US EPA RECORDS CENTER REGION 5
460644

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

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

MANIFEST DOCUMENT NUMBER: 5

TO: T/S/D/F: American Chemical	FROM: Generator: Grabill Cabinet Co., Inc.
E.P.A. ID Code No.: IND - 16360265	E.P.A. ID Code No.: IND 005421441
Address: 420 S. Colfax	Address: P.O. Box 40
Destination: Griffith, Ind. 46319	Origin: Grabill, Ind. 46741
Phone: 219 924-4370	Phone: 219 627-2131

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
6	55 Gal. Drums	NA-1142	NA1142	2005		FLAMMABLE
	Waste Paint Thinning Compound	Flammable Liquid			330	1

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

CERTIFICATION

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

Generator Signature: GRABILL CABINET CO., INC. By: A. C. Mac Date: 12-23-81

TRANSPORTER #1: Thomas Solvent Co. E.P.A. ID No.: IND-39993902
Address: 5605 Planeview Dr.
City: Ft. Wayne State: IN Zip: 46825 Phone: 219 482-9638

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature: _____ Date: 12-23-81

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/F Signature: J Dunkle Date: 1/4/82

COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

003557

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0383400

Authorization Number 991562

GLIDDEN C&R DIV. SCM CORP. (Company Name) — 1833 S. NORMAL (Address)

CHICAGO (City) — ILLINOIS (State) — 60616 (Zip)

031600018 1 G (Generator Number)

ILT180012080

WASTE HAULER(S)

MR. FRANK + CO. (Hauler Name) — 201 W. 155 STREET (Hauler Address) — S.W.H. Registration Number 0079027

S. HOLLAND, IL 60473 — IL 00 0695061 6

3125963377

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE 3127653400

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

GRIFFITH (City) — INDIANA (State) — 46319 (Zip) — IND. 016360265

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: ORGANIC SOLVENT — HAZARD CLASS: FLAMMABLE

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

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

QUANTITY OF WASTE DELIVERED: 003000 (47–52)

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-7-82 — Joseph D Brinson (Authorized Signature)

UN1993
F005

WASTE HAULER

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

(1) Ronald Bridgewater (Authorized Signature) — DATE: 05/07/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

_____ (Authorized Signature) — DATE: 05/07/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

To 123 K T-63 GRM 5-7-82 SITE COPY - PART 3

003558

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0361906

Authorization Number 991112

ILT 180011371

1970850003 G
Generator Number

FOLGER ADAM COMPANY (Company Name) — 200 Moen Ave., Joliet, IL (Address)

Joliet (City) — IL (State) — 60436 (Zip)

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE (Hauler Name) — 420 S. Colfax Av. (Hauler Address) — S.W.H. Registration Number 0024001

Griffith, IN 46319

STRAND TRUCKING (Hauler Name) — CRESTWOOD, IL (Hauler Address) — S.W.H. Registration Number ILT 000646810

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — 420 S. Colfax Ave. (Address) — 91808902 Site Number

Griffith, IN (City) — IN (State) — 60436 (Zip) — IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 1,1,1, - Trichloroethane

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Dirty Trichloroethane

HAZARD CLASS: NON-HAZARD

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

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

QUANTITY OF WASTE DELIVERED: 825 (47) 825 (52) — 1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One): 15 DRUMS — TANK TRUCK — OPEN TRUCK — OTHER (Specify) VAN

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-22-81 — Pamela A. Vondrack (Authorized Signature)

WASTE HAULER

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

(1) William J. Sylvester (Authorized Signature) — DATE: 01/23/81 (54) (59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

Michael C. Burg (Authorized Signature) — DATE: 1/23/81 (60) (65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 1/23/81
UNLOADED AT DOCK 1/29/81 PUMPED TO #1 STILL 2/10/81 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

003559

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

0315973

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 9 9 8 6 3 8

Flexicon (Company Name) — 425 Fourth Street (Address)
East Dundee (City) — Illinois (State) — (Zip)

0 8 9 0 2 5 0 0 0 2 G (Generator Number)

WASTE HAULER(S)

Landgrebe (Hauler Name) — 309 S Shields, Chicago, Il. 60616 (Hauler Address)
S.W.H. Registration Number I C,C -2980

(Hauler Name) — (Hauler Address)
S.W.H. Registration Number EPA IND009842824

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — 420 S. Colfax Avenue (Address)
9 1 8 0 8 9 0 2 (Site Number)
Griffith (City) — Indiana (State) — 46319 (Zip)
IND016360865

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Spent Ethyl Acetate/F003
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Flammable Liquid N.O.S.
HAZARD CLASS: UN or NA #1993

WEIGHT FOR D.O.T. USE 18,200 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 47 52

1 GALLONS (Circle One)
2 CU. YDS. 2200 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: 3-9-82 — David S. Barry (Authorized Signature)

WASTE HAULER

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

(1) LMT Phyers (Authorized Signature) — DATE: 3 / 9 / 82 (54 59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

F L Dundee (Authorized Signature) — DATE: 3 / 10 / 82 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

On dock 3/10/82 GRM
To 112 R T-63 GRM 3/16/82

SITE COPY - PART 3

003560

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

TO BE COMPLETED BY WASTE GENERATOR

0315974

Authorization Number ~~9 9 6 6 3 8~~

312-428-2900

Flexicon (Company Name) — 425 E. Fourth Street (Address)

Dundee (City) — Illinois (State) — 60118 (Zip)

0 8 9 0 2 5 0 0 0 2 G (Generator Number)

WASTE HAULER(S)

Landgrebe (Hauler Name) — 309 S. Shields, chicago (Hauler Address) Ill. 60616

IND.

S.W.H. Registration Number 0 0 9 8 4 2824

219 962-4181

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

312-7683400

American Chemical Service (Facility Name) — 420 South Colfax Avenue (Address) — 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) — Indiana (State) — 46310 (Zip)

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Spent Ethyl Acetate/F003

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Flammable Liquid N.O.S.

HAZARD CLASS: UN or NA #1993

WEIGHT FOR D.O.T. USE 14,560 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 52 Drums

QUANTITY OF WASTE DELIVERED:

1 GALLONS (Circle One)
2 CU. YDS. 2860

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9/10/82

(Authorized Signature)

WASTE HAULER

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

(1) LMT Phil L Lyons (Authorized Signature) DATE: 9 / 10 / 82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

(Authorized Signature) DATE: 9 / 13 / 82

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

To 121K T-50 GPM 9.13.82

SITE COPY - PART 3

003561

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0344975

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 992170

ECONOMY-FOLDING-BOX (Company Name) 2601 S. LaSalle (Address)
CHICAGO (City) ILLINOIS (State) 60616 (Zip)
ILD. 005095823
0316000512 (Generator Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) 3900 S. SHIELDS AVE CHIC. IL. 60616 (Hauler Address) S.W.H. Registration Number ICC2920

(Hauler Name) (Hauler Address) S.W.H. Registration Number 0098[illegible]

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. (Facility Name) 420 S. COLFAX AVE (Address) 918082402 (Site Number)
GRIFFITH (City) IND. (State) 46319 (Zip)
IND. 016360265

TO BE COMPLETED BY WASTE GENERATOR

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

F003

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

SHIPPING DESCRIPTION: HAZARD CLASS:

WEIGHT FOR D.O.T. USE 5500 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. // QUANTITY OF WASTE DELIVERED: 000605

(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: 3-4-82 James E. Lowe (Authorized Signature)

WASTE HAULER

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

(1) A.M.T. Patrick L. Lyons (Authorized Signature) DATE: 3/5/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

Tim Cahellan (Authorized Signature) DATE: 3/8/82

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

To 204K T-50 6RM 3/8/82

SITE COPY - PART 3

003562

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0654883 (1–7)

Authorization Number ____ (8–13)

DeSoto Inc.	300 State St.	3127575100	0310450001 G
(Company Name)	Address	Phone Number	Generator Number (14–24)
Chicago Heights	Illinois	60411	ILD049993165
City	State	Zip	EPA Number

WASTE HAULER(S)

Mr. Frank Industrial Disposal	201 W. 155th St. S. Holland, Ill.	S.W.H. Registration Number 0079021 (25–31)
Hauler Name	Hauler Address	
3125596377	ILD069506160	
Phone Number	EPA Number	
Hauler Name	Hauler Address	S.W.H. Registration Number (32–38)
Phone Number	EPA Number	

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services	420 S. Colfax	91808902 (39–46)
(Facility Name)	Address	Site Number
Griffith	Indiana	46319
City	State	Zip
3127653400	ILD016360265	
Phone Number	EPA Number	
Alternate (Facility Name)	Address	Site Number (39–46)
City	State	Zip
Phone Number	EPA Number	

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: HAZARD CLASS: (key components: xylene, mineral spirits, toluene)

Waste Solvents	Flammable Liquid	UN1993	F005
		UN or NA Number	EPA HW Number

WEIGHT FOR D.O.T. USE 37,540 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 00500 (47–52) (1) GALLONS (Circle One) (2) CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION L. Drudge (Authorized Signature) DATE: Oct. 06, 1982

WASTE HAULER

I HEREBY 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 J Bridgewater (Authorized Signature) DATE: 10/06/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

____ (Authorized Signature) DATE: 10/06/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3

To 210 K T-50 - GAL 10/6/82

003563

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

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

TO BE COMPLETED BY WASTE GENERATOR

0657782 (1–7)

Authorization Number ____ (8–13)

DeSoto Inc. (Company Name) | 300 State St. (Address) | 3127575100 (Phone Number) | 0310450001 G (14 Generator Number 24)

Chicago Heights (City) | Illinois (State) | 60411 (Zip) | ILD049993165 (EPA Number)

WASTE HAULER(S)

Mr. Frank Industrial Disposal (Hauler Name) | 201 W. 155th St. South Holland, Ill. (Hauler Address) | S.W.H. Registration Number 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 Services (Facility Name) | 420 S. Colfax (Address) | 91808902 (39 Site Number 46)

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

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: Waste Solvents | HAZARD CLASS: Flammable Liquid (key components: xylene, mineral spirits, toluene) | UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 38,420 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 005000 (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 L. Brady (Authorized Signature) | DATE: Oct. 27, 1982

WASTE HAULER

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

(1) Michael D. Martin (Authorized Signature) | DATE: 10/27/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) | DATE: 10/27/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

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

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

REV. # 4

SITE COPY - PART 3 To 211KT-50 GKM 10.27.82

003564

STATE OF ILLINOIS

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

0463560

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 9973 99

DeSoto Inc. (Company Name) | 300 State St. (Address) | 312 757 5100 (Phone Number) | 031 045 0001 G (Generator Number)

Chicago Heights (City) | Illinois (State) | 60411 (Zip) | ILD 049 993 165 (EPA Number)

WASTE HAULER(S)

Mr. Frank Industrial Disposal (Hauler Name) | 201 W. 155th St. South Holland, Ill. (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 1

31K5963377 (Phone Number) | ILD 069 506 160 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 S. Colfax (Address) | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Ind. (State) | 46319 (Zip) | 31K7653400 (Phone Number) | ILD 016 360 265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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~~ ~~LIQUID~~ HAZARD CLASS: FLAMMABLE LIQUID (key components: xylene, toluene, mineral spirits)

UN 1993 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 22,780 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 3 0 0 0 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION L Budge (Authorized Signature) DATE: 05-17-82

WASTE HAULER

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

(1) Mike Reifer (Authorized Signature) DATE: 5 17 82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

_____ (Authorized Signature) DATE: 5 17 82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

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

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

REV. # 3

SITE COPY - PART 3

To 210 RT-50 6PM 5·17·82

003565

STATE OF ILLINOIS

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

0463558

Authorization Number 997399

TO BE COMPLETED BY WASTE GENERATOR

DeSoto Inc. (Company Name) | 300 State St. (Address) | 312757,5100 (Phone Number) | 03 10450001 G (Generator Number)

Chicago Heights (City) | Illinois (State) | 60411 (Zip) | ILD 049993165 (EPA Number)

WASTE HAULER(S)

201 W. 155th St.

Mr. Frank Industrial Disposal (Hauler Name) | S. Holland, Ill. (Hauler Address) | S.W.H. Registration Number 007901

312596 3377 (Phone Number) | ILD 069506160 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

Griffith (City) | Indiana (State) | 46319 (Zip) | 219 924 4370 (Phone Number) | ILD 016360265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: WASTE SOLVENTS — LIQUID

HAZARD CLASS: FLAMMABLE (key components: toluene, mineral spirits, xylene)

UN or NA Number: UN1993

EPA HW Number: F005

WEIGHT FOR D.O.T. USE: 37,780 (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) DATE: 5-03-82

WASTE HAULER

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

(1) Donald H Bell (Authorized Signature) DATE: 05/03/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

HAZARDOUS WASTE SUBJECT TO FEE YES NO

(Authorized Signature) DATE: 5-3-82

COMMENTS OR SPECIAL INSTRUCTIONS _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 3

SITE COPY - PART 3

To 210 T-50 GEM 5.3.82

003566

STATE OF ILLINOIS

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

0463559

Authorization Number 997399

TO BE COMPLETED BY WASTE GENERATOR

DeSoto Inc. (Company Name) | 300 State St. (Address) | 3127575100 (Phone Number) | 03104500001 G (Generator Number)

Chicago Heights (City) | Illinois (State) | 60411 (Zip) | ILD049993165 (EPA Number)

WASTE HAULER(S)

Mr. Frank Industrial Disposal (Hauler Name) | 201 W. 155th St. South Holland, Ill. (Hauler Address) | S.W.H. Registration Number 0079001

3125963377 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

Griffith (City) | Ind. (State) | 46319 (Zip) | 3127683402 (Phone Number) | ILD063602265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: ~~WASTE SOLVENTS~~ ~~LIQUID~~

HAZARD CLASS: FLAMMABLE (key components: xylene, mineral spirits, toluene)

UN or NA Number: UN1993

EPA HW Number: F003

WEIGHT FOR D.O.T. USE: 23,600 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 000000 (1) GALLONS (2) CU. YDS. (Circle One) 1

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION L. Bruce (Authorized Signature) DATE: 05-17-82

WASTE HAULER

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

(1) Mike Pfeifer (Authorized Signature) DATE: 5/17/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

(Authorized Signature) DATE: 5/17/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

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

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

REV. # 3

SITE COPY - PART 3

TO 210 K T-506RM 5-17-82

003567

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0265205 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number ____ (8–13)

3M COMPANY	6850 S. HARLEM AVENUE	ILD-006220223
(Company Name)	Address	0 3 1 0 0 6 0 0 0 7 G (14–24) Generator Number
BEDFORD PARK, ARGO,	ILLINOIS 60501	
City	State Zip	

WASTE HAULER(S) 312-596 3377

MR. FRANK	201 W. 155TH STREET	S.W.H. Registration Number 0 0 7 9 0 0 9 (25–31)
Hauler Name	Hauler Address	
	S. HOLLAND, ILLINOIS	ILD-619506160
Hauler Name	Hauler Address	S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE 312 768 3400

AMERICAN CHEMICAL SERVICE	P. O. BOX 190	9 1 8 0 8 9 0 2 (39–46) Site Number
(Facility Name)	Address	
GRIFFITH,	INDIANA 46319	IND-016360265
City	State Zip	

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

UN1993
F005

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

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

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

QUANTITY OF WASTE DELIVERED: 0 0 [redacted] 0 (47–52) 4500

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11-15-82

J. E. MATT, SAFETY & SECURITY SUPV.
(Authorized Signature)

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE: 11/15/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

_____ (Authorized Signature) DATE: 11/15/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

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

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

TO 117 R T-63 CRM 11.15.82

SITE COPY - PART 3

003568

TO BE COMPLETED BY WASTE GENERATOR

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

0138316

WASTE GENERATOR

312 496-6736

Authorization Number 997144

3M Company (Company Name) | 6850 S. Harlem Ave. (Address) | ILD0006220123

Bedford Park, Argo, (City) | Illinois (State) | 60501 (Zip) | Generator Number

WASTE HAULER(S) 312-5963377

(1) Mr. Frank (Hauler Name) | 201 W. 155th Street (Hauler Address) | S.W.H. Registration Number 0079029

S. Holland, Illinois | ILD-619506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

312 ~~[illegible]~~ 7653400

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

Griffith (City) | Indiana (State) | 46319 (Zip) | IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Flammable Liquid NOS

UN1993 F005

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Flammable Liquid NOS.

HAZARD CLASS: Flammable 2-3-0

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-13-82 | J.E. MATT, SAFETY & SECURITY SUPV. (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005000 | 1 GALLONS 2 CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS XXX 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: 05/13/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

(Authorized Signature) DATE: 5/13/82

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

SITE COPY - PART 3

TO 125 K T-63 GPM 5.13.82

003569

HAZARDOUS WASTE MANIFEST

MSO 22367
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

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

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND. 005175492	INTERNATIONAL HARVESTER COMPANY 2701 S. Coliseum,Blvd., Fort Wayne, Indiana 46803	
TRANSPORTER # 1	ILD 069506160	MR. FRANK, INC. South Holland, Illinois	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND. 016360265	AMERICAN CHEMICAL SERVICE, INC. P. O. Box 190, Griffith, Indiana 46319	6/17/82
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	X	F017	Waste Compound, Lacquer Paint, or Varnish, Removing, Reducing, or Thinning, Liquid	NA# [redacted] 1993			Gallon	5,000		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

D.O.T. Hazard Class - Code 07/Industrial Paint Residue
On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☒X No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

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

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

CERTIFICATION

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

J. F. Csulik 6-16-82
GENERATOR'S SIGNATURE DATE
219-461-5238

This is to certify acceptance of the hazardous waste shipment.
Donald W Ball 6-17-82
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.
6-17-82
TSDF SIGNATURE DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TRANSPORTER #1

To 211 KT-50 GRM 6/7/82
003570

HAZARDOUS WASTE MANIFEST

MSO 24088
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

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

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND. 005175492	INTERNATIONAL HARVESTER COMPANY 2701 S. Coliseum Blvd., Fort Wayne, IN 46803	
TRANSPORTER # 1	ILD 069506160	MR. FRANK, INC. South Holland, Illinois	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND. 016360265	AMERICAN CHEMICAL SERVICE, INC. P. O. Box 190, Griffith, Indiana 46319	10/18/82
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	X	F017	Waste Compound, Lacquer Paint, or Varnish, Removing, Reducing, or Thinning Liquid	NA$ 1993			Gallon	4,000		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

D.O.T. Hazard Class - Code 07/Industrial Paint Residue

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

PLACARDS TENDERED
Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

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

F. Sulik 10-15-82
GENERATOR'S SIGNATURE 219 461 5238

This is to certify acceptance of the hazardous waste shipment.

Michael Martin
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

10/18/82
DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

TO121FT-63 GRM 10.18.82

003571

HAZARDOUS WASTE MANIFEST

MSO 18527
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

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

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND. 005175492	INTERNATIONAL HARVESTER COMPANY 2701 S. Coliseum Blvd., Fort Wayne, Indiana 46803	
TRANSPORTER # 1	ILD. 069506160	MR. FRANK, INC. South Holland, Illinois	11/18/82
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND. 016360265	AMERICAN CHEMICAL SERVICE, INC. P.O. Box 190, Griffith, Indiana 46319	11/18/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1	X	F017	Waste Compound, Lacquer Paint, or Varnish, Removing, Reducing, or Thinning Liquid	NA# 1993				2300. ~~2000~~ Gal.		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

D.O.T. Hazard Class - Code 07/Industrial Paint Residue

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

PLACARDS TENDERED Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES

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

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

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

_____ Signature

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

_____ (Signature of Consignor)

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

CERTIFICATION

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

J. P. Caulik 11-17-82
GENERATOR'S SIGNATURE DATE
219-461-5238

This is to certify acceptance of the hazardous waste shipment.

11-18-82
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY To 125 RT-63 GRM 11.18.82

003572

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0238315

Authorization Number 9 9 7 8 3 1

Ludlow Corporation (Company Name) — 11234 S. Forrestville (Address)

ILD051937340

Chicago (City) — Illinois (State) — 60628 (Zip)

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

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) 312-596-3377 — S.W.H. Registration Number 0 0 7 9 0 [illegible]

ILD069506160

South Holland, Il 60477 (Hauler Address) — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE 312 7653490 IND016360765

American Chemical Service Co. (Facility Name) — 420 S. Colfax (Address) — 9 1 8 0 8 9 0 7 (Site Number)

Griffith, IN (City) — Indiana (State) — (Zip) — IND 017 2 0 4 2 0 3 4

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvent Waste Low Flash

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: Shipping Waste Nos.

HAZARD CLASS: Flammable

UN 1993

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

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

QUANTITY OF WASTE DELIVERED: 2000 ~~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: 5/12/82 — Clyde H. Busse (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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: 05 18 82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

F Dunlop (Authorized Signature) DATE: 5/18/82

COMMENTS OR SPECIAL INSTRUCTIONS: Unloaded 2000 gals returned 3500

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 42

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

2M TO 210 KT-50 5.18.82 GRM

SITE COPY - PART 3

003573

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0238316

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997831

Ludlow Corporation (Company Name) | 11234 S. Forrestville (Address) | ILD051937340

Chicago, Il. (City) | (State) | 60628 (Zip) | 0316000182 Generator Number

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St. 312-596-3377 (Hauler Address) | S.W.H. Registration Number 007900

South Holland, Il. 60477

(Hauler Name) | (Hauler Address) | ILD069506160 S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service Co. (Facility Name) | 420 S. Colfax 312-765-3400 (Address) | 9 1 8 0 8 9 0 2 Site Number

Griffith, (City) | Indiana (State) | 46319 (Zip) | ~~IND059042934~~ IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvent Waste Low Flash

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: F005

SHIPPING DESCRIPTION:	HAZARD CLASS:	
Shipping Waste Nos.	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: 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: 5/19/82

Clyde A. Busse (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 Ryan (Authorized Signature) DATE: 5 20 82 (52–59)

(2) ____ (Authorized Signature) DATE: ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 5 20 82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

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

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

To 210ET-50 GRM 5.20.82

SITE COPY - PART 3

003574

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

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

0634365 (1–7)

Authorization Number ____ (8–13)

Jayce-Hoag Chemical | 8630 Ferris | 312-965-6650 | 0311950020 6 G
(Company Name) | Address | Phone Number | (14) Generator Number (24)

Morton Grove | IL | 60053 | EPA Number
City | State | Zip

WASTE HAULER(S)

Jayce-Hoag Chemical | 8620 Ferris | S.W.H. Registration Number 0247001 (25–31)
Hauler Name | Hauler Address

312-965-6650
Phone Number | EPA Number

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service | 420 Cutrix Ave | 9180590 02 (39–46)
(Facility Name) | Address | Site Number

Griffith | Indiana | 46319 | 219-924-4270 | IND016366265
City | State | Zip | Phone Number | EPA Number

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Methylene Chloride | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Steel Drum | HAZARD CLASS: Non hazardous. | UN 1593 (UN or NA Number) | EPA HW Number

WEIGHT FOR D.O.T. USE 1800 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 165 (47–52) (1 GALLONS (Circle One) 2 CU. YDS.) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 3 Number) | TANK TRUCK | (OPEN TRUCK) | OTHER (Specify) ____

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Lucia M Mango (Authorized Signature) DATE: 8-23-82

WASTE HAULER

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

(1) Thomas P Holen (Authorized Signature) DATE: 8/24/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 8/24/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

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

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

REV. # 4

SITE COPY - PART 3

On dock 8.24.82 To 119RT-63 GCM 9.7.82

0035515

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0634364 (1–7)

Authorization Number ____ (8–13)

Jaipar Hoag Chemical (Company Name) | 8620 Ferris (Address) | 312-965-6650 (Phone Number) | 0311950020G (Generator Number, 14–24)

Morton Grove (City) | IL (State) | 60053 (Zip) | ____ (EPA Number)

WASTE HAULER(S)

Jaipar Hoag Chemical (Hauler Name) | 8620 Ferris (Hauler Address) | S.W.H. Registration Number 0247001 (25–31)

312-965-6650 (Phone Number) | ____ (EPA Number)

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

____ (Phone Number) | ____ (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem Service (Facility Name) | 420 Colfax Ave. (Address) | 9180890 2 (Site Number, 39–46)

Griffith (City) | Indiana (State) | 46319 (Zip) | 219924-4370 (Phone Number) | IND 016360265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Trichlorethylene | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Steel Drum | HAZARD CLASS: Non-hazardous | UN or NA Number: UN1710 | EPA HW Number: ____

WEIGHT FOR D.O.T. USE: 660 # (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 55 (47–52) (1) GALLONS (Circle One) (2) CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 1 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION. [signature] (Authorized Signature) DATE: 8-22-82

WASTE HAULER

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

(1) Thomas P. Colian (Authorized Signature) DATE: 8/24/82 (54–59)

(2) ____ (Authorized Signature) DATE: ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 8/24/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-26

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

REV. # 4

SITE COPY - PART 3

On dock 8.24.82 To 120 K T-63 GFM 10:2

003576

HAZARDOUS WASTE MANIFEST

MSD-18991
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

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

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND. 005175492	International Harvester Company 2701 S. Coliseum Blvd., Fort Wayne, Indiana 46803	
TRANSPORTER # 1	ILD. 069506160	Mr. Frank, Inc. 201 W. 155th St., South Holland, Illinois 60473	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND. 016360265	American Chemical Service, Inc. P.O. Box 190, Griffith, Indiana 46319	12/21/82
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	X	F017	Waste Compound, Lacquer Paint, or Varnish, Removing Reducing or Thinning Liquid	NA# 1993				4500 ~~5500~~ Gallons		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS
D.O.T. Hazard Class - Code 07/Industrial Paint Residue
On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

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

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

CERTIFICATION

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

J. F. Coulik 12-20-82
GENERATOR'S SIGNATURE DATE

219-461-5238

This is to certify acceptance of the hazardous waste shipment.

