER(S)

(1) MR. FRANK, INC. (Hauler Name) — 201 W. 155th Street (Hauler Address) — Fed. ID. # 069 506 160

So. Holland, IL 60472

S.W.H. Registration Number 0 0 7 9/0 0 1 (25–31)

(2) (Hauler Name) — (Hauler Address)

S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — 420 S. Colfax (Address)

9 1 8 0 8 9 0 2 (39–46) Site Number

Griffith (City) — IND (State) — 46316 (Zip) — Fed. ID. # IND 016 360 265

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: CHEMICAL WASTE N.O.S.

HAZARD CLASS: ~~FLAMMABLE~~

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

EPA CODE # F002 U002 K004 F005 U112 F003 U154 P053 U220 U213

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/16/81 — (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 0 0 5 5 0 0 (47–52) — 1 GALLONS 2 CU. YDS. (Circle One) (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:

BOB MAUCH (Authorized Signature) — DATE: 02/16/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 205th 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

002184

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0141495

PLEASE RETURN COMPLETED FORM TO: Sandee Champion

WASTE GENERATOR

Authorization Number 9 9 7 2 3 6

G.D. SEARLE & COMPANY (Company Name) | 4901 Searle Parkway (Address) | Fed ID. # ILD 068 458 835

Skokie (City) | Illinois (State) | 60077 (Zip)

Generator Number 0 3 1 2 8 8 0 0 0 4 G

WASTE HAULER(S)

(1) MR. FRANK, INC. (Hauler Name) | 201 W. 155th Street (Hauler Address) | So. Holland, IL. 60472 | Fed. ID. # 069 506 160 | S.W.H. Registration Number 0 0 7 9/6 2 1

(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) | Site Number 9 1 8 0 8 9 0 2

Griffith (City) | IND (State) | 46316 (Zip) | Fed. ID. # IND 016 360 265

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: CHEMICAL WASTE N.O.S.

HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

EPA CODE # F002 U002 U213 F005 U112 K004 F003 U154 P053 U220

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/25/81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005500 (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: 02/25/81

(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: 02/25/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 205 R 2/25/81 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

002185

HAZARDOUS WASTE MANIFEST

27378
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

STRAND TRUCKING 0004001
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	EPA # IND 0986472X66	EAGLE PICHER PLASTICS 320 S. WABSH AVE. 587-9156	4-1-81
TRANSPORTER # 1		STRAND TRUCKING CO. P.O. BOX 190 GRIFFITH IN 46319	4-1-81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICE P.O. BOX 190 GRIFFITH, IN 46319	4-1-81
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)
16 55 GAL DRMS	X		UN 1090 ACETONE FLAMMABLE LIQUID	UN1090			6160#	880 GAL		
19 55 GAL DRMS	X		FLAMMABLE LIQUID (FLAMMABLE LIQUID NA1142)	NA1142			7315#	1045 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

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE DATE

TSDF SIGNATURE DATE 4/1/81

5

TRAILER SPOTTED 4/1/81 PUMPED TO 204K 4/2/81 T-50 [illegible]

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

002186

HAZARDOUS WASTE MANIFEST

#1
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Strand % American Chemical Service
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND016351272	Eagle Picher Plastics, 14123 Roth Rd., Grabill, IN 46741	3-24-81
TRANSPORTER # 1	ILT000646810	%American Chemical Service Strand Trucking Crestwood, Illinois	3-24-81
TRANSPORTER # 2 (If required)	IND016360265	American Chemical Service Ind., 420 S. Colfax Ave., Griffith, IN 46319	3-24-81
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)
51 Drums		F001	Methylene Chloride	UN1593				51		
29 Drums		U002	Waste Polyester Resin Flammable Liquid nos	UN1866				29		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

_____ (Signature of Consignor)

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE — TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE — DATE 3/24/81 — TSDF SIGNATURE — DATE 3/24/81

TRAILER SPOTTED 3/24/81 — PUMP 44 TO #2 STILL 3/26/81 T-63

DUMPED 36 DRUMS TO BOX 4/2/81

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

002187

HAZARDOUS WASTE MANIFEST

#5
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Strand % American Chemical Service
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND016351272	Eagle Picher Plastics, 14123 Roth Road, Grabill, IN 46741	8-5-81
TRANSPORTER # 1	ILT000646810	Strand Trucking % American Chemical Service, Crestwood, IL	8-5-81
TRANSPORTER # 2 (if required)	IND016360265	Smerican Chemical Service, 420 S. Colfax Ave, Griffith IN	8-5-81
TSDF TREATMENT STORAGE OR DIS-- POSAL FACILITY			
TSDF TREATMENT STORAGE OR DIS— POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, .172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
		1								
62 drums		U002 ~~XXXX~~	Methylene Chloride	UN1593				62		
4 drums			Xylene	UN1307				4		
5 drums			Acetone	UN1090				5		