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

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

TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

To 211 KT-50 GDM 12.21.82 TSDF COPY

003577

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0458390

Authorization Number [redacted]

CONTINENTAL CAN (Company Name) | 1840 N. MAJOR (Address) | (Phone Number) | 0316000331 (Generator Number)

CHICAGO (City) | ILLINOIS (State) | 60639 (Zip) | ILD001799428 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th (Hauler Address) | S.W.H. Registration Number 0079 004

(Phone Number) | ILD695506160 (EPA Number)

INDUSTRIAL DISPOSAL (Hauler Name) | SOUTH HOLLAND ILL 60473 (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) | 9180890902 (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: AROMATIC SOLVENT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
PAINT RESIDUE	FLAMMABLE	1993	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: 005000 (1 GALLONS / 2 CU. YDS (Circle One))

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION JO ANN EINRINGER (Authorized Signature) DATE: 10/11/82

WASTE HAULER

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

(1) Donald R Bell (Authorized Signature) DATE: 10/11/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

T Dimpfl (Authorized Signature) DATE: 10/11/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 3

SITE COPY - PART 3

To117 RT-63 GKM 10.11.82

003578

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0458394

Authorization Number ~~997136~~

CONTINENTAL CAN (Company Name) | 1840 N. MAJOR (Address) | [illegible] (Phone Number) | 0316000331 (Generator Number)

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

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th (Hauler Address) | S.W.H. Registration Number 0079 009

312 5163377 (Phone Number) | ILD069506160 (EPA Number)

INDUSTRIAL DISPOSAL (Hauler Name) | SOUTH HOLLAND ILL 60473 (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 3127653400 (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: AROMATIC 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 RESIDUE

HAZARD CLASS: FLAMMABLE

1993 (ON or NA Number) | F017 (EPA HW Number)

WEIGHT FOR D.O.T. USE 37,000 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (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 JO ANN EINBINDER (Authorized Signature) DATE: 8-16-82

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE 08/16/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE 8/16/82

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. #3

SITE COPY - PART 3

TO 120 KT-63 GRM 8-16-82

003579

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

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

0458393

Authorization Number 997136

CONTINENTAL CAN (Company Name) | 1840 N. MAJOR (Address) | Phone Number | 0316000331 G (Generator Number)

CHICAGO (City) | ILLINOIS (State) | 60639 (Zip) | ILD001799428 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th (Hauler Address) | S.W.H. Registration Number 0079009

3125962377 (Phone Number) | ILD069506160 (EPA Number)

INDUSTRIAL DISPOSAL (Hauler Name) | SOUTH HOLLAND ILL 60473 (Hauler Address) | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312 863400 (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: AROMATIC 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 RESIDUE | HAZARD CLASS: FLAMMABLE | 1993 (UN or NA Number) | F017 (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 JO ANN EINSINDER (Authorized Signature) J.O. Miller DATE 5-24-82

WASTE HAULER

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

(1) Donald H Bull (Authorized Signature) DATE 05 24 82

(2) ____ (Authorized Signature) DATE ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 5/24/82

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 3

SITE COPY - PART 3 To 120 KT-63 GRM 5.24.82

003580

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0477958

Authorization Number 997136

CONTINENTAL CAN (Company Name) | 1840 N. MAJOR (Address) | Phone Number | 0316000331 (Generator Number)

CHICAGO (City) | ILLINOIS 60639 (State, Zip) | ILD001799428 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th (Hauler Address) | S.W.H. Registration Number 0079 021

Phone Number | ILD069506160 (EPA Number)

INDUSTRIAL DISPOSAL (Hauler Name) | SOUTH HOLLAND ILL 60473 (Hauler Address) | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFEX (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: AROMATIC 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 RESIDUE | HAZARD CLASS: FLAMMABLE | 1993 (UN or NA Number) | F017 (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: 005200 | 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) 4/19/82

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION L.O. Miller (Authorized Signature) DATE: 4-19-82

WASTE HAULER

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

(1) Donald H. Guest (Authorized Signature) DATE: 04/19/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

F. Dmifer (Authorized Signature) DATE: 4/19/82

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 3

SITE COPY - PART 3

To 120K T-63 GRM 4.79.82

003581

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0458392 (1–7)

Authorization Number 997136 (8–13)

CONTINENTAL CAN (Company Name) | 1840 N. MAJOR (Address) | Phone Number | 0316000331 (14) G (24) Generator Number

CHICAGO (City) | ILL (State) | 60639 (Zip) | ILD001799428 EPA Number

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th STREET (Hauler Address) | S.W.H. Registration Number 00790001 27 (25–31)

Phone Number | ILD069506160 EPA Number

INDUSTRIAL DISPOSAL (Hauler Name) | SOUTH HOLLAND (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 | 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: AROMATIC SOLVENT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:		
PAINT RESIDUE	FLAMMABLE	1993 (UN or NA Number)	F017 (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: 001,760 (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 JO ANN EINDINGER L.O. Miller (Authorized Signature) DATE: 4-8-82

WASTE HAULER

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

(1) Mike Pieper (Authorized Signature) DATE 4/08/82 (54–59)

(2) ____ (Authorized Signature) DATE ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

____ (Authorized Signature) DATE 4/08/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS ____

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

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

REV. # 3

SITE COPY - PART 3 To 210 RT-50 6PM 4-8-82

003582

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0477959 (1–7)

Authorization Number 997136 (8–13)

CONTINAL CAN (Company Name) | 1840 N. MAJOR (Address) | (Phone Number) | 0316000331 G (14 Generator Number 24)

CHICAGO (City) | ILL (State) | 60039 (Zip) | ILD0017999428 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th STREET (Hauler Address) | S.W.H. Registration Number 0079019 (25–31)

(Phone Number) | ILD069506160 (EPA Number)

INDUSTRIAL DISPOSAL (Hauler Name) | SOUTH HOLLAND ILL 60473 (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. COLFEX (Address) | 91808902 (39–46 Site Number)

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

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

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

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
PAINT RESIDUE	FLAMMABLE	1993	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: 004500 (47–52) (1) GALLONS (Circle One) (2) CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Jo Ann Einbinder (Authorized Signature) DATE: 3-15-82

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE: 03 15 82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

_____ (Authorized Signature) DATE: 3 15 82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

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

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

REV. # 3

SITE COPY - PART 3 To 120 FT-63 6PM 3/15/82

003583

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0477957

Authorization Number 997136

CONTINENTAL CAN (Company Name) | 1840 N. MAJOR (Address) | Phone Number | 0316000331 (Generator Number)

CHICAGO (City) | ILLINOIS 60639 (State / Zip) | ILD001799428 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th (Hauler Address) | S.W.H. Registration Number 0079009

3125963377 (Phone Number) | ILD069506160 (EPA Number)

INDUSTRIAL DISPOSAL (Hauler Name) | SOUTH HOLLAND ILL 60473 (Hauler Address) | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFEX (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: AROMATIC 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 RESIDUE | HAZARD CLASS: FLAMMABLE | 1993 (UN or NA Number) | F017 (EPA HW Number)

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

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

QUANTITY OF WASTE DELIVERED: 004500 (GALLONS (Circle One) / 2 CU. YDS.)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION John Erlinder (Authorized Signature) DATE 2-15-82

WASTE HAULER

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

(1) Tom Berry (Authorized Signature) DATE 02/15/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

Bob Mauck (Authorized Signature) DATE 02/15/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

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

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

REV. # 3

SITE COPY - PART 3 To 120 R T-63 GKM 2/15/82

003584

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

NO. 079242

INDUSTRIAL WASTE/SLUDGE GENERATION, SHIPMENT AND DISPOSAL RECORD

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

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

VOLUME 5000 GALS / CU. YDS. / LBS.

WASTE CONTAINS:

[ ] FATS, OILS OR GREASE [ ] ACID [ ] ALKALI [ ] CYANIDE [ ] ZINC [ ] CADMIUM [ ] COPPER [ ] CHROME [ ] IRON [ ] NICKEL [ ] LEAD [ ] SELENIUM [ ] MERCURY [x] OTHER (SPECIFY) SOLVENT BLEND ZYLENE

DISPOSAL METHOD ▶ [ ] LANDFILL [ ] DESTRUCTION (SPECIFY) [x] OTHER (SPECIFY) RECLAIM

NAME OF COMPANY: CONTINENTAL WHITE CAP

FEDERAL TAX I. D. NUMBER: 13-0597410

LOCATION: 1840 N. MAJOR AVENUE CHICAGO ILL 60639

TYPE OF INDUSTRY: closure manufacturer 2 (LIDS)

DATE REMOVED: 1-11-82

TIME REMOVED:

I certify that the described waste, in the designated volume, was removed from this location by the contractor named below for legal disposal.

SIGNATURE OF AUTHORIZED AGENT AND TITLE: JO ANN EIMBINDER

PHONE: 312-637-2000 EXT 445

NAME: MR. FRANKS INDUSTRIAL

FEDERAL TAX I. D. NUMBER:

ADDRESS: 201 WEST 155th STREET SOUTH HOLLAND

DATE RECEIVED: 1-11-82

TIME RECEIVED: 1000 PM

WASTE HAULER'S REGISTRATION NO.: 0079019

STATE: IL

TRUCK LICENSE NO.: 34068

I certify that the described waste, in the designated volume, was removed from the above location and delivered to the disposal site designated below.

SIGNATURE OF CONTRACTOR'S AGENT AND TITLE: [signature]

PHONE: [illegible]

DISPOSAL SITE

NAME: AMERICAN CHEMICAL

FEDERAL TAX I. D. NUMBER: 350961223

ADDRESS: 420 S. COLFAX GRIFFITH IND 46319

DATE RECEIVED: 1/11/82

TIME RECEIVED: 11

I certify that the above named contractor delivered the described waste, in the designated volume to this facility and same was received for lawful disposition as designated.

SIGNATURE OF OPERATOR AND TITLE: [signature]

PERMIT NO.:

PHONE: 219 924 4370

DISPOSAL SITE'S COPY

003585

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0477956

Authorization Number 997136

CONTINENTAL CAN (Company Name) | 1840 N. MAJOR (Address) | Phone Number | 0316000331 (Generator Number) G

CHICAGO (City) | ILLINOIS 60639 (State / Zip) | ILD001799428 (EPA Number)

WASTE HAULER(S)

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

Phone Number | ILD069506160 (EPA Number)

INDUSTRIAL DISPOSAL (Hauler Name) | SOUTH HOLLAND ILL 60473 (Hauler Address) | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFEX (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: AROMATIC SOLVENT WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
PAINT RESIDUE	FLAMMABLE	1993	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: 005000 (47–52) GALLONS (Circle One) / 2 CU. YDS. (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION John Emberlin (Authorized Signature) DATE: 1-11-82

WASTE HAULER

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

(1) Gary Lauer (Authorized Signature) DATE: 01/11/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 1/11/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

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

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

REV. # 3

SITE COPY - PART 3

To 143 K T-63 GRM 1/11/82

003586

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0309204 (1–7)

Authorization Number 297226 (8–13)

Co Hex-Cargill Midwest (Company Name) | 5303 S Chaotes Rd. (Address) | (312) 544-1600

Bellwood (City) | Illinois (State) | 60104 (Zip)

0 3 1 0 1 5 0 0 0 7 G (14–24) Generator Number

ILD - 04 046 6822

WASTE HAULER(S)

Mr. Frank (Hauler Name) | 201 W. 15th (Hauler Address) | So Holland

S.W.H. Registration Number 0 0 2 4 0 0 3 (25–31)

ILD - 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 So Colfax (Address) | 9 1 8 0 2 9 0 2 (39–46) Site Number

Griffith (City) | Ind (State) | Zip | Ind. 0163 60165

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Flam. | 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: 3000 (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: 11-24-80 7803 | (Authorized Signature)

WASTE HAULER

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

(1) Toni Berry (Authorized Signature) DATE: 11/24/80 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

(Authorized Signature) DATE: 11/24/80 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: Pumped To east apit 11-24

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

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

SITE COPY - PART 3

003587

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0309205

Authorization Number 997226

Celluloid Craft Midwest (Company Name) 5303 St Charles Rd Address 312-544-1600

Bellwood City Illinois State 60104 Zip

0310150007 G Generator Number

ILD-04 046 6823

WASTE HAULER(S)

% American Chemical Hauler Name 420 S. Colfax Hauler Address

S.W.H. Registration Number 0024002

Strand Trucking Hauler Name Hauler Address

ILT 000646510

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) 420 So Colfax Address

91808902 Site Number

Griffith City State Zip

IND: 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent

WASTE PHASE: (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Flame

HAZARD CLASS:

WEIGHT FOR D.O.T. USE 26,100 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 003200

1 GALLONS (Circle One)
2 CU. YDS.

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE 1-22-81 F003 Charles M. Hayes (Authorized Signature)

WASTE HAULER

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

(1) Nona Strand Drum (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: 1/22/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 1/23/81 — UNLOADED 1/24/81
PUMPED TO 112K 1/24/81 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

003588

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0333640
1 7

Authorization Number 9 9 8 1 4 5
8 13

CELLU-CRAFT, INC. (Company Name) | 250 S. Hicks Rd. (Address)
Palatine, (City) | Illinois (State) | 60067 (Zip)

0 3 1 2 3 4 0 0 0 4 G
14 Generator Number 24

WASTE HAULER(S)

AMERICAN CHEMICAL (Hauler Name) | 420 S. Colfax (Hauler Address)
S.W.H. Registration Number 0 3 1 1 0 0 2 4 0 0 3
25 31

Strand Trucking (Hauler Name) | Crestwood, Il. (Hauler Address)
S.W.H. Registration Number ILT 000646810
32 38

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. Colfax Ave. (Address)
9 1 8 0 8 9 0 2
39 Site Number 46

Griffith, (City) | Ind. (State) | 46319 (Zip) | IND 001636065

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent | F003 | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

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

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

QUANTITY OF WASTE DELIVERED: 2 4 2 0
47 52

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

METHOD OF SHIPMENT (Circle One) (44 DRUMS) TANK TRUCK OPEN TRUCK OTHER (Specify)

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-20-81

(Authorized Signature)

WASTE HAULER

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

(1) (Authorized Signature) DATE: 3/20/81
54 59

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

(Authorized Signature) DATE: 3/20/81
60 65

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 3/20/81
PUMPED TO 712E 3/24/81 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

033589

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0333642

Authorization Number 9 9 7 1 4 5

CELLU-CRAFT, INC. (Company Name) — 250 S. Hicks Rd. (Address)

PALATINE (City) — IL (State) — 60067 (Zip)

0 3 1 2 3 4 0 0 0 4 G (Generator Number)

ILD095256525

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) — 13642 KENTON, CRESTWOOD, IL. (Hauler Address) — S.W.H. Registration Number 0 3 1 1 0 0 2

ILT 000646810

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — 420 S. COLFAX AVE. (Address) — 9 1 8 0 8 9 0 2 (Site Number)

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

IN 0016360265

TO BE COMPLETED BY WASTE GENERATOR

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

F 003

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

SHIPPING DESCRIPTION: HAZARDOUS — 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 2 5 (47–52) — 1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) 55 DRUMS — TANK TRUCK — OPEN TRUCK — OTHER (Specify) Van

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-19-81 — Steve L. Santa (Authorized Signature)

WASTE HAULER

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

(1) James Batt (Authorized Signature) — DATE: 10 / 19 / 81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

Michael O'Brien (Authorized Signature) — DATE: 10 / 19 / 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 10/19/81
TO 204 X T-50 10/27/81 [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

003590

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0309207
1 7

Authorization Number 997226
8 13

TO BE COMPLETED BY WASTE GENERATOR

Cellu-Cast Midwest (Company Name) | 5303 N Charles Rd Address | 03/0150007 G Generator Number (14 24)
Bellwood 544-1600 City | Illinois State | 60104 Zip
ILD-04-046-6823

WASTE HAULER(S)

AMERICAN CHEMICAL Hauler Name | 420 So. Colfax Hauler Address | S.W.H. Registration Number 0024002 (25 31)
GRIFFITH INDIANA 46319
ILD-000-646-810

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 So. Colfax Address | 918028902 Site Number (39 46)
GRIFFITH City | INDIANA State | 46319 Zip
IND-011360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent | WASTE PHASE: (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: | HAZARD CLASS:

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

Ink Solvent

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

QUANTITY OF WASTE DELIVERED: 003905 (47 52) | 1 GALLONS 2 CU. YDS. (Circle One) (53)

67

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-29-81 | (Authorized Signature) 4003

WASTE HAULER

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

(1) James Butler (Authorized Signature) | DATE: 7 29 81 (54 59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

Michael E Bugg (Authorized Signature) | DATE: 7 29 81 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 7/29/81 TO 112R 7/31/81 T-63 9AM.

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

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

SITE COPY - PART 3

003591

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

0333641 (1–7)

Authorization Number 9 9 7 1 4 5 (8–13)

CELLU-CRAFT, INC. (Company Name) | 250 S. HICKS ROAD (Address)

PALATINE (City) | ILLINOIS (State) | 60067 (Zip)

0 3 1 2 3 4 0 0 0 4 G (14–24) Generator Number

I L D 0 9 5 2 5 6 5 2 5

WASTE HAULER(S)

AMHRICAN CHEMICAL (Hauler Name) | 420 S. COLFAX (Hauler Address)

S.W.H. Registration Number 0 0 2 4 0 0 2 (25–31)

STRAND TRUCKING (Hauler Name) | CRESTWOOD, IL (Hauler Address)

S.W.H. Registration Number I L T 0 0 0 6 4 6 8 1 0 (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

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

9 1 8 0 8 9 0 2 (39–46) Site Number

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

IN 0 0 1 6 3 6 0 2 6 5

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK SOLVENT

F905

WASTE PHASE: LIQUID (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
HAZARDOUS	FLAMMABLE	LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 2 9 1 5 (47–52)

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

METHOD OF SHIPMENT (Circle One) 53 (DRUMS) TANK TRUCK OPEN TRUCK (OTHER) (Specify) VAN

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/30/81

Steve Santa (Authorized Signature)

WASTE HAULER

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

(1) Stan Strand (Authorized Signature) DATE: 6/30/81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO✓

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

Michael O'Dwyer (Authorized Signature) DATE: 6/30/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 6/30/81

PUMPED 16 TO 112K T-63 7/2/81 gpm 37 TO 112K T-63 7/8/81 gpm

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

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

SITE COPY - PART 3

003592

TO BE COMPLETED BY WASTE GENERATOR

(312) 547-2704

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

0053401

Authorization Number 9 9 8 8 1 6

SPRING DIV., Borg-Warner Corp. (Company Name) | 700 So. 25th Avenue (Address) | IL D005457221

Bellwood (City) | Illinois (State) | 60104 (Zip)

0 3 1 0 1 5 0 0 0 3 G
Generator Number

WASTE HAULER(S)

(1) Mister Frank's Trucking Co. (Hauler Name) | 312 5963377 201 W. 155th Street (Hauler Address) | IL D009506160

South Holland, IL 60473

S.W.H. Registration Number 0 0 7 9 0 2 5

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

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

IND 016360265

American Chemicals (Facility Name) | Griffith, Indiana 317763400 (Address) | 9 1 8 0 8 9 0 2 Site Number

_____ (City) | _____ (State) | _____ (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Spent Perchlorethylene

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: UN-1897

HAZARD CLASS: ORM-A

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

X DATE: 10/21/82 X M C Stich (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004000 (1 GALLONS / 2 CU. YDS.) (Circle One) 1

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

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

(1) Michael P. Martin (Authorized Signature) DATE: 10 21 82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

_____ (Authorized Signature) DATE: 10 21 82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

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

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

SITE COPY - PART 3

To 1197-63 GEM 10-21-82

003593

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

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

0376499

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 8 6 1 6
IL D005457221

Borg-Warner-Spring Div. (Company Name) | 700 S. 25th Ave. (Address)
Bellwood (City) | Illinois (State) | 60104 (Zip)
0 3 1 0 1 5 0 0 0 3 G — Generator Number

WASTE HAULER(S) 312-5963377
Mister Frank Trucking Co. (Hauler Name) | 201 W. 155th St. South Holland, IL 60473 (Hauler Address)
S.W.H. Registration Number 0 0 7 9 0 2 6
IL D069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE 312 765 3400
American Chemicals (Facility Name) | Griffith, Indiana (Address)
9 1 8 0 8 9 0 2 Site Number
IND 016360265
(City) | (State) | (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Spent Perchlorethylene
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:
UN-1897	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: 3400 (47–52)

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-19-82 Gilbert Murphy (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 Reiser (Authorized Signature) DATE: 8 19 82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

(Authorized Signature) DATE 8 19 82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

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

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

To 117 R T-63 8/19/82

SITE COPY - PART 3

003594

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0376495

Authorization Number 998816
IL D005457221

Borg-Warner- Spring Div. (Company Name) | 700 S. 25th Ave. (Address)

Bellwood (City) | Illinois (State) | 60104 (Zip) N

0310150003 G (Generator Number)

WASTE HAULER(S)

Mister Frank Trucking Co. (Hauler Name) | 201 W. 155th St. (Hauler Address) | S.W.H. Registration Number 0079 009

South Holland, IL 60473 | ILD069606160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals (Facility Name) | Griffith, In. (Address) | 91808902 (Site Number)

City | State | Zip | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Spent Perchlorethylene

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:
UN-1897	ORM-A

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

.11/lb.

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: 6/9/82 C Steele (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 A Biell (Authorized Signature) DATE: 06 09 82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

J Amfee (Authorized Signature) DATE 6 9 82

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

TO 122 RT-63 GRM 6.9.82 SITE COPY - PART 3

003595

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0376492

Authorization Number 998816
IL D005457221

Borg-Warner-Spring Div. (Company Name) — 700 S. 25th Ave. (Address)

Bellwood (City) — Illinois (State) — 60104 (Zip)

0310150003 G (Generator Number)

WASTE HAULER(S)

Mister Frank Trucking Co. (Hauler Name) — 201 W. 155th St. (Hauler Address) — S.W.H. Registration Number 0079027

IL.D. 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals (Facility Name) — Griffith, Indiana (Address) — 91808902 (Site Number)

City — State — Zip

FED I.D. IND 016360265.

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Spent Perchlorethylene — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: UN-1897 — HAZARD CLASS: ORM-A

WEIGHT FOR D.O.T. USE ~~15.7 lb/gal.~~ 13.23 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 3000 cf — 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK 64,800 OPEN TRUCK OTHER (Specify)

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/26/82. — Carl Steele (Authorized Signature)

WASTE HAULER

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

(1) G. Robertson (Authorized Signature) — DATE: 04 26 82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

(Authorized Signature) — DATE: 4/26/82

COMMENTS OR SPECIAL INSTRUCTIONS: 11:10 1:00

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

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

T0122K T-63 6PM 4.26.82 SITE COPY - PART 3

003596

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0375815

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 998816
IL D005457221

Borg-Warner-Spring Div. (Company Name) | 700 S. 25th Ave. (Address)
Bellwood (City) | Illinois (State) | 60104 (Zip)
0310150003 G (Generator Number)

WASTE HAULER(S)

Mister Frank Trucking Co. (Hauler Name) | 201 W. 155th St. (Hauler Address) | South Holland, IL 60473
S.W.H. Registration Number X0079019

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

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals (Facility Name) | Griffith, Indiana (Address)
91808902 (Site Number)

City | State | Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Spent Perchlorethylene
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
UN-1897	ORM-A	X XXXXXXXXXX LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: X 063800
(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: 2/17/82 Melvin Williams (Authorized Signature)

78180
30100
48080

WASTE HAULER

I HEREBY 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: 02 17 82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 02 17 82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-88[illegible]

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

TO 120K T-63 6RM
2/17/82

SITE COPY - PAP[illegible]

003597

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

120
MANIFEST DOCUMENT NUMBER

ILD 095309647
SHIPPER NUMBER

Mr. Frank
NAME OF CARRIER (SCAC)

ILD 069506160
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	ILD 095309647	Batavia Coatings Div. 1500 Lathem St. Batavia, Il, 60510 312-879-6800	3/16/82
TRANSPORTER # 1	ILD 069506160	Mr. Frank Inc. 201 W. 155th St., So. Holland, Il. 312-596-3377	3/16/82
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DIS— POSAL FACILITY			
TSDF TREATMENT STORAGE OR DIS— POSAL FACILITY	IND 016360265	American Chemicals Service 420 S. Colfax, Griffith, Ind. 312-768-3400	3/16/82

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 Carrie Use Only)
Tank Truck	XX	Waste Solvent Flammable Liquid, N.O.S.	UN1993		5,000 gal	5,000 gal		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

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

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

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

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

CERTIFICATION

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

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE / TRANSPORTER #2 SIGNATURE & DATE (If required)
This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

003598

STATE OF ILLINOIS

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

0527782

Authorization Number 997410

FED ID ILD 095309647

COMPLETED BY WASTE GENERATOR

Batavia Coatings & Chemicals Div. | Whittaker Corporation (Company Name) | 1500 Lathem St. (Address) | 312-879-6800 (Phone Number) | 0890100005 (Generator Number) | G

Batavia (City) | Illinois (State) | 60510 (Zip) | (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th St. (Hauler Address) | S. Holland, Il. 60473 | 312-596-3377 (Phone Number) | S.W.H. Registration Number 0079 | FED ID ILD 069506160 (EPA Number)

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax (Address) | 91808902 (Site Number) | FED ID ILD 016360265 (EPA Number)

Griffith (City) | Ind (State) | 46319 (Zip) | 312-768-3400 (Phone Number)

(Alternate (Facility Name)) | (Address) | (Site Number) | (City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Waste Solvent	Flammable	UN1993	F005

WEIGHT FOR D.O.T. USE 40,000 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 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 X [signature] (Authorized Signature) DATE: 3-16-82

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 03/16/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

[signature] (Authorized Signature) DATE 03/16/83

COMMENTS OR SPECIAL INSTRUCTIONS ____

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

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

REV. # 3

SITE COPY - PART 3

To 211 K T-50 GEM 3/16/82

003599

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

122
MANIFEST DOCUMENT NUMBER

ILD 095309647
SHIPPER NUMBER

Mr. Frank
NAME OF CARRIER (SCAC)

ILD 069506160
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	ILD 095309647	Batavia Coatings Div. 1500 Lathem St. Batavia, Il. 60510 312-879-6800	5/17/82
TRANSPORTER # 1	ILD 069506160	Mr. Frank Inc. 201 W. 155th St., So. Holland, Il. 312-596-3377	5/17/82
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360054	AMERICAN CHEMICAL SER 317 765-348 7405 S. Colfax, Griffith, IN	5/17/82
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)
Tank Truck	XX	Waste Solvent Flammable Liquid, N.O.S.	UN1993		5,000 gal	5,000 gal		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

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

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

_____ Signature

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

_____ (Signature of Consignor)

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

CERTIFICATION

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

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

003600

STATE OF ILLINOIS

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

0527785

Authorization Number 997410

TO BE COMPLETED BY WASTE GENERATOR

FED ID ILD 095309647

Batavia Coatings & Chemicals Div. | Whittaker Corporation (Company Name) | 1500 Lathem St. (Address) | 312-879-6800 (Phone Number) | 0 8 9 0 1 0 0 0 0 5 G (Generator Number)

Batavia (City) | Illinois (State) | 60510 (Zip) | (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 West 155th St. S. Holland, Il. 60473 (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 6 4

FED ID ILD 069506160

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

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax (Address) | 9 1 8 0 8 9 0 2 (Site Number)

FED ID IND 016360265

Griffith (City) | Indiana (State) | 46319 (Zip) | 31x7653480 (Phone Number) | (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:		
Waste Solvent	Flammable	UN1993 (UN or NA Number)	F005 (EPA HW Number)

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

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

QUANTITY OF WASTE DELIVERED: 0 0 ~~5 0 0 0~~ 4306 (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 [signature] (Authorized Signature) DATE: 5-17-82

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 05/17/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

[signature] (Authorized Signature) DATE 05/17/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 3

SITE COPY - PART 3 To 211K T-50 GRM 5-17-82

003601

STATE OF ILLINOIS

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

0527786

Authorization Number 9 9 7 4 1 0

TO BE COMPLETED BY WASTE GENERATOR

Batavia Coatings & Chemicals Div.
Whittaker Corporation (Company Name) | 1500 Lathem St. (Address) | 312-87906800 (Phone Number) | FED ID ILD 095309647
0 8 9 0 1 0 0 0 0 5 G (Generator Number)
Batavia (City) | Illinois 60510 (State / Zip) | EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th St. S. Holland, Il. 60473 (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 1 9
FED ID ILD 069506160
312-596-3377 (Phone Number) | EPA Number

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax (Address) | 9 1 8 0 8 9 0 2 (Site Number)
Griffith (City) | Ind. (State) | 46319 (Zip) | 3127683303 (Phone Number) | FED ID IND 016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number
City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste 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 Solvent	Flammable	U N 1 9 9 3 (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: 0 4 0 0 0 (1) GALLONS (Circle One) / CU. YDS. 1

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X _____ (Authorized Signature) DATE: 6/8/82

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE: 06/08/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

_____ (Authorized Signature) DATE: 6/8/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 3

SITE COPY - PART 3

To 211 FT-50 GPM 6.8.82

003602

003603

METROPOLITAN SANITARY DISTRICT OF GREATER CHICAGO

100 EAST ERIE STREET • CHICAGO, IL 60611

INDUSTRIAL WASTE DIVISION (312) 751-5697

NO. 011213

INDUSTRIAL WASTE/SLUDGE GENERATION, SHIPMENT AND DISPOSAL RECORD

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

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

VOLUME: 1075 GALS / CU. YDS. / 11,000 LBS.

WASTE CONTAINS:

[ ] FATS, OILS OR GREASE [ ] ACID [ ] ALKALI [ ] CYANIDE [ ] ZINC [ ] CADMIUM [ ] COPPER [ ] CHROME [ ] IRON [ ] NICKEL [ ] LEAD [ ] SELENIUM [ ] MERCURY [X] OTHER (SPECIFY) Paint Residue

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

NAME OF COMPANY: American Nameplate

LOCATION: 4501 S Kildare Chgo IL 60632

TYPE OF INDUSTRY: Manufacturing | DATE: 6/15/02 | TIME:

I certify that the described waste, in the designated volume, was removed from this location by the contractor named below for legal disposal.

AUTHORIZED AGENT AND TITLE: [signature] | PHONE: 376-1400

NAME: Technical Petroleum | DATE: | TIME:

ADDRESS: 6233 Pulaski Chgo IL

WASTE HAULER'S REGISTRATION NO.: 0625001 | STATE: | TRUCK LICENSE NO.:

I certify that the described waste, in the designated volume, was removed from the above location and delivered to the disposal site designated below.

SIGNATURE OF CONTRACTOR'S AGENT AND TITLE: [signature] | PHONE:

DISPOSAL SITE

NAME: American Chemical Service | PERMIT NO.: 91808102

ADDRESS: Griffith Ind | DATE: | TIME:

I certify that the above named contractor delivered the described waste, in the designated volume to this facility and same was received for lawful disposition as designated.

SIGNATURE OF OPERATOR AND TITLE: Frank Price | PHONE:

DISPOSAL SITE'S 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

0315915

Authorization Number 998629

AMERICAN NAMEPLATE (Company Name) 4501 S KILDARE (Address)

CH60 (City) IL (State) 60632 (Zip)

0316000584 G (Generator Number)

ILD 180012650

WASTE HAULER(S)

TECHNICAL PETROLEUM (Hauler Name) 6233 N PULASKI (Hauler Address) CH60, IL 60648

S.W.H. Registration Number 0625001

Hauler Name 312 463 2700 Hauler Address

ILD 005441696 S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE 2155244370

AMERICAN CHEM SERVICE (Facility Name) 420 S COLFAX (Address) 91808902 (Site Number)

GRIFFITH (City) IND (State) (Zip)

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PETROLEUM 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 RESIDUE

HAZARD CLASS: F017

WEIGHT FOR D.O.T. USE 11,000 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 1075 (47–52)

1 GALLONS (Circle One)
2 CU. YDS.

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/15/82 [signature] (Authorized Signature)

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 6/15/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

Frank Price (Authorized Signature) DATE: 6/15/82

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

On dock 6.15.82
To 210 KT-50 GRM 6.18.82

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

0335422

Authorization Number 995445

AMERACE CORP SIGNAL PRODUCTS (Company Name) — 7542 N NATCHEZ (Address)

NILES (City) — ILLINOIS (State) — 60648 (Zip)

0312010008 G (Generator Number)

WASTE HAULER(S)

JAYVAR HOAG CHEMICAL (Hauler Name) — 8620 FERRIS MORTON GROVE (Hauler Address) — S.W.H. Registration Number 0247091

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) — IN (State) — 46319 (Zip) — IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:
TRICHLORETHYLENE	UN 1710
METHYLENECHLORIDE	UN 1593

WEIGHT FOR D.O.T. USE 6070 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 555

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: 1/7/82 — Paul J. Lelmienski (Authorized Signature)

WASTE HAULER

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

(1) John I. [signature] (Authorized Signature) — DATE: 1/8/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

[signature] (Authorized Signature) — DATE: / /

COMMENTS OR SPECIAL INSTRUCTIONS: 01 20 [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

To #2 still On dock 1/20/82
T-63 GRM 4/12/82 GRM

SITE COPY - PART 3

003505

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

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

TO BE COMPLETED BY WASTE GENERATOR

0606837
1 7

Authorization Number 9 0 7 0 9 2
8 13

ALUMAX MILL PRODUCTS | 5555 E HWY 6 | 815 942 3420 | 0 6 3 0 6 0 0 0 0 2 G
(Company Name) | Address | Phone Number | 14 Generator Number 24

MORRIS | IL | 60450 | I L D 0 5 9 9 4 9 8 1 6
City | State | Zip | EPA Number

WASTE HAULER(S)

AMERICAN CHEMICAL | GRIFFITH, IN | S.W.H. Registration Number 0 0 2 4 0 0 2
Hauler Name | Hauler Address | 25 31

219 924 4370 | I N D 1 6 3 6 0 2 6 5
Phone Number | EPA Number

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH | IN | 46319 | 219 924 4370 | I N D 1 6 3 6 0 2 6 5
City | State | Zip | Phone Number | EPA Number

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE LIQUID 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:

NA 9189 (UN or NA Number) | F007 (EPA HW Number)

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

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

QUANTITY OF WASTE DELIVERED: 0 0 4 0 0 0 (47–52) GALLONS / 2 CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 80 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Donna Chamberlain (Authorized Signature) DATE: 10/07/82

WASTE HAULER

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

(1) L. Luhrsell (Authorized Signature) DATE: 10/07/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

Michael O'Dea (Authorized Signature) DATE: 10/7/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3

On dock 10/7/82

003606

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

MSD #085180 0559719

Authorization Number 998449

Allied Tube & Conduit (Company Name) | 16100 S. Lathrop (Address) | 339-1610 (Phone Number) | 0311110006 (Generator Number)

Harvey (City) | Illinois (State) | 60426 (Zip) | ILD057863847 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th Street (Hauler Address) | S.W.H. Registration Number 0079023

So. Holland, IL 60473 | 596-3377 (Phone Number) | INDOOOOOOOO (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 Avenue (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: Waste paint, lacquer, 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, lacquer, solvent flammable liquid

HAZARD CLASS: UN1263 (UN or NA Number)

F017 (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: 004900 (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 C Healon (Authorized Signature) DATE: 2-5-82

WASTE HAULER

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

(1) Ronald Bridgewater (Authorized Signature) DATE: 2/5/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

F K Mack (Authorized Signature) DATE: 2/5/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

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

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

REV. # 3

SITE COPY - PART 3 To 120 R T-63 GRM 2/5/82

003607

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

MSD #085228 0559767

Authorization Number 998449

ALLIED TUBE & CONDUIT (Company Name) | 16100 S. LATHROP (Address) | 312-339-1610 (Phone Number) | 0311110006 (Generator Number)
HARVEY (City) | IL (State) | 60426 (Zip) | ILD057863847 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | S.W.H. Registration Number 007900
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 SERVICE (Facility Name) | 420 S. Colfax Ave. (Address) | 918089200 (Site Number)
GRIFFITH (City) | IN (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: WASTE PAINT, LACQUER, SOLVENT
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
PAINT, LACQUER, SOLVENT N.O.S.	FLAMMABLE LIQUID COMBUSTIBLE LIQUID	UN1263	F017

WEIGHT FOR D.O.T. USE 22,400 LBS TONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 6500 (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: 3/24/82

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE 03/24/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

[signature] (Authorized Signature) DATE: 3/24/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 3

SITE COPY - PART 3 To 125KT-63 ERN 3/24/82

003608

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

118258 0559827

Authorization Number

ALLIED TUBE & CONDUIT (Company Name) | 16100 S. LATHROP AVE. (Address) | 312-339-1610 (Phone Number) | 0 3 1 1 1 1 0 0 0 6 G (Generator Number)

HARVEY (City) | IL (State) | 60426 (Zip) | I L D 0 5 7 8 6 3 8 4 7 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 6 9

SO. HOLLAND, IL 60473 | 312-596-3677 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | IN (State) | 46319 (Zip) | 3127653400 (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, LACQUER, SOLVENT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
PAINT, LACQUER, SOLVENT, ~~COMBUSTIBLE LIQUID~~ FLAMMABLE LIQUID N.O.S.		U N 1 2 6 3	F 0 1 7

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

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

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 | 1 GALLONS (Circle One) 2 CU. YDS. ____

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION James C. Skalon (Authorized Signature) DATE 7/25/82

WASTE HAULER

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

(1) Tom Berry (Authorized Signature) DATE: 07/28/82

(2) ____ (Authorized Signature) DATE: ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE 7/28/82

COMMENTS OR SPECIAL INSTRUCTIONS ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 3

SITE COPY - PART 3

To 125 RT-63 eff 11-7-82

003609

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

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

MSD #118256 0559826

Authorization Number 9 9 7 9 1 3

ALLIED TUBE & CONDUIT (Company Name) | 16100 S. LATHROP (Address) | 312-339-1610 (Phone Number) | 0 3 1 1 1 1 0 0 0 6 (Generator Number)

HARVEY (City) | IL (State) | 60426 (Zip) | I L D 0 5 7 8 6 3 8 4 7 (EPA Number)

WASTE HAULER(S)

~~WASTE RESEARCH & RECLAMATION~~ ~~ROUTE 7~~ (Hauler Name) | ~~EAU CLAIRE, WI 54701~~ (Hauler Address) | ~~3596-3377~~ (Phone Number) | 0 1 0 2 (S.W.H. Registration Number) | ~~WID990829475~~ (EPA Number)

MR. FRANK, INC. (Hauler Name) | 201 W. 155TH ST. SO. HOLLAND, IL 60473 (Hauler Address) | (Phone Number) | 0 0 7 9 0 0 1 (S.W.H. Registration Number) | ~~ILD069506760~~ ~~IND016360265~~ (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

~~WASTE RESEARCH & RECLAMATION~~ ~~ROUTE 7~~ (Facility Name) | Address | 9 5 5 0 3 5 0 1 (Site Number)

~~EAU CLAIRE~~ (City) | ~~WI~~ (State) | ~~54701~~ (Zip) | 3107653405 (Phone Number) | ~~WID990829475~~ (EPA Number)

AMERICAN CHEMICAL SERVICE | 1205 S. COLFAX (Alternate (Facility Name) / Address) | 9 1 8 0 8 9 0 2 (Site Number)

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE METHYL ETHYL KETONE, LACQUER 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, LACQUER, SOLVENT~~ METHYL ETHYL KETONE | HAZARD CLASS: FLAMMABLE LIQUID | UN1263 (UN or NA Number) | 017 F ~~005~~ (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 002,000 (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 James C Skalon (Authorized Signature) DATE: 7-23-82

WASTE HAULER

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

(1) Mike Seifert (Authorized Signature) DATE: 7/23/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

R Rumplee (Authorized Signature) DATE: 7/23/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV # 3

SITE COPY - PART 3

To 120 K T. 63 GRN 7.23.82

003610

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

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

MSD #118257 0559825

Authorization Number 8 13

ALLIED TUBE & CONDUIT (Company Name) | 16100 S. ~~HAWTHROP~~ (Address) | 312-339-1610 (Phone Number) | 0 3 1 1 1 1 0 0 0 6 G (14 Generator Number 24)

HARVEY (City) | IL (State) | 60426 (Zip) | I L D 0 5 7 8 6 3 8 4 7 (EPA Number)

WASTE HAULER(S)

~~WASTE RESEARCH & RECLAMATION ROUTE 7~~ (Hauler Name) | ~~EAU CLAIRE, WI 54701~~ (Hauler Address) | (Phone Number) | S.W.H. Registration Number ~~0102~~ (25 31) | ~~WID990829475~~ (EPA Number)

MR. FRANK, INC. (Hauler Name) | ~~[illegible]~~ (Hauler Address) | 596-3377 (Phone Number) | S.W.H. Registration Number 0079001 (32 38) | ILD069506160 (EPA Number)

201 W. 155TH ST. SO. HOLLAND, IL

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

~~WASTE RESEARCH & RECLAMATION ROUTE 7~~ (Facility Name) | (Address) | ~~9550350 1~~ (39 Site Number 46)

~~EAU CLAIRE~~ (City) | ~~WI~~ (State) | ~~54701~~ (Zip) | (Phone Number) | ~~WID999829475~~ (EPA Number)

AMERICAN CHEMICAL SERVICE (Alternate (Facility Name)) | 420 S. COLFAX (Address) | 91808902 (39 Site Number 46)

GRIFFITH (City) | IN (State) | 46319 (Zip) | 3176834 (Phone Number) | IND016360265 (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ~~PAINT, LACQUER, SOLVENT~~ WASTE METHYL ETHYL KETONE | WASTE 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, LACQUER, SOLVENT METHYL ETHYL KETONE | HAZARD CLASS: FLAMMABLE LIQUID | NA 1 1 1 3 (UN or NA Number) | F 017 ~~0 0 5~~ (EPA HW Number)

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 7/23/82

WASTE HAULER

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

(1) Mike Reifer (Authorized Signature) DATE: 7/23/82 (54 59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

[signature] (Authorized Signature) DATE: 7/23/82 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

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

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

REV. # 3

SITE COPY - PART 3

TO 120 RT-63 6RM 7.2382

003611

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

MSD 118275 0559844

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

Authorization Number

ALLIED TUBE & CONDUIT CORP (Company Name) | 16100 S. LATHROP (Address) | 312-339-1610 (Phone Number) | 0 3 1 1 1 1 0 0 0 6 (Generator Number)

HARVEY (City) | IL (State) | 60426 (Zip) | I L D 0 5 7 8 6 3 8 4 7 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155TH ST (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 1

SO.HOLLAND, IL 60473 | 3125963377 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | IN (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT, LACQUER, 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, LACQUER, SOLVENT, N.O.S.

HAZARD CLASS: FLAMMABLE LIQUID ~~COMBUSTIBLE LIQUID~~

UN 1 2 6 3 (UN or NA Number) | F 0 1 7 (EPA HW Number)

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

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

QUANTITY OF WASTE DELIVERED: 0 0 3 0 0 0 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 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 C. Skerlon (Authorized Signature) DATE: 8-11-82

WASTE HAULER

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

(1) Mike Reifer (Authorized Signature) DATE 8/11/82 (54–59)

(2) _____ (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE 8/11/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 3

SITE COPY - PART 3

To 125K7-63 GPM 8-11-82

003612

IL 532-610
LPC 6/8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

MSD 118285

0638899

Authorization Number

ALLIED TUBE & CONDUIT (Company Name) | 16100 S. LATHROP (Address) | 312-339-1610 (Phone Number) | 0 3 1 1 1 1 0 0 0 6 G (Generator Number)

Harvey (City) | IL (State) | 60426 (Zip) | I L D 0 5 7 8 6 3 8 4 7 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155TH ST. SO. HOLLAND, IL 60473 (Hauler Address) | S.W.H. Registration Number 0 0 7 9 / 0 2 9

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) | 420 S. COLFAX AVE. (Address) | 9 1 8 0 8 9 0 2 (Site Number)

GRIFFITH (City) | IN (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT, LACQUER, 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, LACQUER, SOLVENT N.O.S.