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

VP EM 8-5-81
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

James Pitts 8-5-81
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

Michael D. Burge 8/5/81
TSDF SIGNATURE DATE

3

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TRANSPORTER #2

002188

HAZARDOUS WASTE MANIFEST

#2
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Strand % American Chemical Service
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND016358 1272	Eagle Picher Plastics, 14123 Roth Rd., Grabill, IN 46741	4-1-81
TRANSPORTER # 1	ILT000646810	%American Chemical Service Strand Trcking Crestwood, ILlinois	4-1-81
TRANSPORTER # 2 (if required)	IND016360265	American Chemical Service INd., 420 S. Colfax Ave., Griffith, IN 46319	4-1-81
TSDF TREATMENT STORAGE OR DIS—POSAL FACILITY			
TSDF TREATMENT STORAGE OR DIS—POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
33 drums		F001	Methylene Chloride	UN1593				33		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges
_____ (Signature of Consignor)

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked
Check box if charges are to be collect ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE — TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE — DATE — TSDF SIGNATURE — DATE

TRAILER SPOTTED 4/1/81 — PUMPED 26 TO #1 STILL 5/12/81 T-63 gm

5

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7 DR TO 1A 8/21/81 T-63 gm

TSDF COPY

002189

HAZARDOUS WASTE MANIFEST

#4
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Strand % American Chemical Service
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND016351272	Eagle Picher Plastics, 14123 Roth Road, Grabill, IN 46741	5-15-81
TRANSPORTER # 1	ILT000646810	Strand Trucking % American Chemical Service, Crestwood, IL	5-15-81
TRANSPORTER # 2 (If required)	IND016360265	American Chemical Service, 420 S. Colfax Ave, Griffith, IN	5-15-81
TSDF TREATMENT STORAGE OR DIS—POSAL FACILITY			
TSDF TREATMENT STORAGE OR DIS—POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
			T-50 6/15/81 JTM							
20 Drums		U002	Polyester Resin To Box	UN1866				20		
2 drums			Acetone To 109R T-63 5/20/81 JTM	UN1090				2		
3 drums			Xylene To 125R T-63 5/20/81 JTM	UN1307				3		
52 drums		F001	Methylene Chloride 44 To #3 STILL T-63	UN1593				52		

SPECIAL HANDLING INSTRUCTIONS 7/30/81 JTM
8 to 14 T-63 8/21/81 JTM

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT *Hazardous Materials are discharged* creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges
_____ (Signature of Consignor)

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency.

This is to certify acceptance of the hazardous waste shipment.
William J. Sylvester 5-15-81
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE DATE TSDF SIGNATURE DATE 5/1/82

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TRANSPORTER #1

002190

HAZARDOUS WASTE MANIFEST

#5
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Strand % American Chemical Service
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND016351272	Eagle Picher Plastics, 14123 Roth Road, Grabill, IN 46741	8-5-81
TRANSPORTER # 1	ILT000646810	Strand Trucking % American Chemical Service, Crestwood, IL	8-5-81
TRANSPORTER # 2 (if required)	IND016360265	Smerican Chemical Service, 420 S. Colfax Ave, Griffith IN	8-5-81
TSDF TREATMENT STORAGE OR DIS—POSAL FACILITY			
TSDF TREATMENT STORAGE OR DIS—POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
		1	54 DR TO 1B T-63 8/18/81 8 DR TO 14 T-63 8/21/81							
62 drums		U002	Methylene Chloride	UN1593				62		
4 drums			Xylene TO 124K T-63 8/13/81 gpm	UN1307				4		
5 drums			Acetone TO 109K T-63 8/12/81 gpm	UN1090				5		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☑ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges
_____ (Signature of Consignor)

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE DATE

TRAILER SPOTTED 8/5/81

TSDF SIGNATURE DATE

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002191

HAZARDOUS WASTE MANIFEST

#6
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

STRAND % AMERICAN
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND016351272	EAGLE PICHER PLASTICS, 14123 ROTH ROAD, GRABILL, IN 46741	10-13-81
TRANSPORTER # 1	ILT000646810	STRAND TRUCKING %AMERICAN CHEMICAL SERVICE, CRESTWOOD, IL	10-13-81
TRANSPORTER # 2 (If required)	IND016360265	AMERICAN CHEMICAL SERVICE, 420 S. COLFAX AVE. GRIFFITH IN.	10-13-81
TSDF TREATMENT STORAGE OR DIS—POSAL FACILITY			
TSDF TREATMENT STORAGE OR DIS—POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
62 drums			Methylene Chloride	UN1593				62		
3 Drums			Xylene	UN1307				3		

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

UNLOADED 10/15/81 TO 1A 10/22/81 T-63 9am

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