HAZARD CLASS: FLAMMABLE LIQUID COMBUSTIBLE LIQUID

UN or NA Number: U N 1 2 6 3

EPA HW Number: F 0 1 7

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

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

QUANTITY OF WASTE DELIVERED: 003700 (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 James C Skalon (Authorized Signature) DATE: 9/3/82

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 09 03 82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 9/3/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3

To 124 FT 63 GPM 9-3-82

003613

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

MSD 118308

0639222

Authorization Number

ALLIED TUBE & CONDUIT (Company Name) | 16100 S. LATHROP (Address) | 312-339-1610 (Phone Number) | 0 3 1 1 1 1 0 0 0 6 G (Generator Number)

HARVEY (City) | IL (State) | 60426 (Zip) | I L D 0 5 7 8 6 3 8 4 7 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155TH ST (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 1

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 SERVICE (Facility Name) | 420 S. COLFAX AVE. (Address) | 9 1 8 0 8 9 0 2 (Site Number)

GRIFFITH (City) | IN (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: WASTE PAINT, LACQUER,SOLVENT WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:		
PAINT,LACQUER,SOLVENT, NOO.S.	FLAMMABLE LIQUID COMBUSTIBLE LIQUID	U N 1 2 6 3 (UN or NA Number)	F 0 1 7 (EPA HW Number)

WEIGHT FOR D.O.T. USE: 21180 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 03000 (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 James A Shalon (Authorized Signature) DATE: 9/30/92

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE (54–59): 09/30/92

(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 (60–65): 9 30 92

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3

To 124 R-T-63 GKM 9.30.92

003614

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

MSD 118313 0639227

Authorization Number

Allied Tube & Conduit (Company Name) 16100 S. Lathrop (Address) 3123391610 (Phone Number) 0311110006 (Generator Number)

Harvey (City) IL (State) 60426 (Zip) ILD057863847 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) 201 W. 155th St. (Hauler Address) S.W.H. Registration Number 0079026

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

Griffith (City) IN (State) 46319 (Zip) 312-768-3400 (Phone Number) IND016360265 (EPA Number)

Alternate (Facility Name) Address Site Number

City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Perchloroethylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Perchloroethylene HAZARD CLASS: ORN-A UN1897 (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: 001300 (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 James C. Skelton (Authorized Signature) DATE: 10/27/82

WASTE HAULER

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

(1) Michael Martin (Authorized Signature) DATE: 10/27/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

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

F. Dunfee (Authorized Signature) DATE: 10/27/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3 To 119 RT-63 GRM 10.27.82

003615

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

118325 0639239

Authorization Number

ALLIED TUBE & CONDUIT CORP (Company Name) 16100 S. LATHROP (Address) 312-339-1610 (Phone Number) 0311110006 (Generator Number)

HARVEY (City) IL (State) 60426 (Zip) ILD057863847 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) 201 W. 155TH ST. (Hauler Address) S.W.H. Registration Number 0079/021

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 SERVICE (Facility Name) 420 S. COLFAX AVE. (Address) 91808902 (Site Number)

GRIFFITH (City) IN (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: WASTE PAINT, LACQUER, 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, LACQUER, SOLVENT, N.O.S.

HAZARD CLASS: FLAMMABLE LIQUID COMBUSTIBLE LIQUID

UN or NA Number: UN1263 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: 004500 (1 GALLONS (Circle One) 2 CU. YDS.)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION James C Skalon (Authorized Signature) DATE: 11/4/82

WASTE HAULER

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

(1) Tom Berry (Authorized Signature) DATE: / /

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 11/4/82

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3

TO 124 K T-63 6 GM 11.4.82

003616

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

MSD# 118330 0639244

Authorization Number

ALLIED TUBE & CONDUIT (Company Name) | 16100 S. LATHROP (Address) | 312 339-1610 (Phone Number) | 0311110006 (Generator Number)

HARVEY (City) | IL (State) | 60426 (Zip) | ILD057863847 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155TH ST. SO. HOLLAND, IL 60413 (Hauler Address) | 312 596-3377 (Phone Number) | S.W.H. Registration Number 0079/001 | 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) | 4120 S. COLFAX (Address) | 91808102 (Site Number)

GRIFFITH (City) | IN (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: PERCHLORETHYLENE | HAZARD CLASS: ORN-A | UN1897 (UN or NA Number) | F001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 27280 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 02600 | 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 C Skalon (Authorized Signature) DATE: 11/29/82

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 11 29 82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 11 29 8

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3 To 120K T-63 GRM 11.29.82

003617

STATE OF MICHIGAN

Rev. 3/81

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Waste (OTHER)

MI 0003059

0003013

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
The Stanalac Co.	Valley City Refuse Disposal, Inc.	American Chemical Service, Inc.
Site Address	**Transporters Address**	**Facility Address**
940 Monroe, N.W. Grand Rapids, MI 49503	2650 Thornwood, S.W. Wyoming, MI 49509	420 S. Colfax Griffith, IN 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 456-9248	(616) 538-8499	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MIG 000 003 702	MID 055 855 373	IND 016 360 265

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

GENERATOR COMPLETES

WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Waste Alcohol, N.O.S.	Flammable Liquid	1987	07	2	Dr		X			110	Gal	D001
2.													
3.													
4.													
5.													
6.													

COMMENTS Include Safety precautions and special handling instructions.

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

Generator Signature ① Tony Dennett

Date Shipped MO. DAY YEAR 6 29 83

TRANSPORTER COMPLETES

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

Transporter Vehicle I.D. No. No. 1 830366

Transporter Signature ② Butch Rogers

Date(s) Received 6 29 83

Subsequent Transporter Vehicle I.D. No's

Subsequent transporter(s) signature(s) ③

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

TSDF COMPLETES

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

TSDF Signature ④ R. Dunbar

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

☒ Accepted ☐ Rejected

Date Received 6 21 83

Describe any significant discrepancies between manifest and shipment.

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

TSDF COPY

STATE OF ILLINOIS

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

0525392 (1–7)

TO BE COMPLETED BY WASTE GENERATOR
PLEASE RETURN COMPLETED FORM TO: Trudy Johnson

Authorization Number 997236 (8–13)

G. D. SEARLE & CO. (Company Name)	4901 SEARLE PARKWAY (Address)	312/982-7577 (Phone Number)	0312880004 G (14 Generator Number 24)
SKOKIE (City)	IL (State)	60077 (Zip)	ILD 068458835 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name)	201 W. 155th Street (Hauler Address)		S.W.H. Registration Number 0079023 (25–31)
	SO. HOLLAND, IL 60473	312/596-3377 (Phone Number)	ILD 069506160 (EPA Number)
Hauler Name	Hauler Address		S.W.H. Registration Number (32–38)
		Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name)	420 S. COLFAX (Address)		91808902 (39 Site Number 46)
GRIFFITH (City)	INDIANA (State)	46316 (Zip)	IND016360265 (Phone Number / EPA Number)
Alternate (Facility Name)	Address		39 Site Number 46
City	State	Zip	Phone Number / EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: CHEMICAL WASTE N.O.S.
HAZARD CLASS: FLAMMABLE
UN or NA Number: UN1993
EPA HW Number: F002 U002 U213 F005 U112 K004 F003 P053

WEIGHT FOR D.O.T. 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. (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) DATE: 2-16-82

WASTE HAULER

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

(1) ____ (Authorized Signature) DATE: 02/16/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

BOB Pollock (Authorized Signature) DATE: 02/16/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

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

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

REV. # 3

SITE COPY - PART 3

To 212 K T-50 GRM 2/16/82

003320

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR
PLEASE RETURN COMPLETED FORM TO: Trudy Johnson

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

0525388

Authorization Number 997236

G. D. SEARLE & CO. (Company Name) | 4901 Searle Parkway (Address) | 312/982-7577 (Phone Number) | 0312880004 (Generator Number)
Skokie, (City) | Illinois (State) | 60077 (Zip) | ILD 068458835 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155th St. (Hauler Address) | S.W.H. Registration Number 0079021
So. Holland, IL 60473 | 312/596-3377 (Phone Number) | ILD 069506160 (EPA Number)

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. Colfax (Address) | 91808902 (Site Number)
GRIFFITH (City) | IND. (State) | 46316 (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: 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 NOO.S.
HAZARD CLASS: FLAMMABLE
UN or NA Number: UN1993
EPA HW Number: F002 U002 U213 F005 U112 K004 F003 P053

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OFFICIAL
QUANTITY OF WASTE DELIVERED: 005500 (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 Paul Tacco Jr. (Authorized Signature) DATE 3-1-82

WASTE HAULER

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

(1) ____ (Authorized Signature) DATE 03/01/82

(2) ____ (Authorized Signature) DATE ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

____ (Authorized Signature) DATE 3/1/82

COMMENTS OR SPECIAL INSTRUCTIONS: ____

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

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

SITE COPY - PART 3

T0212 K T-50 GRM 3/1/82

003321

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

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

0568769 (1–7)

Authorization Number 997236 (8–13)

G. D. SEARLE & CO. (Company Name)	4901 SEARLE PARKWAY (Address)	312/982-7577 (Phone Number)	0 3 1 2 8 8 0 0 0 4 G (14 Generator Number 24)
SKOKIE, ILLINOIS (City)	ILLINOIS (State)	60077 (Zip)	ILD 0 6 8 4 5 8 8 3 5 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name)	201 W. 155th Street (Hauler Address)	S.W.H. Registration Number 0 0 7 9 / 0 2 1 (25–31)
	So. Holland, IL 60473	312/596-3377 (Phone Number)
		ILD 0 6 9 5 0 6 1 6 0 (EPA Number)
(Hauler Name)	(Hauler Address)	S.W.H. Registration Number (32–38)
		(Phone Number)
		(EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name)	420 S. Colfax (Address)	9 1 8 0 8 9 0 2 (39 Site Number 46)
GRIFFITH (City)	INDIANA (State)	46316 (Zip) — (Phone Number) — IND 016360265 (EPA Number)
(Alternate (Facility Name))	(Address)	(39 Site Number 46)
(City)	(State)	(Zip) — (Phone Number) — (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
CHEMICAL WASTE N.O.S.	FLAMMABLE	U N 1 9 9 3	F002 U002 U213 F005 U112 K004 F003 P053

WEIGHT FOR D.O.T. 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) GALLONS (Circle One) / 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION — (Authorized Signature) — DATE: 3-15-82

WASTE HAULER

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

(1) Michael D Morton (Authorized Signature) — DATE: 03/15/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

(Authorized Signature) — DATE: 3/15/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 3

SITE COPY - PART 3

To 212 R T-50 GRM 3/15/82

003322

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

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

0568766 (1–7)

Authorization Number 997236 (8–13)

G. D. SEARLE & CO. (Company Name) | 4901 Searle Parkway (Address) | 312/982-7577 (Phone Number) | 0312880004 G (14 Generator Number 24)

Skokie, (City) | IL (State) | 60077 (Zip) | ILD068458835 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155th Street (Hauler Address) | S.W.H. Registration Number 00791021 (25–31)

South 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 SERVICE (Facility Name) | 420 S. Colfax (Address) | 91808902 (39 Site Number 46)

GRIFFITH (City) | INDIANA (State) | 46316 (Zip) | (Phone Number) | IND016360265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: CHEMICAL WASTE N.O.S.

HAZARD CLASS: FLAMMABLE

UN or NA Number UN1993 F002 U002 U213 F005 U112 K004 F003 F053

EPA HW Number

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

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

QUANTITY OF WASTE DELIVERED: 005500 (47–52) 1 GALLONS (Circle One) / 2 CU. YDS. (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) DATE: 3-22-82

WASTE HAULER

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

(1) ____ (Authorized Signature) DATE: 03/22/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

____ (Authorized Signature) DATE: 03/22/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

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

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

REV. # 3

SITE COPY - PART 3

To 212 RT-50 GRM 3/22/82

003323

STATE OF ILLINOIS

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

0568743

Authorization Number 997236

TO BE COMPLETED BY WASTE GENERATOR

G.D. SEARLE & CO.	4901 SEARLE PARKWAY	312/982-7577	0 3 1 2 8 8 0 0 0 4 G
(Company Name)	Address	Phone Number	Generator Number
SKOKIE, ILLINOIS	ILLINOIS 60077		ILD 068458835
City	State Zip		EPA Number

WASTE HAULER(S)

MR. FRANK, INC	201 W. 155th Street	0079001
Hauler Name	Hauler Address	S.W.H. Registration Number
	So. Holland, IL 60473 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	420 S. Colfax			91808902
(Facility Name)	Address			Site Number
GRIFFITH	INDIANA	46316		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 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
CHEMICAL WASTE N.O.S.	FLAMMABLE	UN1993	F002 U002 U213 F005 U112 K004 F003 P053

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

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

QUANTITY OF WASTE DELIVERED: 000800 (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) DATE: 3-23-82

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE: 3/23/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

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

_____ (Authorized Signature) DATE: 3/23/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 3

SITE COPY - PART 3 To 212 R T-50 61RM 3/23/82

003324

STATE OF ILLINOIS

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

0568746

Authorization Number 9 9 7 2 3 6

TO BE COMPLETED BY WASTE GENERATOR

G. D. SEARLE & CO. (Company Name) | 4901 Searle Pkwy. (Address) | 312/982-7577 (Phone Number) | 0 3 1 2 8 8 0 0 0 4 G (Generator Number)

Skokie (City) | IL. (State) | 60077 (Zip) | I L D 0 6 8 4 5 8 8 3 5 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155th Street (Hauler Address) | So. Holland, IL 60473 | 312/596-3377 (Phone Number) | S.W.H. Registration Number 0 0 7 9 0 2 1 | 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 | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. Colfax (Address) | GRIFFITH (City) | IND. (State) | 46316 (Zip) | 9 1 8 0 8 9 0 2 (Site Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

(Alternate (Facility Name)) | (Address) | (City) | (State) | (Zip) | (Phone Number) | (Site Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: CHEMICAL WASTE N.O.S. FLAMMABLE | HAZARD CLASS: U N 1 9 9 3 (UN or NA Number) | F002 F003 U002 U213 F005 P053 U112 K004 (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 5 0 0 | 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) DATE: 3/31/82

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE: 03/31/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

_____ (Authorized Signature) DATE: 03/31/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 3

SITE COPY - PART 3 To 212RT-5061M 3.31.82

Hauler 003325

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

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

0629187
1 7

Authorization Number 997236
8 13

TO BE COMPLETED BY WASTE GENERATOR

G. D. SEARLE & CO. (Company Name) | 4901 Searle Parkway (Address) | 312/982/7577 (Phone Number) | 0312880004 (14 Generator Number) G 24

Skokie (City) | Illinois (State) | 60077 (Zip) | ILD 068458835 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155th Street (Hauler Address) | S.W.H. Registration Number 0079009 (25 31)

So. Holland, IL 60473 | 312/596-3377 (Phone Number) | ILD 069506160 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. Colfax (Address) | 91808902 (39 Site Number 46)

GRIFFITH (City) | INDIANA (State) | 46316 (Zip) | 219/683400 (Phone Number) | IND 016360265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS N.O.S. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: CHEMICAL WASTE N.O.S. | HAZARD CLASS: FLAMMABLE | UN or NA Number: UN1993 | EPA HW Number: F002 U002 U213 F005 U112 K004 F003 P053

WEIGHT FOR D.O.T. 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. (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 5-20-82

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE: 05 29 82 (54 59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

_____ (Authorized Signature) DATE: 5 20 82 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

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

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

REV. # 4

SITE COPY - PART 3 TO 212 RT-50 GRM 5.20.82

003326

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0614121 (1–7)

Authorization Number 997236 (8–13)

G. D. SEARLE & CO. (Company Name)	4901 Searle Parkway (Address)	312/982-7577 (Phone Number)	0 3 1 2 8 8 0 0 0 4 G (14–24 Generator Number)
Skokie (City)	IL (State)	60077 (Zip)	I L D 0 6 8 4 5 8 8 3 5 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name)	201 W. 155th Street (Hauler Address)		0 0 7 9 0 1 8 (S.W.H. Registration Number 25–31)
	SOUTH HOLLAND, IL. 60473	312/596-3377 (Phone Number)	I L D 0 6 9 5 0 6 1 6 0 (EPA Number)
(Hauler Name)	(Hauler Address)		(S.W.H. Registration Number 32–38)
		(Phone Number)	(EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name)	420 S. Colfax (Address)		9 1 8 0 8 9 0 2 (39 Site Number 46)
GRIFFITH (City)	IND (State)	46316 (Zip)	I N D 0 1 6 3 6 0 2 6 5 (Phone Number / EPA Number)
(Alternate (Facility Name))	(Address)		(39 Site Number 46)
(City)	(State)	(Zip)	(Phone Number / EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: CHEMICAL WASTE N.O.S. HAZARD CLASS: FLAMMABLE

UN 1 9 9 3 (UN or NA Number)

F002 U002 U213 F005 U112 K004 F003 P053 (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 Louis Tacco (Authorized Signature) DATE: 4-14-82

WASTE HAULER

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

(1) Tom Berry (Authorized Signature) DATE: 04/14/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 4/14/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 2.12KT-50 GRM 4.14.82

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3

003527

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

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

0640116

Authorization Number 997236

TO BE COMPLETED BY WASTE GENERATOR

G. D. SEARLE & CO. (Company Name) | 4901 Searle Parkway (Address) | 312/982-7577 (Phone Number) | 0312880004 G (Generator Number)

SKOKIE (City) | ILL. (State) | 60077 (Zip) | ILD068458835 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155th Street (Hauler Address) | S.W.H. Registration Number 00791018

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

GRIFFITH (City) | IND. (State) | 46316 (Zip) | 31/768340 (Phone Number) | IND016360265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS N.O.S. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: CHEMICAL WASTE N.O.S. | HAZARD CLASS: FLAMMABLE | UN1993 (UN or NA Number) | F002 U002 U213 F005 U112 K004 F003 P053 (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: 805000 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) DATE: 6-17-82.

WASTE HAULER

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

(1) ____ (Authorized Signature) pumped 63 Drums. DATE: 06/17/82.

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

____ (Authorized Signature) DATE: 06/17/82

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3

To 212K T-60 6RM 6/7/82

003328

STATE OF ILLINOIS

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

0568759 (1–7)

Authorization Number 997236 (8–13)

4901 Searle Parkway — Address
312/982-7577 — Phone Number
0312880004 (14–24) — Generator Number
IL. — State
60077 — Zip
ILD 068458835 — EPA Number

WASTE HAULER(S)

201 W. 155th St. — Hauler Address
S.W.H. Registration Number 00 79/009 (25–31)
SO. HOLLAND, IL. 60473
312/596-3377 — Phone Number
ILD 069506160 — EPA Number

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

CE 420 S. Colfax — Address
91808902 (39–46) — Site Number
IND — State
46316 — Zip
Phone Number
IND 016360265 — EPA Number

Address
Site Number
State
Zip
Phone Number
EPA Number

WASTE SOLVENTS N.O.S.
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

DER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

HAZARD CLASS:

F002 U002 U213
UN1993 F005 U112 K004
.O.S. FLAMMABLE — UN or NA Number
F003 — EPA HW Number
P053

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

(DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

VASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
ATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

VRITTEN INFORMATION — (Authorized Signature) DATE: 4-26-82

HAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
S INDICATED:

DATE: 4/26/82 (54–59)

DATE: / /

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

DATE: 4/26/82 (60–65)

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

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

E COPY - PART 3

To 212 K T-50 6PM 4-26-82

003329

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

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

TO BE COMPLETED BY WASTE GENERATOR

0640144
Authorization Number ~~9 9 7 2 3 6~~

G. D. SEARLE & CO. (Company Name) | 4901 SEARLE PKWY. (Address) | 312/982-7577 (Phone Number)
0 3 1 2 8 8 0 0 0 4 G (Generator Number)

SKOKIE (City) | ILLINOIS (State) | 60077 (Zip)
I L D 0 6 8 4 5 8 8 3 5 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155th Street (Hauler Address)
S.W.H. Registration Number 0 0 7 9/G 19

So. Holland, IL 60473 (Hauler Address) | 312/596-3377 (Phone Number)
I L D 0 6 9 5 0 6 1 6 0 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. Colfax (Address)
9 1 8 0 8 9 0 2 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46316 (Zip) | 3197683400 (Phone Number)
I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS N.O.S. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: CHEMICAL WASTE N.O.S. FLAMMABLE
HAZARD CLASS: U N 1 9 9 3 (UN or NA Number)
F002 F003 U002 U213 F005 P053 U112 K004 (EPA HW Number)

WEIGHT FOR D.O.T. USE 36000 (LBS) TONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 004300 (47–52) (G) 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 Sidney J. Patterson (Authorized Signature) DATE: 8-12-82

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 08/12/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

[signature] (Authorized Signature) DATE: 08/12/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3

To 212 E T-50 6PM 8.12.82

003330

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

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

0640128
1 7

Authorization Number 997236
8 13

TO BE COMPLETED BY WASTE GENERATOR

G. D. SEARLE & CO. (Company Name) | 4901 SEARLE PARKWAY (Address) | 312/982-7577 (Phone Number) | 0 3 1 2 8 8 0 0 0 4 G (14 Generator Number 24)

SKOKIE, (City) | ILLINOIS (State) | 60077 (Zip) | I L D 0 6 8 4 5 8 8 3 5 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155th Street (Hauler Address) | S.W.H. Registration Number 0 0 7 9 1 0 0 9 (25 31)

So. Holland, IL 60473 | 312/596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 0 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. Colfax (Address) | 9 1 8 0 8 9 0 2 (39 Site Number 46)

GRIFFITH (City) | INDIANA (State) | 46316 (Zip) | 3127683400 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ~~WASTE SOLVENTS N.O.S.~~ | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: CHEMICAL WASTE N.O.S. | HAZARD CLASS: FLAMMABLE | U N 1 9 9 3 (UN or NA Number) | F002 U002 U213 F005 U112 K004 F003 P053 (EPA HW Number)

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

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

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 (47 52) 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 Tom Wittemyer (Authorized Signature) DATE: 6-30-82

WASTE HAULER

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

(1) Donald H Bell (Authorized Signature) DATE: 06 30 82 (54 59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

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

(Authorized Signature) DATE: 63082 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

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

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

REV. # 4

SITE COPY - PART 3

To 212 R T-50 GRM 6.30.82 GRM

003331

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0640131 (1–7)

Authorization Number 9 9 7 2 3 6 (8–13)

G. D. SEARLE & CO.	4901 SEARLE PARKWAY	312/982-7577	0 3 1 2 8 8 0 0 0 4 G
(Company Name)	Address	Phone Number	14 Generator Number 24
SKOKIE,	ILLINOIS 60077		I L D 0 6 8 4 5 8 8 3 5
City	State Zip		EPA Number

WASTE HAULER(S)

MR. FRANK, INC.	201 W. 155th Street	S.W.H. Registration Number 0 0 7 9 1 0 2 9 (25–31)
Hauler Name	Hauler Address	
	So.Holland, IL 60473 312/596-3377	I L D 0 6 9 5 0 6 1 6 0
	Phone Number	EPA Number
Hauler Name	Hauler Address	S.W.H. Registration Number (32–38)
	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE	420 S. Colfax	9 1 8 0 8 9 0 2 (39–46)
(Facility Name)	Address	Site Number
GRIFFITH	INDIANA 46316	3 1 9 7 6 8 3 4 0 3 I N D 0 1 6 3 6 0 2 6 5
City	State Zip	Phone Number EPA Number
Alternate (Facility Name)	Address	(39–46) Site Number
City	State Zip	Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS N.O.S. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: CHEMICAL WASTE N.O.S. FLAMMABLE

HAZARD CLASS: U N 1 9 9 3 (UN or NA Number)

EPA HW Number: F002 U002 U213 F005 U112 K004 F003 P053

WEIGHT FOR D.O.T. 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 _____ (Authorized Signature) DATE: 7-8-82

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE: 07 08 82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

_____ (Authorized Signature) DATE: __/__/__ (60–65) 7 8 82

COMMENTS OR SPECIAL INSTRUCTIONS: 11 SC

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

SITE COPY - PART 3

To 212K T-50 GRM 7.8.82

003332

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

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

0640140 (1–7)
Authorization Number 997236 (8–13)

TO BE COMPLETED BY WASTE GENERATOR

G. D. SEARLE & CO. (Company Name)	4901 SEARLE PKWY. (Address)	312/982-7577 (Phone Number)	0 3 1 2 8 8 0 0 0 4 G (14–24) Generator Number
SKOKIE (City)	ILLINOIS (State)	60077 (Zip)	I L D 0 6 8 4 5 8 8 3 5 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name)	201 W. 155TH STREET (Hauler Address)		S.W.H. Registration Number 0 0 7 9 1 0 0 9 (25–31)
SO. HOLLAND, IL 60473	312/596-3377 (Phone Number)		I L D 0 6 9 5 0 6 1 6 0 (EPA Number)
(Hauler Name)	(Hauler Address)		S.W.H. Registration Number (32–38)
	(Phone Number)		(EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name)	420 S. COLFAX (Address)			9 1 8 0 8 9 0 2 (39–46) Site Number
GRIFFITH (City)	INDIANA (State)	46316 (Zip)	3127683400 (Phone Number)	I N D 0 1 6 3 6 0 2 6 5 (EPA Number)
(Alternate (Facility Name))	(Address)			(39–46) Site Number
(City)	(State)	(Zip)	(Phone Number)	(EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS N.O.S. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: CHEMICAL WASTE N.O.S. FLAMMABLE

HAZARD CLASS: U N 1 9 9 3 (UN or NA Number)

F002 U002 U213 F005 U112 K004 F003 P053 (EPA HW Number)

WEIGHT FOR D.O.T. USE 40,000 LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 (47–52) GALLONS (Circle One) / 2 CU. YDS. 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 Paul Bucco (Authorized Signature) DATE: 7-26-82

WASTE HAULER

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

(1) Gary Carver (Authorized Signature) DATE: 07 26 82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

T. Dunfee (Authorized Signature) DATE: 7/26/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3

To 312 F 7-50 6M 7-26-82

003333

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0640156 (1–7)

Authorization Number 9 9 7 2 3 6 (8–13)

G. D. SEARLE & CO.	4901 SEARLE PKWY.	312/982-7577	0 3 1 2 8 8 0 0 0 4 G
(Company Name)	Address	Phone Number	(14) Generator Number (24)
SKOKIE	ILLINOIS	60077	I L D 0 6 8 4 5 8 8 3 5
City	State	Zip	EPA Number

WASTE HAULER(S)

MR. FRANK, INC.	201 W. 155th Street	S.W.H. Registration Number 0 0 7 9/0 2 9 (25–31)
Hauler Name	Hauler Address	
So. Holland, IL. 60473	312/596-3377	I L D 0 6 9 5 0 6 1 6 0
	Phone Number	EPA Number
Hauler Name	Hauler Address	S.W.H. Registration Number (32–38)
	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE	420 S. Colfax	9 1 8 0 8 9 0 2 (39–46)
(Facility Name)	Address	Site Number
GRIFFITH	INDIANA 46316	3 1 9 7 6 8 3 4 0 0 I N D 0 1 6 3 6 0 2 6 5 A
City	State Zip	Phone Number EPA Number
Alternate (Facility Name)	Address	(39) Site Number (46)
City	State Zip	Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS N.O.S. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	
CHEMICAL WASTE N.O.S. FLAMMABLE	U N 1 9 9 3	F002 F003 U002 U213 F005 P053 U112 K004
	UN or NA Number	EPA HW Number

WEIGHT FOR D.O.T. USE 37500 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 (47–52) (1) GALLONS (Circle One) (2) CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Sidney R Patterson (Authorized Signature) DATE: 8-26-82

WASTE HAULER

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

(1) Robert Fenkens (Authorized Signature) DATE 08 26 82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

T Dunfee (Authorized Signature) DATE: 8/26/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3 To 212E 7-SO 6111 8-26-82

003334

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0640160 (REG.)

Authorization Number ~~9 9 7 2 3 6~~

G. D. SEARLE & CO. (Company Name)	4901 SEARLE PARKWAY (Address)	312/982-7577 (Phone Number)	0 3 1 2 8 8 0 0 0 4 G (Generator Number)
SKOKIE, (City)	ILLINOIS (State)	60077 (Zip)	I L D 0 6 8 4 5 8 8 3 5 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name)	201 W. 155th Street (Hauler Address)		S.W.H. Registration Number 0 0 7 9 / 0 1 8
	SO. Holland, IL 60473	312/596-3377 (Phone Number)	I L D 0 6 9 5 0 6 1 6 0 (EPA Number)
(Hauler Name)	(Hauler Address)		S.W.H. Registration Number
		(Phone Number)	(EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name)	420 S. Colfax (Address)			9 1 8 0 8 9 0 2 (Site Number)
GRIFFITH (City)	INDIANA (State)	46316 (Zip)	312 683 400 (Phone Number)	I N D 0 1 6 3 6 0 2 6 5 (EPA Number)
(Alternate (Facility Name))	(Address)			(Site Number)
(City)	(State)	(Zip)	(Phone Number)	(EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS N.O.S. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: CHEMICAL WASTE N.O.S.

HAZARD CLASS: FLAMMABLE

UN 1993 (UN or NA Number)

F002 U002 U213
F005 U112 K004
F003
0053
(EPA HW Number)

WEIGHT FOR D.O.T. USE 36250 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52)

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Sidney J. R. Paterson (Authorized Signature) DATE: 9-7-82

WASTE HAULER

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

(1) Donald H Bell (Authorized Signature) DATE: 09/07/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 9/7/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3 TO 212 F T-50 9.7.82 GPM

003335

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/81

E COMPLETED BY
TE GENERATOR

STATE OF ILLINOIS

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

0666311
1 7

Authorization Number ____ 8 13

RLE FOOD RESOURCES | 2600 ~~DONB~~ BOND STREET | 312 534 1030 | 1 9 7 4 7 7 0 0 0 4 G
(Company Name) | Address | Phone Number | 14 Generator Number 24

K FOREST SO. | ILLINMOIS | 60466 | I L D 9 8 0 7 9 3 0 2 0
City | State | Zip | EPA Number

WASTE HAULER(S)

FRANK | 201 W.155th ST. | S.W.H. Registration Number 00791027 (25 31)
Hauler Name | Hauler Address | SO.HOLLAND,ILL. | 312 596 3377 Phone Number | I L D 0 6 9 5 0 6 1 6 0 EPA Number

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

RICAN CHEMICAL SERVICE | 420 S.KOLFAX | 9 1 8 0 8 9 0 2 (39 Site Number 46)
(Facility Name) | Address

FFITH | INDIANA | 46319 | 312 768 3400 | I N D 0 1 6 3 6 0 2 6 5
City | State | Zip | Phone Number | EPA Number

Alternate (Facility Name) | Address | 39 Site Number 46
City | State | Zip | Phone Number | EPA Number

COMPLETED BY GENERATOR

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

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

SHIPPING DESCRIPTION: WASTE SOLVENTS | HAZARD CLASS: FLAMMABLE | N A 1 9 9 3 (UN or NA Number) | F 0 0 3 (EPA HW Number)

FOR ISE ____ LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 0 0 2 6 0 0 (47 52) | 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

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

Y AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Patricia Fraker (Authorized Signature) DATE: 9-20-82

HAULER

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

(Authorized Signature) DATE: 09/29/82 (54 59)

(Authorized Signature) DATE: / /

L, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 9/29/82 (60 65)

TS OR SPECIAL INSTRUCTIONS: /

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

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

SITE COPY - PART 3

To 120 K T-63 GRM 9-20-82

003336

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0640185

Authorization Number

(Company Name)	Address	Phone Number	Generator Number
G. D. SEARLE & CO.	4901 SEARLE PKWY.	312/982-7270	0 3 1 2 8 8 0 0 0 4 G

City	State	Zip	EPA Number
SKOKIE	ILLINOIS	60077	I L D 0 6 8 4 5 8 8 3 5

WASTE HAULER(S)

Hauler Name	Hauler Address	S.W.H. Registration Number	Phone Number	EPA Number
MR. FRANK, INC.	201 W. 155th Street	0 0 7 9/0 2 1	So. Holland, IL 60473 312/596-3377	I L D 0 6 9 5 0 6 1 6 0

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number	City	State	Zip	Phone Number	EPA Number
AMERICAN CHEMICAL SERVICE	420 S. Colfax	9 1 8 0 8 9 0 2	GRIFFITH	INDIANA	46316	3127683400	I N D 0 1 6 3 6 0 2 6 5

Alternate (Facility Name)	Address	Site Number	City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS N.O.S. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: CHEMICAL WASTE N.O.S.

HAZARD CLASS: FLAMMABLE

UN or NA Number: U N 1 9 9 3

EPA HW Number: F002 F003 U002 U213 F005 P053 U112 K004

WEIGHT FOR D.O.T. USE 41250 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 GALLONS (Circle One) 1 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 Sidney R Patterson (Authorized Signature) DATE: 10-14-82

WASTE HAULER

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

(1) Michael Morton (Authorized Signature) DATE: 10/14/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

F D Mifee (Authorized Signature) DATE: 10/14/82

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3

TO 212 RT-50 GRM 10.14.82

003337

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0640197

Authorization Number 997236

G. D. SEARLE & CO.	4901 SEARLE PKWY.	312/982-7270	0 3 1 2 8 8 0 0 0 4 G
(Company Name)	Address	Phone Number	Generator Number
SKOKIE	ILLINOIS 60077		I L D 0 6 8 4 5 8 8 3 5
City	State Zip		EPA Number

WASTE HAULER(S)

MR. FRANK, INC.	201 W. 155th St.		S.W.H. Registration Number 0 0 7 9/0 2 5
Hauler Name	Hauler Address		
	So. Holland, IL 60473	312/596-3377	I L D 0 6 9 5 0 6 1 6 0
		Phone Number	EPA Number
Hauler Name	Hauler Address		S.W.H. Registration Number
		Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE	420 S. Colfax			9 1 8 0 8 9 0 2
(Facility Name)	Address			Site Number
GRIFFITH	INDIANA	46316		I N D 0 1 6 3 6 0 2 6 5
City	State	Zip	Phone Number	EPA Number
Alternate (Facility Name)	Address			Site Number
City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS N.O.S. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: CHEMICAL WASTE N.O.S. FLAMMABLE

HAZARD CLASS: UN 1993 (UN or NA Number)

F002 F003 U002 U213 F005 P053 U112 K004 (EPA HW Number)

WEIGHT FOR D.O.T. USE 37500 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 5000 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 Sidney J R Peterson (Authorized Signature) DATE: 11-17-82

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 11/17/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

[signature] (Authorized Signature) DATE: 11/17/82

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3

To 212 TK T-50 6 KM 11.17.82

003338

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

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

TO BE COMPLETED BY WASTE GENERATOR

SPECIAL WASTE HAULING MANIFEST

0662006 (1–7)

Authorization Number ____ (8–13)

SEARLE FOOD RESOURCES (Company Name) | 2600 BOND STREET (Address) | 312 534 1030 (Phone Number) | 1 9 7 4 7 7 0 0 0 4 G (14–24 Generator Number)

PARK FOREST SO. (City) | ILL. (State) | 60466 (Zip) | I L D 9 8 0 7 9 3 0 2 0 (EPA Number)

WASTE HAULER(S)

MR.FRANK (Hauler Name) | 201 W.155th STREET (Hauler Address) | S.W.H. Registration Number 0079/009 (25–31)

SO.HOLLAND,ILL. | 312 596 3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 0 (EPA Number)

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

____ (Phone Number) | ____ (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S.KOLFAX (Address) | 9 1 8 0 8 9 0 2 (39–46 Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312 768 3400 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: TOLUENE | WASTE PHASE: LIQUID (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
CHEMICAL WASTE	FLAMMABLE	UN 1294	U 220

WEIGHT FOR D.O.T. 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 Patricia Frakes (Authorized Signature) DATE: 11-18-82

WASTE HAULER

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

(1) ____ (Authorized Signature) DATE: 11 18 82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

____ (Authorized Signature) DATE: 11/19 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3 To # 7 Still T-63 GRW 11.19.82

003339

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0689381

Authorization Number

Searle Laboratories (Company Name) | 601 E. Kensington (Address) | 3122550300 (Phone Number) | Generator Number

City | State | Zip | ILD 000672394 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | South Holland, Il. (Hauler Address) | S.W.H. Registration Number 0079015

3125963377 (Phone Number) | ~~0162602 65~~ ILD-0695 06160 (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) | 620 S. Colfax (Address) | ~~0~~ (x) (Site Number)

Griffith (City) | Ind. (State) | 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: Mixed 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: x

HAZARD CLASS: x Flammable

1993 (UN or NA Number) | F003 (EPA HW Number) | 990

WEIGHT FOR D.O.T. USE 7920 ~~9680~~ LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 7920 ~~9680~~ LBS. 1 GALLONS (Circle One) 2 CU. YDS. ~~1200~~ 990

METHOD OF SHIPMENT (Circle One) (DRUMS ~~22~~ 18 Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH 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 DM Kreuser (Authorized Signature) DATE 12-6-82

WASTE HAULER

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

(1) Gary Druen (Authorized Signature) DATE: 12/06/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

Bob Mauck (Authorized Signature) DATE 12/06/82

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3

On dock 12.6.82 To204 7-50 GPM 12.6.82

003340

TO BE COMPLETED BY WASTE GENERATOR

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

SPECIAL WASTE HAULING MANIFEST

0247995

Authorization Number 997988

ST. CLAIR (Company Name) | 120 S. 25TH AVE (Address)
BELLWOOD (City) | ILL (State) | 60104 (Zip)
031050000 4 G (Generator Number)

WASTE HAULER(S)

MR FRANK INC (Hauler Name) | 20 WILLOW ST (Hauler Address) | S.W.H. Registration Number 0079/001
SO. HOLLAND ILL 312 596-3377 | ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE 312-768-3400

AMERICAN CHEMICAL (Facility Name) | 420 So. COLFAX (Address) | 9 1808902 (Site Number)
GRIFFITH (City) | IND (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

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

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW. F005

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
	FLAMMABLE	LBS / TONS (circle one)
	NA 1993	

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.) 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: 6-9-82 | Owen Parikh (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 Peter (Authorized Signature) DATE: 6/9/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ? NO X

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

(Authorized Signature) DATE: 6/9/82

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

TO 112 RT-63 GRM 6-9-82

SITE COPY - PART 3

003341

003342

METROPOLITAN SANITARY DISTRICT OF GREATER CHICAGO

100 EAST ERIE STREET • CHICAGO, IL 60611

INDUSTRIAL WASTE DIVISION (312) 751-5697

NO. 060638

INDUSTRIAL WASTE/SLUDGE GENERATION, SHIPMENT AND DISPOSAL RECORD

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

TYPE OF CONTAINER ▶ [ ] BULK (TANK TRUCK) [✓] DRUMS [ ] OTHER (SPECIFY) 34 Drums

VOLUME 1870 GALS / CU. YDS. / LBS.

WASTE CONTAINS:

[ ] FATS, OILS OR GREASE [ ] ACID [ ] ALKALI [ ] CYANIDE [ ] ZINC [ ] CADMIUM [ ] COPPER [ ] CHROME [ ] IRON [ ] NICKEL [ ] LEAD [ ] SELENIUM [ ] MERCURY [✓] OTHER (SPECIFY) Paint solvents for recycling 34 drums

DISPOSAL METHOD ▶ [ ] LANDFILL [ ] DESTRUCTION (SPECIFY) [✓] OTHER (SPECIFY) Recycling

NAME OF COMPANY: RHEEM MFG. CO. W.H. DIV Water Heater

FEDERAL TAX I. D. NUMBER:

LOCATION: 7600 S. KEDZIE AVE CHICAGO ILL 60652

TYPE OF INDUSTRY: MFG

DATE REMOVED: 7-30-81

TIME REMOVED: 11:43 AM

I certify that the described waste, in the designated volume, was removed from this location by the contractor named below for legal disposal.

SIGNATURE OF AUTHORIZED AGENT AND TITLE: [signature] PROD. ENGR

PHONE: 312-434-7500

CONTRACTOR

NAME: STRAND TRUCKING

FEDERAL TAX I. D. NUMBER:

ADDRESS: 13642 KENTON CRESTWOOD ILL

DATE RECEIVED:

TIME RECEIVED:

WASTE HAULER'S REGISTRATION NO.: 0024

STATE: ILL

TRUCK LICENSE NO.: 54657

I certify that the described waste, in the designated volume, was removed from the above location and delivered to the disposal site designated below.

SIGNATURE OF CONTRACTOR'S AGENT AND TITLE: [signature]

PHONE: 312-385-8440

NAME: AMERICAN CHEMICAL SERV.

FEDERAL TAX I. D. NUMBER: 350961773

ADDRESS: 420 S. COLFAX AVE GRIFFITH, IND

DATE RECEIVED: 7/30/81

TIME RECEIVED:

I certify that the above named contractor delivered the described waste, in the designated volume to this facility and same was received for lawful disposition as designated.

SIGNATURE OF OPERATOR AND TITLE: Michael O Bulge

PERMIT NO.: 998957

PHONE: 219-924-4370

IEPA 035298

CONTRACTOR'S COPY

003343

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

NO. 060611

INDUSTRIAL WASTE/SLUDGE GENERATION, SHIPMENT AND DISPOSAL RECORD

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

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

30 Drums

VOLUME × 16 Bbls GALS / CU. YDS. / LBS.

WASTE CONTAINS: WASTE PAINT SOLVENTS

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

All LT Crude

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

NAME OF COMPANY RHEEM MFG CO CONTAINER DIV

FEDERAL TAX I. D. NUMBER 94-080-3330

LOCATION 7600 S KEDZIE AVE CHICAGO ILL 60652

TYPE OF INDUSTRY STEEL SHIPPING CONTAINERS

DATE REMOVED × 7-30-81

TIME REMOVED × 11:15 AM

I certify that the described waste, in the designated volume, was removed from this location by the contractor named below for legal disposal.

SIGNATURE OF AUTHORIZED AGENT AND TITLE [signature] QC Mgr.

PHONE 312-434-7500

CONTRACTOR

NAME AMERICAN CHEMICAL SERVICES

FEDERAL TAX I. D. NUMBER IND016330265

ADDRESS P.O. BOX 190-420 S COLFAX AVE GRIFFITH IND 46319

DATE RECEIVED × 7-30-81

TIME RECEIVED × 11:15 AM.

WASTE HAULER'S REGISTRATION NO. × 0024001

STATE × ILL

TRUCK LICENSE NO. × 57863

I certify that the described waste, in the designated volume, was removed from the above location and delivered to the disposal site designated below.

SIGNATURE OF CONTRACTOR'S AGENT AND TITLE [signature]

PHONE × 355-8440

NAME American Chemical Service Inc

FEDERAL TAX I. D. NUMBER 350961723

ADDRESS 420 So Colfax Griffith In

DATE RECEIVED 7/30/81

TIME RECEIVED

I certify that the above named contractor delivered the described waste, in the designated volume to this facility and same was received for lawful disposition as designated.

SIGNATURE OF OPERATOR AND TITLE Michael O Bulger

PERMIT NO.

PHONE 2199244370

CONTRACTOR'S COPY

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

NO. 061275

INDUSTRIAL WASTE/SLUDGE GENERATION, SHIPMENT AND DISPOSAL RECORD

TYPE OF WASTE ▶ [X] LIQUID [ ] SLUDGE [ ] SOLID
TYPE OF CONTAINER ▶ [X] BULK (TANK TRUCK) [ ] DRUMS [ ] OTHER (SPECIFY)
VOLUME 4,000 GALS / CU. YDS. / LBS.

WASTE CONTAINS:

[ ] FATS, OILS OR GREASE [ ] ACID [ ] ALKALI
[ ] CYANIDE [ ] ZINC [ ] CADMIUM
[ ] COPPER [ ] CHROME [ ] IRON
[ ] NICKEL [ ] LEAD [ ] SELENIUM
[ ] MERCURY [X] OTHER (SPECIFY) WASTE PAINT LIQUID UN1263

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

NAME OF COMPANY: Sherwin Williams Company ILD 005456439
FEDERAL TAX I. D. NUMBER: 340-526850-03

LOCATION: 11541 S. Champlain Avenue Chicago, Illinois 60628

TYPE OF INDUSTRY: Chemical
DATE REMOVED: 1-15-83
TIME REMOVED:

I certify that the described waste, in the designated volume, was removed from this location by the contractor named below for legal disposal.

SIGNATURE OF AUTHORIZED AGENT AND TITLE: Oscar Mioni, Supervisor Transportation Dept.
PHONE: 312-821-3422

NAME: Mr. Frank, Inc. ILD 069506160
FEDERAL TAX I. D. NUMBER:

ADDRESS: 201 West 155th Street, South Holland, Illinois
DATE RECEIVED:
TIME RECEIVED:

WASTE HAULER'S REGISTRATION NO.: 00790 07
STATE: Illinois
TRUCK LICENSE NO.:

I certify that the described waste, in the designated volume, was removed from the above location and delivered to the disposal site designated below.

SIGNATURE OF CONTRACTOR'S AGENT AND TITLE:
PHONE:

DISPOSAL SITE

NAME: American Chemical Service IND 016360265
FEDERAL TAX I. D. NUMBER: 350961723

ADDRESS: P. O. Box 190, Griffith, Indiana 46319
DATE RECEIVED: 1/13/83
TIME RECEIVED:

I certify that the above named contractor delivered the described waste, in the designated volume to this facility and same was received for lawful disposition as designated.

SIGNATURE OF OPERATOR AND TITLE:
PERMIT NO.:
PHONE: 219-924-4370

DISPOSAL SITE'S COPY

003547

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

0293698

SPECIAL WASTE HAULING MANIFEST

Authorization Number 111103

PARKVIEW METAL PRODUCTS 4931 W ARMITAGE AVE
(Company Name) Address

FED. I.D.# ILD 605098454

CHICAGO ILLINOIS 60639
City State Zip

0316000478 G
Generator Number

WASTE HAULER(S)

TECHNICAL PETROLEUM 6233 N. PULASKI RD
Hauler Name Hauler Address

CHICAGO IL

S.W.H. Registration Number 0625007

FED I.D # ILD 605441696

Hauler Name Hauler Address

S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 420 S. CULFAN AVE
(Facility Name) Address

9180890Z
Site Number

GRIFFITH INDIANA 46319 FED I.D # IND 016360626
City State Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: TRICHLORETHYLENE

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: TRICHLORETHYLENE

HAZARD CLASS: ORM-A

WEIGHT FOR D.O.T. USE 17,136 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 1400

(GALLONS) CU. YDS. (Circle One)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-25-82

(Authorized Signature)

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE: 3/26/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

_____ (Authorized Signature) DATE: 3/26/82

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

On dock 3/26/82 GRM
To 122RT-63 GRM 4.1.82

SITE COPY - PART 3

003345

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

38

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	Nichols-Homeshield
E.P.A. ID Code No.	IND016360265	E.P.A. ID Code No.	IAD005264338
Address	420 S. Colfax Ave.	Address	1725 Rockingham Road
Destination	Griffith, Indiana	Origin	Davenport, Iowa 52808
Phone	1 (312) 768-3400	Phone	1 (319) 324-2121

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
	Waste Paint	Flammable Liquid	UN1263	F017		--

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 Bob Kettering
Phone 1 (319) 324-2121

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

CERTIFICATION

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

Generator Signature _____ Date _____

TRANSPORTER #1 _____ 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

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

T/S/D FACILITY Signature _____ Date _____

TO 211 KT-50
GEM 4.1.82

T/S/D F COPY

003346

HAZARDOUS WASTE

UPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0613899

Authorization Number 9 ~~[illegible]~~

NAVY EXCHANGE (Company Name) BUILDING 220 (Address) 312-578-6215 (Phone Number) 097 125 0015 G (Generator Number)

GREAT LAKES, (City) ILLINOIS (State) 60088 (Zip) 097125 0015 G (EPA Number)

WASTE HAULER(S)

SLUDGE REMOVAL (Hauler Name) 2315 W MOFFAT (Hauler Address) S.W.H. Registration Number 001200.1

312-889-5175 (Phone Number) (EPA Number)

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

(Phone Number) (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

IN/AMERICAN CHEM SERV (Facility Name) 420 S. COLFAX AVE (Address) 91808902 (Site Number)

GRIFFITH (City) IN. (State) 46319 (Zip) 3127683400 (Phone Number) IND016360865 (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 (PERC 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: TANK TRUCK HAZARD CLASS: (UN or NA Number) (EPA HW Number)

WEIGHT FOR D.O.T. USE 7800 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 001300 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 Joseph L. Wasniewski (Authorized Signature) DATE: 13 AUG 82

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

(1) [signature] (Authorized Signature) DATE: 08/13/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 8 13 82

COMMENTS OR SPECIAL INSTRUCTIONS:

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

V. # 4

SITE COPY - PART 3 TO 210 T T-50 GPM 8-13-82 003347

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 108268

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Fri 12/10/82 8-9AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US 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 Tanker	5800	Waste Flammable Liquid NOS	Flammable	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. *I also certify that the information contained herein is true, accurate and complete.*

15. AUTHORIZED SIGNATURE: G. H. Jameson/jh
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 12/9/82

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: 608 838-3108
23. COMMENTS:

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

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M D Y: 12/9/82

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

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

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffin, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): EDUN FISH
40. Date Accepted: 12/10/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 K T-50
GKM 12.10.82

016360

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 107663

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Mon 12/6/82 8-9 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US 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 Tanker	5800	Waste Flammable Liquid NOS	Flammable	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	Approx. 44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 12 / 5 / 82

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. P. O. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted 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): Marvin Wagner
26. Date Accepted M / D / Y: 12 / 5 / 82

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

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

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Calfax
35. CITY, STATE, ZIP CODE: Griffin, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted M D Y: 12 10 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 E T-50 GEM 12.6.82

0033649

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

A 1076[illegible]

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - Fri 12/17/82 8-9AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US 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 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	Approx. 44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: G.H. Jameson / [illegible]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 12/16/82

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. P. O. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS

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

24. AUTHORIZED SIGNATURE: [illegible]
25. NAME (Print): Wagner
26. Date Accepted: M D Y 12/16/82

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

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

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S.Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [illegible]
39. NAME (Print): [illegible]
40. Date Accepted: M / D / Y 12/17/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210 KT-50 GRM 12-17-82

003350

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 104819

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009
Delivery - Mon 12/13/82 8-9AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US 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 Tanker	5800	Waste Flammable Liquid NOS	FLAMMABLE	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	Approx. 44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene H Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 12/12/82

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted 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): Gerald Wagner
26. Date Accepted: M / D / Y 12 / 12 / 82

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

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

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FOUNFEE
40. Date Accepted: 12/13/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211 ET-50
GKM 12.13.82

003551

STATE OF ILLINOIS

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

COMPLETED BY GENERATOR

0511093 (1–7)

Authorization Number 993025 (8–13)

UNIVERSAL OIL PROD (U.O.P) | 10 U.O.P PLAZA | 3123912000 | 0310630002 G
(Company Name) | Address | Phone Number (14) | Generator Number (24)

DES PLAINES | ILLINOIS | 60016 | ILD084741222
City | State | Zip | EPA Number

WASTE HAULER(S)

MR. FRANK | 201 W. 155TH ST. SO. HOLLAND, IL | S.W.H. Registration Number 0079026 (25–31) | 312 5963377 Phone Number | ILD069506160 EPA Number
Hauler Name | Hauler Address

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

DESTINATION — DISPOSAL, STORAGE OR TREATMENT SITE

AM. CHEM SVC | 420 S. COLFAX AVE | 91808902 (39–46)
(Facility Name) | Address | Site Number

GRIFFITH | INDIANA | 46319 | 312 768 3400 | IND016360265
City | State | Zip | Phone Number | EPA Number

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: | HAZARD CLASS:

FLAMMABLE LIQUID N.O.S. FLAMMABLE | UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE: 40,000 LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 005000 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION: Nick Ramirez (Authorized Signature) | DATE: 8-25-82

WASTE HAULER

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

(1) Michael Martin (Authorized Signature) | DATE: 08/25/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

T. Ramirez (Authorized Signature) | DATE: 8/25/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

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

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

REV. # 3

SITE COPY - PART 3 TO205R 7-50 6RM 8.25.82

003552

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0335490 (1–7)

Authorization Number 998715 (8–13)

SYNCHRO-START PRODUCTS (Company Name) | 8109 N. LAWNDALE AVE (Address) | SKOKIE ILL. (City) | ILLINOIS (State) | 60076 (Zip)

0312880029 G (Generator Number 14–24)

WASTE HAULER(S)

TAJAR-HOAG CHEMICAL (Hauler Name) | 8620 FERRIS ST (Hauler Address) | MORTON GROVE, IL 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)

9180890 02 (Site Number 39–46)

IND016360865

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: 000162 (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: 3-2-82 W K Goodson (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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: 03/03/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

_____ (Authorized Signature) DATE: 3/10/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

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

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

On dock 3/10/82 GRM
To #1 Still T-63 GRM 4.1.82

SITE COPY - PART 3

003333

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0335494

Authorization Number ~~998775~~

SYNCHRO-START (Company Name) 8109 N. LAWNDALE AVE (Address)
SKOKIE (City) ILL (State) 60076 (Zip)
0312880029 G (Generator Number)

WASTE HAULER(S)

JAYAR-HOAG CHEM (Hauler Name) 8620 FERRIS ST (Hauler Address) S.W.H. Registration Number 0247001
MORTON GROVE, ILL
(Hauler Name) (Hauler Address) S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERVICE (Facility Name) 420 S. COLFAX (Address) 312-7653400 91808902 (Site Number)
GRIFFITH (City) INDIANA (State) 46319 (Zip) IND016360265

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: 7-16-82 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) [signature] (Authorized Signature) DATE: 07/15/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 7/21/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

On dock 7.21.82 To IBE T-63

SITE COPY - PART 3

003354

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

NO. 132075

INDUSTRIAL WASTE/SLUDGE GENERATION, SHIPMENT AND DISPOSAL RECORD

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

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

VOLUME 216 GALS / CU. YDS. / LBS.

WASTE CONTAINS:

[ ] FATS, OILS OR GREASE [ ] ACID [ ] ALKALI [ ] CYANIDE [ ] ZINC [ ] CADMIUM [ ] COPPER [ ] CHROME [ ] IRON [ ] NICKEL [ ] LEAD [ ] SELENIUM [ ] MERCURY [X] SOLVENTS [ ] PAINT RESIDUE [ ] OTHER (SPECIFY)

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

NAME OF COMPANY: SYNCHRO-START PRODUCTS — FEDERAL TAX I. D. NUMBER: 36-3173463

LOCATION: 2121 N. MANHEIM RD. SKOKIE — FEDERAL GENERATOR I. D. NUMBER: ILD984802

TYPE OF INDUSTRY: MANUFACTURER — DATE REMOVED: — TIME REMOVED:

I certify that the described waste, in the designated volume, was removed from this location by the contractor named below for legal disposal.

SIGNATURE OF AUTHORIZED AGENT AND TITLE: [illegible] Controller — PHONE: 674-[illegible]7730

NAME: — FEDERAL TAX I. D. NUMBER:

ADDRESS: — DATE RECEIVED: — TIME RECEIVED:

FEDERAL HAULER I. D. NUMBER: [illegible] — STATE: — TRUCK LICENSE NO.:

I certify that the described waste, in the designated volume, was removed from the above location and delivered to the disposal site designated below.

SIGNATURE OF CONTRACTOR'S AGENT AND TITLE: [illegible] — PHONE: 465-6650

DISPOSAL SITE

NAME: Frank Bros. Paint Mfg. and Mixers — FEDERAL TAX I. D. NUMBER: 36-0611762

ADDRESS: Griffith — FEDERAL DISPOSAL SITE I.D. NUMBER: IND016346161 — DATE RECEIVED: 11-17-82 — TIME RECEIVED:

I certify that the above named contractor delivered the described waste, in the designated volume to this facility and same was received for lawful disposition as designated.

SIGNATURE OF OPERATOR AND TITLE: — PERMIT NO.: — PHONE: 219 924-4270

DISPOSAL SITE'S COPY 1

083065

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0335498 (1–7)

Authorization Number ____ (8–13)

SYNCHRO-START (Company Name) | 8109 N. LAWNDALE AVE (Address)
SKOKIE (City) | ILLINOIS (State) | 60076 (Zip) | 312-673-7730
0312880029 (14–24) Generator Number

WASTE HAULER(S)

JAYAR-HOAG-CHEM. (Hauler Name) | 8620 FERRIS ST. (Hauler Address) | S.W.H. Registration Number 0247001 (25–31)
MORTON GROVE, ILL | 312-768-3400

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. (Facility Name) | 420 S. COLFAX (Address) | 9 18089 02 (39–46) Site Number
GRIFFITH (City) | IND (State) | 46319 (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 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: 10-8-82 | (Authorized Signature)

WASTE HAULER

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

(1) ____ (Authorized Signature) DATE: 11/16/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

Frank James Price (Authorized Signature) DATE: 11/17/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

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

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

On dock 11.17.82
To 118R 7-63 GRM 11.23.82

SITE COPY - PART 3

003656

☐ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0010840

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, IL60437	Facility Address 420 S. Colfax Griffith, IN 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	ORMA-A	UN2831	None	1	Tr		X			001000	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: R. L. Bellon — Date Shipped MO. DAY YEAR: 01 18 82

TRANSPORTER COMPLETES

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

Transporter Vehicle I.D. No. 1 0079019 — Transporter Signature: Robert Roberts — Date(s) Received: 01/18/82

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

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

TSDF COMPLETES

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

TSDF Signature: [signature] — ☒ Accepted ☐ Rejected — Date Received: 1 18 82

Facility Site EPA I.D. Number: IND011163160265

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 #1 Still T-63 6PM 1/18/82

003537

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0323408 (1–7)

Exempt

Authorization Number 997006 (8–13)

Stuart Chemical + Paint — 11740 So. Front St
(Company Name) — Address

Chicago — Illinois — 60628
City — State — Zip

0316000286 G (14–24)
Generator Number

WASTE HAULER(S)

American Chemical Service — 420 So. Colfax Griffith Ind — S.W.H. Registration Number 0024002 (25–31) — 312-365-5440
Hauler Name — Hauler Address

STAND Truck — 13443 Felton Ill — ILT0006460 (32–38)
Hauler Name — Hauler Address — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE 312-765-3400

American Chemical Service — 420 So. Colfax Ave — 918089002 (39–46)
(Facility Name) — Address — Site Number

Griffith — Indiana — 46319 — IND 016360965
City — State — Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

F005
XU 1993

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

SHIPPING DESCRIPTION: dirty Solvent

HAZARD CLASS: Flammable Liquid

WEIGHT FOR D.O.T. USE 2800 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 2800 lb

QUANTITY OF WASTE DELIVERED: 385 (47–52)

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

METHOD OF SHIPMENT (Circle One) (DRUMS) 7 TANK TRUCK OPEN TRUCK OTHER (Specify) VAH

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-22-82 — (Authorized Signature)

WASTE HAULER

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

(1) Stan Stan (Authorized Signature) — DATE: 6/22/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

Michael O'Brien (Authorized Signature) — DATE: 6/22/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

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

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

To 124 Tk T-63 6PM 6.22.82

SITE COPY - PART 3

003558

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 3625, 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.	UN1993	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

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

Barney Lubelski
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

Mark Vann 12-7-81
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

[signature]
TSDF SIGNATURE

12-9-81
DATE

3

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TRANSPORTER #2

003359

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0261080

Authorization Number 921072

The Valspar Corp. (Company Name) — 1330 S. Kilbourn Ave. (Address)

Chicago, Illinois (City) — Illinois (State) — 60623 (Zip)

ILD 031600044 5G (Generator Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) — 201 W. 155th St., South Holland, IL (Hauler Address) — S.W.H. Registration Number 00790 21

312-596-3377 — ILD 069506160 — S.W.H. Registration Number

Hauler Name — Hauler Address

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) — 420 S. Colfax, Griffith, IN (Address) — 91808902 (Site Number)

City — 312-768-3400 (State) — Zip — IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Sludge — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: F005

SHIPPING DESCRIPTION: — HAZARD CLASS: Flammable Liquid NOS 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: 05000 — 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 05-06-82 — X [signature] (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) — DATE: 05 06 82

(2) _____ (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) — DATE: 05 06 82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

To 211 RT-63 GRM 5-6-82

SITE COPY - PART 3

003360

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

82-5
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Mr. Frank, Inc. (SCAC) 0079-010
NAME OF CARRIER 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	9-20-82
TRANSPORTER # 1	ILD069506160	Mr. Frank, Inc., 201 W. 155th St. So. Holland, Il. 312-596-3377	9-20-82
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical, 420 So. Colfax, Griffith, Ind.	9-21-82
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)
Tanker	X	D001 F002 F003 F005	Waste Inks & Solvents	1993		40	gals	5000		

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 — 9/20/82 DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE — 9-20-82

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TRANSPORTER #2 SIGNATURE & DATE (if required)

TSDF SIGNATURE — 9/21/82 DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

TO 210 FT - 50 GPM 9-21-82

003361

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

82-6
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Mr. Frank, Inc.
NAME OF CARRIER (SCAC)

0079-018- 021
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IAD041580721	Uninn Carbide Corp. P.O. Box 250, Centerville, Ia. 515-856-6343	11/15/82
TRANSPORTER # 1	ILDO6950160	Mr. Frank Inc. 201 W. 155th St. So. Holland, Il 312-596-3377	11/15/82
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DIS– POSAL FACILITY	IND016360265	American Chemical, 420 So. Colfax, Griffith, Ind.	11/16/82
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)
Tanker	X	D001 F002 F003 F004	Waste Inks & Solvents	1993		80	gals	5500		

SPECIAL HANDLING INSTRUCTIONS

In case of spill, absorbg 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

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 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 11/15/82 DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal

TSDF SIGNATURE 11/16/82 DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

To 210K 7-50 G2M 11-16-82

003362

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

82-1
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, 5-5-856-6343	3/1/82
TRANSPORTER # 1	ILD069506160	Mr. Frank, Inc. 201 W. 155th St. So. Holland, Il, 60473, 312-596-3377	3/1/82
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical, 420 So. Colfax, Griffith, Inc.	3/2/82
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	4,900		

SPECIAL HANDLING INSTRUCTIONS In case of spill, absorb w/sawdust, collect in barrles

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

3/1/82
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE 3/2/82 DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY To 210 RT-60 GEM 3/2/82

003363

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

82-2
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	4-27-82
TRANSPORTER # 1	ILD069506160	Mr. Frank Inc, 201 W. 155th St., So.Holland, Il 60453, 312-596-3377	4-27-82
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical, 420 So Colfax, Griffith, Ind.	4/28/82
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)
Tanker	X	D001 F002 F003 F005	Ink Wastes & Solvents	1993		40	gals	2,000		

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 collected

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$ per

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE 4/27/82 DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE 4/28/82 DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY To 210 RT-50 6PM 4-28-82

003564

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

82-3
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	5-10-82
TRANSPORTER # 1	ILD069506160	Mr. Frank Frank, Inc, 201 W. 155th St. So. Hoaland, Il, 312-596-3377	5-10-82
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical, 420 So. Colfax, Griffith, Ind.	5/11/82
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)
Tanker	X	D001 F002 F003 F005	Waste Inks & Solvents	1993		40 gals		5,000		

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.

5/10/82
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE 5/11/82

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY To 203 RT-50 6PM 5.11.82

003365

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

82-4
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Mr. Frank Inc.
NAME OF CARRIER (SCAC)

0079-019
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	5-19-82
TRANSPORTER # 1	ILD069506160	Mr. Frank, Inc, 201 W. 155th St. So. Holland, Il 312-596-3377	7-19-82
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical, 420 So. Colfax, Griffith, Ind.	7-20-82
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)
Tanker	X	D001 D002 F003 F005	Waste Inks & Solvents	1993		40	GALS	4800		

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 — DATE: 7/19/82

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE — DATE: 7-20-82

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

To 211F T-50 GKM 7.20.82

003566

THIS SHIPPING ORDER

MUST BE LEGIBLY FILLED IN, IN INK, IN INDELIBLE PENCIL, OR IN CARBON AND RETAINED BY THE AGENT.

RECEIVE, subject to the classifications and tariffs in effect on the date of the issue of this shipping order,

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown) marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Official, Southern, Western and Illinois Freight Classifications in effect on the date hereof, if this is a rail or a rail water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

From Sun Chemical Corporation
GENERAL PRINTING INK DIVISION

B/L No. 046443

Cust. Order No.

Shipper's No.

at FRANKFORT, IN. 12-9-1982

Carrier Mr. Frank INC.

Consigned to American Chemical Services

Destination Griffith **State** IN (Mail or street address of consignee - For purposes of notification only.) **Zip**

Delivery Address ☆ 420 South Colfax

(☆ To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route

Delivering Carrier **Car or Vehicle Initials** **No.**

BOXES	KITS OR PAILS	DRS.		HM	DESCRIPTION OF ARTICLES	*WEIGHT (SUB. TO CORR.)
					Ink, Printing, N.O.I.	
					Ink, Printing, N.O.I. In Metal or Plastic Tubes	
					Flammable Liquid N.O.S., Flammable Liquid, N.M.F.C. Ink Material N.O.I., UN 1993	
					Ink, Flammable Liquid, N.M.F.C. Ink, Printing, N.O.I., UN 1210	
					Paint, Stains, Varnish, N.O.I. Liquid or Solid	
					Paint, N.O.I. Dry	
					Varnish, Flammable Liquid, UN 1263	
					Solvent, N.O.S., Flammable Liquid, N.M.F.C. Solvent, Paint, Lacquer, Varnish, Gum, Resin, or Plastic, NA 1993	
					Lacquer (Flammable Liquid), NA 1263	
					Plasticizers, Paint, Lacquer, Varnish, Gum, Resin or Plastic	
					Compounds, Increasing, Reducing, Removing, Thickening or Thinning	
					Flammable Liquid N.O.S. Flammable Liquid, N.M.F.C. Plasticizer, Paint, UN 1993	
					Compounds, Lacquer, Paint or Varnish, Removing, Reducing or Thinning Liquid, Flammable Liquid, NA 1142	
					4500 gal Non-Hazardous Waste - Oil & INK waste and Sludge	
					Total	

ATTENTION: CARRIER
SEND FREIGHT BILL WITH COPY OF BILL OF LADING
TO: GPI DIV., SUN CHEMICAL CORP.
c/o T.A.R.I.F.F.
P. O. BOX 375
HAZLET, NJ 07730

Subject to Section 7 of Conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of consignor)

If charges are to be prepaid, write or stamp here, "To be Prepaid."

Received $

to apply in prepayment of the charges on the property described hereon.

Agent or Cashier

Per

(The signature here acknowledges only the amount prepaid.)

Charges advanced:

$

"Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission."

*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.

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**

"This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation."

The fibre barrels, drums, pails, tubes or boxes used for this shipment conform to the specifications set forth in drum maker's certificate thereon and all other requirements of Rule 41 of the Consolidated Freight Classification.

GENERAL PRINTING INK CO., Shippers, Per

Division Of
SUN CHEMICAL CORPORATION

Permanent post-office address of shipper, R.R. 6 & STATE ROAD 28 WEST
P.O. BOX 427
FRANKFORT, IN. 46041

AGENT MUST DETACH AND RETAIN THIS SHIPPING ORDER AND MUST SIGN THE ORIGINAL BILL OF LADING

TO 211KT-50 62M
12.9.82

FORM 205

003567

STATE OF MICHIGAN

Rev. 3/81

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER)

MI 0048782

003568

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Staal Buick Inc.	Valley City Refuse Disp.	American Chemical Serv.
Site Address	**Transporter's Address**	**Facility Address**
1010 28th ST. S.E. Grand Rapids, Mi 49508	2640 Thornwood S.W. Wyoming, Mi 49509	420 S. Colfax Ave. Griffith, IND. 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 452-5101	(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**
MID017102039	MID055855373	IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Waste Paint Thinning Compound	Flamable Liquid	NA1142	07	3	DR.		X			165	Gals.	D001
2.													F003
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

Keep from Sparks or Fire

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① X [signature] — Date Shipped MO. DAY. YEAR: 06 02 82

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 H 213-1

Subsequent Transporter Vehicle I.D. No's 218-6

Transporter Signature ② [signature] — Date(s) Received: 06 02 82

Subsequent transporter(s) signature(s) ③ [signature] — 06 03 82

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: 6 4 82

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

TO 210 KT-50 GRM 6.4.82

STATE OF MICHIGAN

Rev. 8/81

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste ☐ Other MI 0226336

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Staal Buick, Inc.	Valley City Refuse Disposal, Inc.	American Chemical Service, Inc.
Site Address	**Transporters Address**	**Facility Address**
1010 28th Street Grand Rapids, MI 49508	2650 Thornwood. Wyoming, MI 49509	420 S. Colfax Griffith, IN 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 452-5101	(616) 538-8499	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility's EPA I.D. Number**
MID 017102039	MID 055 855 573	IND 016 360 265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Total Weight or Volume	Units	Hazardous or Liquid Waste Number
1.	Waste Paint Thinning Compound	Flammable	1142	07	55	dr		X			55	Gal	D001
2.			389								110		F003
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

Keep Away From Sparks of Flames.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① [signature] — Date Shipped MO. DAY YEAR: 7 08 82

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1: 1283 1047

Transporter Signature ② [signature] — Date(s) Received: 07 08 82

Subsequent Transporter Vehicle I.D. No's

Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ [signature] — ☒ Accepted ☐ Rejected — Date Received: 7 9 82

Facility Site EPA I.D. Number: IND 016360265

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed? ☐ Yes ☒ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800—292-4706 OR OUT-OF-STATE AT 517—373-7660 AND THE NATIONAL RESPONSE CENTER AT 800—424-8802 24 HOURS PER DAY.

TSDF COPY To 210R T-50 6RM 7.9.82

003367

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48171

003370

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
PPG Industries	WID059972935	
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th street		
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154	6. TELEPHONE NUMBER: (414) 764-6000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4,200	Waste Paint	flammable liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE	16. NAME (Print)	17. DATE SHIPPED M D Y
[signature]	D. F. Scudder	7 /6 82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Mr. Frank, Inc.	ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155 st.	
21. CITY, STATE, ZIP CODE: South Holland, Ill.	22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M D Y
[signature]	C.E. MILBURN	7/6/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190	
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319	36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M D Y
[signature]	FDUNFEE	7/6/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211 RT-50
GRM 7-6-82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48173

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
PPG Industries	WID059972935	
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th street		
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154	6. TELEPHONE NUMBER: (414) 764-6000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4550	Waste Paint	flammable liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	48320
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE	16. NAME (Print)	17. DATE SHIPPED M D Y
[signature]	D. F. Scudder	7/14/82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Mr. Frank, Inc.	ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th street	
21. CITY, STATE, ZIP CODE: South Holland, Ill.	22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M D Y
[signature]	[signature]	7/14/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Services	IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190	
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319	36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M D Y
[signature]	FDVNFEE	7/14/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO210 K T-50
6 RM 7.14.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48175

003372

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4900	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	42600
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 7 21 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: TLD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill.
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Dave Voss
25. NAME (Print): Dave Voss
26. Date Accepted: 7 21 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): E DUNFEE
40. Date Accepted: 7 21 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 211 FT-50 GRM 7-21-82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 48178

003573

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
PPG Industries	WID 990720325	
4. P.O. BOX OR STREET ADDRESS		
10600 S 124th St		
5. CITY, STATE, ZIP CODE	6. TELEPHONE NUMBER	
Oak Creek, WIS	(414) 764-1000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
TM	4500	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	27260
					1. Solid 3. Mixture 2. Liquid [ ]	D001 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D029	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Sudler
16. NAME (Print): D.F. Sudler
17. DATE SHIPPED M D Y: 7 19 82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
MK Ferry, Inc.	TNDO95506160
20. P.O. BOX OR STREET ADDRESS	
201 W. 155th St	
21. CITY, STATE, ZIP CODE	22. TELEPHONE NUMBER
South Holland, Ill. 60473	(312) 596-3377
23. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
		7 / 28 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

T021F T-30 6Rail 7-28-82

HAZARDOUS WASTE FACILITY

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	TNDO63025
34. P.O. BOX OR STREET ADDRESS	
P.O. Box 190	
35. CITY, STATE, ZIP CODE	36. TELEPHONE NUMBER
Griffith, IND. 46319	(219) 924-4370
37. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
	FOWLER	8 / 28 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48177

003374

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414)-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4.875	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	40180
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: / /

TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank INC.
19. EPA IDENTIFICATION NO.: [redacted] ILD069586160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): C E MILBURN
26. Date Accepted: 7/26/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DUNFEE
40. Date Accepted: 7/26/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 210 K T-50.
GPM 7.26.82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48176

003375

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
PPG Industries	WID059922935	
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.		
5. CITY, STATE, ZIP CODE: Oak Creek, Wis.	6. TELEPHONE NUMBER: (414)-764-1000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4200	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	37240
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 7 12 82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
MR. Frank Inc.	
20. P.O. BOX OR STREET ADDRESS: 401 W. 15th St.	
21. CITY, STATE, ZIP CODE: South Holland, Ill	22. TELEPHONE NUMBER: (312)-596-3777

23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M D Y
[signature]	Donald N Bull	7 23 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IND063020365
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190	
35. CITY, STATE, ZIP CODE: Griffith, IND 46319	36. TELEPHONE NUMBER: 919-924-1370

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M D Y
[signature]	EDUNFEE	7 23 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 RT-50
GRM 7-23-82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48179

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972435
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis.
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4,800	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	3760
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 7 30 82

TRANSPORTER SECTION

18. COMPANY NAME: MP. Frank, INC.
19. EPA IDENTIFICATION NO.: TLD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CO[illegible]: South [illegible], Ill.
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

[illegible] indicated quantity(ies) has (have) been accepted [illegible]edge that delivery shall be made to the facility

[illegible] (Print): Milburn
26. Date Accepted M D Y: 7 30 82

[illegible] quantity(ies) has (have) been accepted [illegible] delivery shall be made to the facility

28. EPA IDENTIFICATION NO.:
31. Date Accepted M / D / Y

-50
30.82

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND011130265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FOUNFEE
40. Date Accepted M D Y: 7 30 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

003576

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48180

003377

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059979435
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 17th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W		Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	41100
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Schulder
17. DATE SHIPPED M D Y: 8 12 82

TRANSPORTER SECTION

18. COMPANY NAME: Air Trans Inc
19. EPA IDENTIFICATION NO.: [illegible]
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [illegible]
26. Date Accepted M D Y: 8 12 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.:
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (414) 924-4270
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DUNFEE
40. Date Accepted M / D / Y: 8 12 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0211RT-50
6PM 8-2-82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48181

003570

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID05997935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4,900	Waste Paint	Flammable Liquid	UN 1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	[illegible]
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 8 14 82

TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK INC.
19. EPA IDENTIFICATION NO.: ILD061506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): C.E. Milborn
26. Date Accepted M D Y: 8 4 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016306165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 110
35. CITY, STATE, ZIP CODE: Griffith, IND 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDVNFEE
40. Date Accepted M D Y: 8 4 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 211 R T-50
61 M 8.4.82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 48186

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WIDOS 991171925
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: 414-761-1000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/M		WASTE Pilot	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	40#
					1. Solid 3. Mixture 2. Liquid [ ]	F005 D001 D035	
					1. Solid 3. Mixture 2. Liquid [ ]	D001	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 8 6 82

TRANSPORTER SECTION

18. COMPANY NAME: MP Trucking, Inc.
19. EPA IDENTIFICATION NO.: TXD066966460
20. P.O. BOX OR STREET ADDRESS: 201 N. 155 th Street
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: 312-596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Dan Vos.
26. Date Accepted M D Y: 8 12 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND 000 816 694
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 46319
36. TELEPHONE NUMBER: 219-924-7320
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDVNT-EE
40. Date Accepted M D Y: 8 16 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211 F T-50
GBM 8.6.82

003519

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 48190

003380

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: 414-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	5,000	WASTE SOLVENT NOS	Flammable Liquid	NA1993	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	26040
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 8/17/82

TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD064506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: 312-596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Michael Martin
26. Date Accepted M D Y: 8/17/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302[illegible]
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: Griffith, IND 46319
36. TELEPHONE NUMBER: 219-924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FOUNFEZ
40. Date Accepted M D Y: 8/17/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211K T-50
GRM 8.17.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48189

003381

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-4000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4,900	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	40660
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 8 16 82

TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155 St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): C E MILBURN
26. Date Accepted M D Y: 8/16/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND0[illegible]
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FD UNFEE
40. Date Accepted M / D / Y: 8/16/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 211 K T-50
6PM 8.16.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
B/R 7823
A 48188

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
PPG Industries	WID 059 127 785	
4. P.O. BOX OR STREET ADDRESS: 10900 S. 13th St.		
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154	6. TELEPHONE NUMBER: (414) 764-1600	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/M	4,100	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	39110
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 8/12/82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
MR. Frank, Inc.	ILD 984 506 160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.	
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473	22. TELEPHONE NUMBER: (312) 596-3370
23. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M D Y
[signature]	C.E. Milburn	8 13 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IND 063 026 5
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190	
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319	36. TELEPHONE NUMBER: (219) 924-1370
37. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M D Y
[signature]	EDWEE	8/13/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 203 E. T-50 6PW
8-13-82

HAZARDOUS WASTE FACILITY

0033882

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 48193

003583

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059172235
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	5000	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	40120
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 8 23 82

TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: 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: 8 23 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219) 924-4570
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted M D Y: 8 23 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 RT-50 GRM
8-23-82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48192

003584

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059970935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10500 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4,500	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	27920
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 8/20/82

TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank Inc
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Rich Antis
26. Date Accepted M D Y: 8/20/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND063[illegible]
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted M D Y: 8/20/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 211 RT-50
GPM 8.20.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48194

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID[illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 18th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	5,000	Waste Solvent NOS	Flammable Liquid	NA 1993	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	55[illegible]
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 8 24 82

TRANSPORTER SECTION

18. COMPANY NAME: MR Frank Inc.
19. EPA IDENTIFICATION NO.: ILD[illegible]
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Michael Martin
25. NAME (Print): Michael Martin
26. Date Accepted: 8/24/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND[illegible]
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: FDunfee
39. NAME (Print): FDUNFEE
40. Date Accepted: 8/24/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 211R T-50
GPM 8.24.82

HAZARDOUS WASTE FACILITY

003385

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48198

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: [illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4500	WASTE SOLVENT NOS	Flammable Liquid	NA 1993	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	36640
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D. F. Scudder
17. DATE SHIPPED M D Y: 8/31/82

TRANSPORTER SECTION

18. COMPANY NAME: MR Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print):
26. Date Accepted M D Y: 8/31/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DUNFEE
40. Date Accepted M D Y: 8 31 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 K.T-50
6PM 8-31-82

HAZARDOUS WASTE FACILITY

003386

Wisconsin Statutes 144
FORM 4400-66 9-80

A 48197

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972735
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th. St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	5000	WASTE PAINT	Flammable Liquid	UN 1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	29600
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Sudder
17. DATE SHIPPED M D Y: 8 30 82

TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: IND069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th. St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [signature]
26. Date Accepted: 8/30/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302655
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: Griffith, Ind 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted M D Y: 8 30 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 R 7-50
GPM 8.30.82

003387

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
B1R 79023
A 48196

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID0099779935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4500	WASTE PAINT	Flammable Liquid	UN 1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	37080
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 8/27/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gary Druen
26. Date Accepted M D Y: 8/27/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): EDUNFEE
40. Date Accepted M D Y: 8/27/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO204R T-50 6PM
8.30.82

003388

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149002

003389

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
PPG Industries	WIDOC7777135	
4. P.O. BOX OR STREET ADDRESS		
10800 S 13th St.		
5. CITY, STATE, ZIP CODE	6. TELEPHONE NUMBER	
Oak Creek, Wis. 53154	(414)-766-1000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/M	4,900	Waste Solvent NOS	Flammable Liquid	NA1993	1. Solid 3. Mixture [X] 2. Liquid	F03 F005	36600
					1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature] 16. NAME (Print): D.F. Schmidt 17. DATE SHIPPED M D Y: 9 1 82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
MR. FRANK, INC.	ILD069506160
20. P.O. BOX OR STREET ADDRESS	
901 N. 155th St.	
21. CITY, STATE, ZIP CODE	22. TELEPHONE NUMBER
South Holland, Ill. 60473	(312)-596-3377

23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
[signature]	C E Milburn	9/8/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IND016-30165
34. P.O. BOX OR STREET ADDRESS	
P.O. Box 190	
35. CITY, STATE, ZIP CODE	36. TELEPHONE NUMBER
Griffith, Ind. 46319	(219)-924-1370

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
[signature]	I-DUNFEE	9/8/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0210 K T-50
GRM 9.8.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48200

003390

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: O. K. Creek, Wis.
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	5000	Waste Paint	Flammable Liquid		1. Solid 3. Mixture 2. Liquid [2]	F003 F005	41720
			[illegible]		1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 9 13 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc
19. EPA IDENTIFICATION NO.: IND069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [illegible]
26. Date Accepted M / D / Y: 9 / 3 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND0163-265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): EDUNEE
40. Date Accepted M / D / Y: 9 3 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 205 RT-50
GRM 9.3.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149008

003391

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059797935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6100

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4460	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [X]	F003 F005	261-0
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007 D008	
					1. Solid 3. Mixture 2. Liquid [ ]	D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Sudder
17. DATE SHIPPED M D Y: 9/20/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [signature]
26. Date Accepted M D Y: 09/20/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): EDUNFEE
40. Date Accepted M D Y: 9/20/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 211 ET-50
GRM 9.20.82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149010

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059970935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4600	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [x]	F003 F005	39140
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007 D008	
					1. Solid 3. Mixture 2. Liquid [ ]	D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 9/24/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [signature]
26. Date Accepted: 9/24/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302765
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FOUNFEE
40. Date Accepted: 9/24/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 210 R T-50
GRM 9.24.82

HAZARDOUS WASTE FACILITY

003692

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149011

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-1000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4200	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	[illegible]
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Snyder
17. DATE SHIPPED M D Y: 9/27/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069566160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312)-596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gary Drueen
26. Date Accepted: 9/27/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDN NFEE
40. Date Accepted: 9/27/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210 FT-50
GRM 9.27.82

PPG INDUSTRIES

PPG INDUSTRIES, INC./10800 SO. 13TH STREET/OAK CREEK, WISCONSIN 53154/AREA 414/764-6000

July 27, 1982

Dept. of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, WI 53707

re: Exception Report - Wis. Manifest A48176

Please be advised that on Wisconsin Manifest number A48176, dated 7/23/82, the Transporter EPA identification number was inadvertently left off.

This manifest listed PPG Industries as the Generator (of Waste Paint), Mr. Frank Inc. as the Transporter, and American Chemical Service as the Hazardous Waste Facility. The Transporter section should have listed the EPA identification number of Mr. Frank Inc. as ILD069506160. A corrected copy of the manifest is enclosed.

We regret this oversight, and hope it has not caused any inconvenience.

Sincerely,

D.F. Scudder
Environmental Engineer

cc: Mr. Frank Inc.
201 West 155th Street
South Holland, Illinois 60473

American Chemical Service
P.O. Box 190
Griffith, Indiana 46319

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149014

003395

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059920935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4500	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [X]	F003 F005	[illegible]
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 10 14 82

TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312)-596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [illegible]
26. Date Accepted: M 10 18 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND 016300165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 170
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219)-924-4320
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted: 10 4 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 210 R 7-50 GRM
10.4.82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149015

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
~~T/W~~	4600	~~Waste Resin Solution~~	~~Flammable Liquid~~	~~[illegible]~~	1. Solid 3. Mixture 2. Liquid [3]	~~D001~~	
T/W		WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	D006 D007 D008	39490
					1. Solid 3. Mixture 2. Liquid [ ]	D004 F003 F005	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D. F. Scudder
17. DATE SHIPPED M D Y: 10 14 82

TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Rich Antis
26. Date Accepted: 10 14 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F D UNFEE
40. Date Accepted: 10/5/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TB210 RT-50
GRM 10.5.82

003370

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149017

003397

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID0[illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4600	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [X]	F003 F005	37500
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007 D008	
					1. Solid 3. Mixture 2. Liquid [ ]	D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Snider
17. DATE SHIPPED M D Y: 10 18 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ZLD009506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Rich Antis
26. Date Accepted M / D / Y: 10 / 8 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016307265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted M / D / Y: 10 8 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 210 TC T-50
GRM - 10.8.82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149018

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) - 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	1,100	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	4,400
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 10/11/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) - 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Rick Antis
26. Date Accepted M 10 D 19 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) - 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): F DUNFEE
40. Date Accepted: 10 11 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 FT-50
GAM 10.11.82

0033593

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149020

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: J&C Industries
2. EPA IDENTIFICATION NO.: WID 077977135
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis.
6. TELEPHONE NUMBER: (414)-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4550	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture [3] 2. Liquid	F003 F005	41,370
					1. Solid 3. Mixture [ ] 2. Liquid	D001 D007	
					1. Solid 3. Mixture [ ] 2. Liquid	D008 D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: D.F. Scudlet
16. NAME (Print): D.F. Scudlet
17. DATE SHIPPED M D Y: 10/5/82

TRANSPORTER SECTION

18. COMPANY NAME: MR. Trunk, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Michael Martin
25. NAME (Print): Michael Martin
26. Date Accepted M 10 D 15 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016300365
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219)-924-4570
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: T Dunfee
39. NAME (Print): T DUNFEE
40. Date Accepted M 10 D 15 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 203 E T-50
GRM 10.15.82

6668

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149021

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4850	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [X]	F003 F005	48600
					1. Solid 3. Mixture 2. Liquid [ ]	D001 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Sculler
17. DATE SHIPPED M D Y: 10 18 82

TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Dave Voss
26. Date Accepted: 10/18/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted: 10/18/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 211 RT-50

003400

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149029

003401

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059974935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, WIS 53154
6. TELEPHONE NUMBER: (414)-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4850	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	[illegible]
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. *I also certify that the information contained herein is true, accurate and complete.*

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 11/8/82

TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312)-596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Dan Wilbert
26. Date Accepted: 11/8/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUN FEE
40. Date Accepted: 11/8/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211RT-50 GRM
11.8.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149027

003402

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
PPG INDUSTRIES	WID059972935	
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th Street		
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154	6. TELEPHONE NUMBER: (414) - 764-6000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4/800	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture [2] 2. Liquid	F003 F005	40/40
					1. Solid 3. Mixture [ ] 2. Liquid	D006 D007	
					1. Solid 3. Mixture [ ] 2. Liquid	D008 D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 11/2/82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Mr. Frank, Inc.	ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street	
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473	22. TELEPHONE NUMBER: (312) - 596-3377
23. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
[signature]	[illegible]	11/2/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190	
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319	36. TELEPHONE NUMBER: (219) - 924-4370
37. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
[signature]	F DUNFEE	11/2/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0210 FT-50
EVEM 11.2.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149025

003403

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
PPG INDUSTRIES	WID059972935	
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street		
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154	6. TELEPHONE NUMBER: (414) 764-6000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	440	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	5117
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 10 / 14 / 82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Mr. Frank, Inc.	ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street	
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473	22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
[signature]	[illegible]	10 / 14 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190	
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319	36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
[signature]	EDUNFEE	10 / 26 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY [ ]

HAZARDOUS WASTE FACILITY

T0210 KT-50
GKM 10.26.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149023

003404

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
PPG INDUSTRIES	WID059972935	
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street.		
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154	6. TELEPHONE NUMBER: (414) - 764-6000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4800	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	37170
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 10/22/82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Mr. Frank, Inc.	ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street	
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473	22. TELEPHONE NUMBER: (312) - 596-3377
23. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted
Michael Martin	Michael Martin	10/22/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190	
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319	36. TELEPHONE NUMBER: (219) - 924-4370
37. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M D Y
[signature]	EDUN HEE	10 22 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 210 KT-50
EKM 10-22-82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149031

003405

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
PPG Industries	WIDO57722135	
4. P.O. BOX OR STREET ADDRESS		
1800 E 13th St.		
5. CITY, STATE, ZIP CODE	6. TELEPHONE NUMBER	
Oak Creek, Wis. 53154	(414)-764-1600	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	5500	Waste Solvent NOS	Flammable Liquid	NA1993	1. Solid 3. Mixture 2. Liquid [2]	1203 1205	42400
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 11/11/82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
W.R. Frank, Inc.	ILD049524160
20. P.O. BOX OR STREET ADDRESS	
301 W. 155th St.	
21. CITY, STATE, ZIP CODE	22. TELEPHONE NUMBER
South Holland, Ill. 60473	(312)-596-3377

23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M D Y
[signature]	[illegible]	11 11 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IND046304653
34. P.O. BOX OR STREET ADDRESS	
P.O. Box 120	
35. CITY, STATE, ZIP CODE	36. TELEPHONE NUMBER
Griffith, IND. 46319	(219)-924-4370

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M D Y
[signature]	EDUNFEE	11 11 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210K
T-50 G/M 11/11/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149033

003400

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13 th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	5000	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	[illegible]
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Sodder
17. DATE SHIPPED M D Y: 11/15/82

TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 N. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312)-596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Miguel Garcia
26. Date Accepted M D Y: 11/15/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302965
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted M D Y: 11/15/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 211K T-50 GPM
11.15.82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149032

003407

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID 005997 1935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13 th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 762-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	54 SV	Waste Paint	Flammable Liquid	~~F~~ UN ~~F~~ 1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	4/4/[illegible]
				~~D~~ ~~D~~	1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
				~~D~~ ~~D~~	1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D. F. Scudder
17. DATE SHIPPED M D Y: 11/13/82

TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069526160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155 th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print):
26. Date Accepted M D Y: ~~11/13/82~~

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016302 65
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): E DUNFEE
40. Date Accepted M D Y: 11 12 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 211 K T-50
GRM 11.12.82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149035

003408

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059970935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4,600	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	[illegible]
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 11/19/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Rick Antis
26. Date Accepted: M / D / Y 11/19/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DUNFEE
40. Date Accepted: 11/19/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO210KT-50
GRM 11-19-82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
B1X 3113
A 149036

003409

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis.
6. TELEPHONE NUMBER: (414)-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4,600	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	4,200
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 11/22/82

TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th ST.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [signature]
26. Date Accepted: M / D / Y 2

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDVNFEE
40. Date Accepted: 11/22/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 FT-50
GRM 11.22.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149038

003410

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID05 7913135
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 10500 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4,000	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture [X] 2. Liquid	F003 F005	24580
					1. Solid 3. Mixture [ ] 2. Liquid	D001 D007	
					1. Solid 3. Mixture [ ] 2. Liquid	D008 D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 11/30/82

TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD064506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print)
26. Date Accepted M 11/30/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: Allied Chemical Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Gri, 16th, IND. 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: R Hunter
39. NAME (Print): R DUNTER
40. Date Accepted M 11/30/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 211K T-50
GRM 11-30-82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149037

003411

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID0[illegible]4535
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St. Oak Creek
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 764-1000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/N	4,800	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	41,[illegible]
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D. F. Scudder
17. DATE SHIPPED M D Y: 11 17 82

TRANSPORTER SECTION

18. COMPANY NAME: M.K. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD066[illegible]
20. P.O. BOX OR STREET ADDRESS: 301 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Robert Perkins
25. NAME (Print): Robert Perkins
26. Date Accepted M 12 D 17 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND0[illegible]
34. P.O. BOX OR STREET ADDRESS: P.O. Box 198
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F Dunfee
40. Date Accepted M 12 D 24 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 211K T-50
GRM 11.24.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149043

003412

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059979935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 764-6100

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4550	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	[illegible]
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D. F. Scudder
17. DATE SHIPPED M D Y: 12/10/82

TRANSPORTER SECTION

18. COMPANY NAME: MR Frank, Inc.
19. EPA IDENTIFICATION NO.: IND069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Rick Antis
26. Date Accepted: M / D / Y 12/10/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016307965
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DUNFEE
40. Date Accepted: 12/10/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0205KT-50
GRM 12.10.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149042

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
~~[illegible]~~ PPG Industries	WID 980 994 435	
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.		
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154	6. TELEPHONE NUMBER: (414) 764-6000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
TAN	5,000	Waste Solvent mos	Flammable Liquid	NA 1993	1. Solid 3. Mixture [3] 2. Liquid	[illegible]	[illegible]
					1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Schmitt
17. DATE SHIPPED: M 12 D 1 Y 82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Hill Trans, Inc.	ILD 079 616 40
20. P.O. BOX OR STREET ADDRESS: 201 N. 155th St.	
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473	22. TELEPHONE NUMBER: (312) 596-3377

23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted
[signature]	Rich Hintz	M 12 D 7 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IND 048 302 657
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190	
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319	36. TELEPHONE NUMBER: (219) 924-4330

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted
[signature]	P DUNFEE	12 9 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 205 KT-50
GEM 12-9-82

HAZARDOUS WASTE FACILITY

0034 13

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149041

00341 4

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID987971933
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6100

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/V	4400	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	37440
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007 D009	
					1. Solid 3. Mixture 2. Liquid [ ]	D001	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.T. Scudder
17. DATE SHIPPED: M 12 D 15 Y 82

TRANSPORTER SECTION

18. COMPANY NAME: MR. T-TANK, INC.
19. EPA IDENTIFICATION NO.: ILD047516160
20. P.O. BOX OR STREET ADDRESS: 201 W. 153rd St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Dave Voss
26. Date Accepted: M 12 D 8 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IUD064030365
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): EDWIGGE
40. Date Accepted: M 12 D 8 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 KT-50
GRM 12.8.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149040

003415

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID05[illegible]35
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 16800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4400	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	[illegible]	[illegible]
					1. Solid 3. Mixture 2. Liquid [ ]	[illegible]	
					1. Solid 3. Mixture 2. Liquid [ ]	[illegible]	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Sandler
17. DATE SHIPPED M D Y: 12 16 82

TRANSPORTER SECTION

18. COMPANY NAME: MR. Trunk, Inc.
19. EPA IDENTIFICATION NO.: ILD[illegible]960
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [illegible]
26. Date Accepted M D Y: 12 16 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219)-924-7510
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DUNFEE
40. Date Accepted: 12/8/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 RT-50
GEM 12.6.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149039

003416

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID05[illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	5000	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	41470
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D. F. Scudder
17. DATE SHIPPED M D Y: 12 13 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Michael Martin
25. NAME (Print): Mike Martin
26. Date Accepted: 12 13 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016307165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted: 12 13 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 2111 K T-50
GRM 12.3.82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149044

0034 17

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID007777735
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 10700 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, WIS 53154
6. TELEPHONE NUMBER: (414)-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
TW	4,100	Waste Paint	Flammable Liquid	UN 1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	37,720
					1. Solid 3. Mixture 2. Liquid [ ]	D001 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D001 D007	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 12 18 82

TRANSPORTER SECTION

18. COMPANY NAME: MR. TANK, INC.
19. EPA IDENTIFICATION NO.: IID069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [illegible]
26. Date Accepted M / D / Y: 12 18 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016303165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature] / FOUNTEE
39. NAME (Print)
40. Date Accepted: 12 23 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 211 KT-50
GRM 12.13.82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149045

003418

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059979935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4575	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	[illegible]
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D. F. Sandler
17. DATE SHIPPED M D Y: 12/15/82

TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Rich Antis
26. Date Accepted: 12/15/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016307165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted: 12/15/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 206KT-50 GRM 12.15.82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 149049

003419

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID005977935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/N	4550	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	[illegible]
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 12/17/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312)-596-3374
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Rich Antis
26. Date Accepted: M 12 19 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): PDUNE-EE
40. Date Accepted: M / D / Y 12/17/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 R T-50
GRM 12-17-82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49387

003420

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4750	Waste Paint	Flammable Liquid	UN1266 ~~UN1263~~	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	42220
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 1 15 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [illegible]
26. Date Accepted M D Y: 1 15 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I ackhowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDU WEEP
40. Date Accepted M D Y: 1 15 81

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 K T-50
GRM 1/5/82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49390

003421

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	2910	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid ☐	F003 F005	26220
					1. Solid 3. Mixture 2. Liquid ☐	D006 D007	
					1. Solid 3. Mixture 2. Liquid ☐	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 1/12/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [illegible]
26. Date Accepted M D Y: 1/12/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F D [illegible]
40. Date Accepted M D Y: 1/12/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 K T-50 GRM
1/12/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49389

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972735
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4750	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture [2] 2. Liquid	F003 F005	47500
					1. Solid 3. Mixture [ ] 2. Liquid	D006 D007	
					1. Solid 3. Mixture [ ] 2. Liquid	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M 1 D 14 Y 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print):
26. Date Accepted: M 1 D 14 Y

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print): EDWARDS
40. Date Accepted: M 1 D 14 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210K T-50
GRM 1/14/82

003422

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49393

003423

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WIB059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4.725	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	47,540
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 1 12 6 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: C.E. Milburn
25. NAME (Print): C.E. MILBURN
26. Date Accepted M D 6 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: Bob Mauck
39. NAME (Print): BOB MAUCK
40. Date Accepted M 1 D 26 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 K
T-50 6RM 1/26/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 49392

003424

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4800	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	42700
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M 1 D 21 Y 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Dave Vera
25. NAME (Print): Dave Vera
26. Date Accepted: M 1 D 21 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: EDUNEE
39. NAME (Print): EDUNEE
40. Date Accepted: M 1 D 21 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210 R T-50
GRM 1/21/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49391

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972735
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) - 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4.750	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	40170
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 1/19/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) - 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): C.E. MILBURN
26. Date Accepted: M 1/19/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DUNEE
40. Date Accepted: 1/19/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 211 R T-50
GRM 1/29/82

HAZARDOUS WASTE FACILITY

003425

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 49394

003426

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972735
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4/550	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	2120
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M 1 D 25 Y 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Tich Curtis
26. Date Accepted: M 1 D 25 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: Bob Mauck
39. NAME (Print): Bob Mauck
40. Date Accepted: M 1 D 28 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 RT-50
GRM 1/29/82

DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

A 49395

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
PPG INDUSTRIES	WID059972735	Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street		
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154	6. TELEPHONE NUMBER: (414) 764-6000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4755	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	41020
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder

16. NAME (Print): D.F. Scudder

17. DATE SHIPPED M D Y: 2 12 82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Mr. Frank Inc.	ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street	
21. CITY, STATE, ZIP CODE: South Holland, Illinois	22. TELEPHONE NUMBER: (312) 596-3377

23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M D Y
[signature]	M. K. GARCIA	2 12 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M D Y
		02 02 82

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American chemical Service	IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190	
35. CITY, STATE, ZIP CODE: Griffith, Indiana	36. TELEPHONE NUMBER: (219) 924-4370

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M D Y
[signature]	BOB MAUCK	02 02 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M D Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY [ ]

HAZARDOUS WASTE FACILITY

To211K-T-50
GRM 2/2/82

Q03427

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49396

003428

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4800	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	42900
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 2 14 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [signature]
26. Date Accepted M D Y: 2 14 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: BOB MAUCK
39. NAME (Print): BOB MAUCK
40. Date Accepted M D Y: 2 14 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 210 R T-50
GRM 2/4/82

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 49397

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4900	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	40640
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

16. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 2 19 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print)
26. Date Accepted M / D / Y

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME: M R Frank Inc
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE: [signature]
30. NAME (Print)
31. Date Accepted M D Y: 2 16 82

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: Bob Mauck
39. NAME (Print): Bob Mauck
40. Date Accepted: 2 19 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
[illegible] 8094
Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 K T-50
6RM

HAZARDOUS WASTE FACILITY

003429

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48107

0034301

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4800 gals	Waste Paint	Flammable Liquid	UN1263	1. Solid, 3. Mixture 2. Liquid [2]	F003 F005	21120
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 2 11 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Robert E. Perkins
25. NAME (Print): Robert E. Perkins
26. Date Accepted M D Y: 2 11 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: Bob Mauck
39. NAME (Print): Bob Mauck
40. Date Accepted M D Y: 2/11/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 211K T-50
GRM 2/11/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen— press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48110

003431

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Services - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4,800 GALS	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	40260
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 2/22/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Robert Perkins
26. Date Accepted M D Y: 2/22/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE: [signature]
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): Michael J. Burgs
40. Date Accepted M / D / Y: 2/22/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 K T-50
GRM 2/22/82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48109

0034332

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4750	Waste Paint	Flammable Liquid	Un1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	4700
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 2 18 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print):
26. Date Accepted M / D / Y:

I hereby certify (that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: B&B Mack
39. NAME (Print): B&B MACK
40. Date Accepted M / D / Y: 2 19 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0210 R T-50
GKM 2/18/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48108

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4900	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	40700
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 2/16/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print):
26. Date Accepted M D Y: 2/16/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: Bob Mauck
39. NAME (Print): BOB MAUCK
40. Date Accepted M D Y: 02/16/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 K T-50
GRM

003433

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49361

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to: American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4,600	Waste Resin Mixture Flammable Liquid	Flammable	UN1866	1. Solid 3. Mixture 2. Liquid [2]	R003 R005	41740
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: 12/29/81

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Rich Antis
26. Date Accepted M D Y: 12/29/81

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): RON FEE
40. Date Accepted M D Y: 12/29/81

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 R
T-50 GRM 12/29/81

HAZARDOUS WASTE FACILITY

003434

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49360

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: transportation by Mr. Frank to: American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	5,200	Waste Resin Mixture Flammable Liquid	Flammable	UN1866	1. Solid 3. Mixture 2. Liquid [2]	R003 R005	45760
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Timian
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: 12/21/81

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Robert Perkins
25. NAME (Print): Robert Perkins
26. Date Accepted M 12 D 21 Y 81

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): EDWARDS
40. Date Accepted M 12 D 22 Y 81

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 211K T-50
GEM 12/22/81

0034 35

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48115

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
PPG INDUSTRIES	WID059972935	Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street		
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154	6. TELEPHONE NUMBER: (414) 764-6000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	1750	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture [2] 2. Liquid	F003 F005	24660
					1. Solid 3. Mixture [ ] 2. Liquid	D006 D007	
					1. Solid 3. Mixture [ ] 2. Liquid	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M D Y 3 15 82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Mr. Frank Inc.	ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street	
21. CITY, STATE, ZIP CODE: South Holland, Illinois	22. TELEPHONE NUMBER: (312) 596-3377

23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
[signature]	[illegible]	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

TO 210 F T-50
GRM 3/5/82

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190	
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319	36. TELEPHONE NUMBER: (219) 924-4370

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
[signature]	[illegible]	3 / 5 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TIS WASTE FACILITY

0034 36

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
BIA 62375
A 48114

003437

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4300	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	38860
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.P. Scudder
17. DATE SHIPPED M D Y: 3 1 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [illegible]
26. Date Accepted M D Y: 3 3 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302655
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): [illegible]
40. Date Accepted M D Y: 3 3 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY:

HAZARDOUS WASTE FACILITY

TO 210 R T-50
GRM 3/3/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48113

003433

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	11721	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	46750
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M 3 D 1 Y 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [illegible]
26. Date Accepted: M 3 D 1 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDVN FEE
40. Date Accepted: M 3 D 1 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 204 KT-50
GRM 3/1/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 48112

003439

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4900	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	41590
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 2/26/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print):
26. Date Accepted M D Y: 2/26/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M D Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDVNFEE
40. Date Accepted M D Y: 2/26/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M D Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 KT-50 GRM 2/26/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48111

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4000	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	36220
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 2 12 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Mark Carlin
26. Date Accepted M 2 D 13 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): EDWARD
40. Date Accepted M 2 D 13 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 R T-50
GEM 2/24/82

003440

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48117

003441

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	3250	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture [2] 2. Liquid	F003 F005	27540
					1. Solid 3. Mixture [ ] 2. Liquid	D006 D007	
					1. Solid 3. Mixture [ ] 2. Liquid	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 3/10/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Miguel Garcia
25. NAME (Print): Miguel Garcia
26. Date Accepted M D Y: 3/10/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

To 210 RT-50 GRAY
HAZARDOUS WASTE FACILITY 3/10/82

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): [illegible]
40. Date Accepted M D Y: 3/10/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
31268574 3-8-82
A 48116

003442

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	#900	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	[illegible]
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 3/8/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West ~~115~~ 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [illegible]
26. Date Accepted M D Y: 3/8/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): [illegible]
40. Date Accepted: 3/8/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210K T-50
GRM 3/8/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48119

003443

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
PPG INDUSTRIES	WID059972935	Transported by Mr. Frank to
4. P.O. BOX OR STREET ADDRESS		American Chemical Service – on our P.O.#19001
10800 South 13th Street		
5. CITY, STATE, ZIP CODE	6. TELEPHONE NUMBER	
Oak Creek, WI 53154	(414) 764-6000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4750	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	34720
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE

16. NAME (Print): D.F. Scudder

17. DATE SHIPPED M D Y: 3/15/82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Mr. Frank Inc.	ILD069506160
20. P.O. BOX OR STREET ADDRESS	
155 201 West 115th Street	
21. CITY, STATE, ZIP CODE	22. TELEPHONE NUMBER
South Holland, Illinois	(312) 596-3377

23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IND01630265
34. P.O. BOX OR STREET ADDRESS	
P.O. Box 190	
35. CITY, STATE, ZIP CODE	36. TELEPHONE NUMBER
Griffith, Indiana	(219) 924-4370

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
	EDUN FEE	3/15/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 RT-50
GRM 3/15/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48118

0034444

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank To American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	1750	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture [2] 2. Liquid	F003 F005	3???
					1. Solid 3. Mixture [ ] 2. Liquid	D006 D007	
					1. Solid 3. Mixture [ ] 2. Liquid	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 3 11 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print):
26. Date Accepted M / D / Y:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print): F DUNFEE
40. Date Accepted M D Y: 3 12 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 RT-50
GRM 3/12/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 48123

003445

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
PPG INDUSTRIES	WID059972935	Transported by Mr. Frank to
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street		American Chemical Service - on our P.O.#19001
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154	6. TELEPHONE NUMBER: (414) - 764-6000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4 / 00	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture **2** 2. Liquid	F003 F005	2750
					1. Solid 3. Mixture ☐ 2. Liquid	D006 D007	
					1. Solid 3. Mixture ☐ 2. Liquid	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M D Y 3 12 82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Mr. Frank Inc.	ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West ~~115~~ 133th Street	
21. CITY, STATE, ZIP CODE: South Holland, Illinois	22. TELEPHONE NUMBER: (312) - 596-3377
23. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
[signature]	[illegible]	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190	
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319	36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
[signature]	FD WARE	3 / 31 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0211 T-50
GRM 3/24/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
B/#69336
A 48122

003446

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4,800	Waste Paint	Flammable Liquid	UN1263 NNXRX	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	37980
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D. F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M 3 D 22 Y 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: C E Wilburn
25. NAME (Print): C E WILBURN
26. Date Accepted: M 3 D 22 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

To 211K T-50
GRM 3/22/82

HAZARDOUS WASTE FACILITY

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F Dunfee
39. NAME (Print): F DUNFEE
40. Date Accepted: 3 22 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

A 48121

003447

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: FPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4600	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	37260
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M 3 D 1 Y 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): GARY BRATH
26. Date Accepted: M 3 D 1 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): [illegible]
40. Date Accepted: M 3 D 19 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 21KT-50
GRM 3/22/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 48120

003448

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10600 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4750	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	37420
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 3/17/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print)
26. Date Accepted M / D / Y: 3/17/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print)
40. Date Accepted M / D / Y: 3/17/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0210 R T-50
GRM 3/18/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48125

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4900	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	4040
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 3/30/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West ~~115~~ 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Michael Martin
26. Date Accepted: 3/30/81

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American chemical service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): [signature]
40. Date Accepted: 3/30/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 210 R T-SO
GRM 3.30.82

HAZARDOUS WASTE FACILITY

003449

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48124

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to american Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4550	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture [2] 2. Liquid	F003 F005	41--
					1. Solid 3. Mixture [ ] 2. Liquid	D006 D007	
					1. Solid 3. Mixture [ ] 2. Liquid	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 3 26 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [illegible]
26. Date Accepted M D Y: 3 26 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M D Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): EDWARDS
40. Date Accepted M D Y: 3 26 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M D Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210 ET-50 GRM 3/26/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48127

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Fo. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4550	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	34560
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 4/5/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West ~~115th~~ 155 Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Rich Antis
26. Date Accepted M D Y: 4/5/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): DUNFEE
40. Date Accepted M D Y: 4/5/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 R T-50
GRM 4.5.82

HAZARDOUS WASTE FACILITY

003451

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 43126

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4,500	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	45120
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 4 1 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West ~~115th~~ 135 Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Ted Antis
26. Date Accepted M D Y: 4 1 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American chemical service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): [illegible]
40. Date Accepted M / D / Y: 4 / 1 / 8[illegible]

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 211K T-50 GRN
4.1.82

HAZARDOUS WASTE FACILITY

2647000

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
WIR 71337
A 48131

003453

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
PPG INDUSTRIES	WID059972935	Transported by Mr. Frank to
4. P.O. BOX OR STREET ADDRESS		American Chemical Service - on our P.O.#19001
10800 South 13th Street		
5. CITY, STATE, ZIP CODE	6. TELEPHONE NUMBER	
Oak Creek, WI 53154	(414) - 764-6000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4000	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture [2] 2. Liquid	F003 F005	34560
					1. Solid 3. Mixture [ ] 2. Liquid	D006 D007	
					1. Solid 3. Mixture [ ] 2. Liquid	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 4 / 1 /

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Mr. Frank Inc.	ILD069506160
20. P.O. BOX OR STREET ADDRESS	
201 West ~~115~~ 153th Street	
21. CITY, STATE, ZIP CODE	22. TELEPHONE NUMBER
South Holland, Illinois	(312) - 596-3377

23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M D Y
[signature]	GARY PRUFER	4 20 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IND01630265
34. P.O. BOX OR STREET ADDRESS	
P.O. Box 190	
35. CITY, STATE, ZIP CODE	36. TELEPHONE NUMBER
Griffith, Indiana 46319	(219) - 924-4370

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M D Y
[signature]	F DUNFEE	4 20 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 211 RT-50
GRM 4/20/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48130

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Services - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	5,000	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture [2] 2. Liquid	F003 F005	40,000
					1. Solid 3. Mixture [ ] 2. Liquid	D006 D007	
					1. Solid 3. Mixture [ ] 2. Liquid	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 4 / 15 / 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Michael Martin
25. NAME (Print): MICHAEL MARTIN
26. Date Accepted M / D / Y: 4 / 15 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F Dunfee
39. NAME (Print): F DUNFEE
40. Date Accepted M / D / Y: 4 / 15 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 RT-50 GRM 4.15.82

003434

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 48129

003435

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	5,000	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	42220
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M 4 D 13 Y 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Robert Perkins
25. NAME (Print): Robert PERKINS
26. Date Accepted: M 4 D 13 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: Robert Perkins
39. NAME (Print): Robert PERKINS
40. Date Accepted: M 4 D 13 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 211KT-50 GLM 4.13.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48128

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	PPG INDUSTRIES
2. EPA IDENTIFICATION NO.	WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS	Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS	10800 South 13th Street
5. CITY, STATE, ZIP CODE	Oak Creek, WI 53154
6. TELEPHONE NUMBER	(414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	5,000	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	4146
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE	16. NAME (Print)	17. DATE SHIPPED M D Y
D.F. Scudder	D.F. Scudder	4 7 82

TRANSPORTER SECTION

18. COMPANY NAME	Mr. Frank Inc.
19. EPA IDENTIFICATION NO.	ILD069506160
20. P.O. BOX OR STREET ADDRESS	201 West ~~115th~~ 155 Street
21. CITY, STATE, ZIP CODE	South Holland, Illinois
22. TELEPHONE NUMBER	(312) 596-3377
23. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.
[illegible]	

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y
		4 / 7 / 82

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	American Chemical Service
33. EPA IDENTIFICATION NO.	IND01630265
34. P.O. BOX OR STREET ADDRESS	P.O. Box 190
35. CITY, STATE, ZIP CODE	Griffith, Indiana 46319
36. TELEPHONE NUMBER	(219) 924-4370
37. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted
[illegible]	FDUNFEE	4 7 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 KT-50
GRM 4.7.82

003450

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 48133

003457

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) - 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4400	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture [2] 2. Liquid	F003 F005	441
					1. Solid 3. Mixture [ ] 2. Liquid	D006 D007	
					1. Solid 3. Mixture [ ] 2. Liquid	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 4/27/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) - 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print)
26. Date Accepted M / D / Y

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) - 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): P DUNREE
40. Date Accepted M 4 D 27 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

ARDOUS WASTE FACILITY

To 211E T-50
Glen 4-27-82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48132

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Services - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4,950	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	39000
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: / /

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West ~~115th~~ 135 TH Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): C.E. MILBURN
26. Date Accepted M D Y: 4/22/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): E DUNEGE
40. Date Accepted: 4/22/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

003453

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
B1 [illegible]
A 48136

003459

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4900	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	41300
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 5 16 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West ~~115th~~ 155 Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [illegible]
26. Date Accepted M D Y: 5 16 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted M D Y: 5 6 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211 K T-50 GRM 5-6-82

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

Wisconsin Statutes 144
FORM 4400-66 9-80

A 48135

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Services - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: 414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	1910	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	4 520
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 5 14 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069306160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): M. F. Garcia
26. Date Accepted M 14 D 18 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

To 210 R T-50
GPM 5.5.82

HAZARDOUS WASTE FACILITY

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: 219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): FOUNFEE
40. Date Accepted M 14 D 18 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

003380

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
[illegible] 7
A 48134

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4500	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	[illegible]
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M 4 D 19 Y 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Dan Vas
26. Date Accepted: M 4 D 19 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): [illegible]
40. Date Accepted: M 4 D 29 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

203 RT-50
CRM 4-28-82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 48137

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Services - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	520	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	45400
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M D Y 5 11 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West ~~115~~ 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print):
26. Date Accepted: M 5 / 11 / 82 Y

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd TRANSPORTER COMPANY NAME: [signature]
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): [signature]
40. Date Accepted: M 5 / 11 / 82 Y

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 TK T-50
GRM 5.11.82

003462

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
B1 R72634
A 48138

003463

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4900	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	43220
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 5/13/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West ~~115th~~ 155 Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Rich Antis
26. Date Accepted M D Y: 5/13/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted M D Y: 5/13/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 204 RT-50
GRM 5.13.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
B/F 73067
A 48140

003464

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	PPG INDUSTRIES
2. EPA IDENTIFICATION NO.	WID059972835
3. COMMENTS/SPECIAL INSTRUCTIONS	Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS	10800 South 13th Street
5. CITY, STATE, ZIP CODE	Oak Creek, WI 53154
6. TELEPHONE NUMBER	(414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4550	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	38400
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE	16. NAME (Print)	17. DATE SHIPPED M D Y
[signature]	D.F. Scudder	5 20 82

TRANSPORTER SECTION

18. COMPANY NAME	Mr. Frank Inc.
19. EPA IDENTIFICATION NO.	ILD069506160
20. P.O. BOX OR STREET ADDRESS	201 West ~~115th~~ 155 Street
21. CITY, STATE, ZIP CODE	South Holland, Illinois
22. TELEPHONE NUMBER	(312) 596-3377
23. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M D Y
[signature]	Rich Antis	5 20 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	American Chemical Service
33. EPA IDENTIFICATION NO.	IND01630265
34. P.O. BOX OR STREET ADDRESS	P.O. Box 190
35. CITY, STATE, ZIP CODE	Griffith, Indiana 46319
36. TELEPHONE NUMBER	(219) 924-4370
37. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M D Y
[signature]	F DUNFEE	5 20 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211R T-50
GRM 5.20.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48139

003405

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Services - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	5000	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	42 24
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 5/18/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West ~~115~~ 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): GARY MUTH
26. Date Accepted M D Y: 5/18/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): [illegible]
40. Date Accepted M D Y: 5/19/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 211RT-50
GRM 5-18-82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48142

003466

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - onour P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4550	Waste Paint	Flammable Liquid	~~[illegible]~~ UN2163	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	37520
				UN1866	1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 5/25/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Mike Garcia
26. Date Accepted M D Y: 5/25/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): RDUNEE
40. Date Accepted M D Y: 5/25/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 210 RT-50 GRM
5.25.82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48141

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	490	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture [2] 2. Liquid	F003 F005	40000
					1. Solid 3. Mixture [ ] 2. Liquid	D006 D007	
					1. Solid 3. Mixture [ ] 2. Liquid	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 5/27/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [illegible]
26. Date Accepted M 5 D 27 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302651
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319 -
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DUNTEE
40. Date Accepted M 5 D 27 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 205K T-50
6PM 5-27-82

003467

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48156

003463

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059472925
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by MR Frank to American Chemical Service
4. P.O. BOX OR STREET ADDRESS: 10500 South 13th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414)-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4800	Waste Paint	Flammable Liquid	UN 1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	39000
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007 D008	
					1. Solid 3. Mixture 2. Liquid [ ]	D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 6 / 1 / 82

TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155 Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312)-596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): C.E. Milburn
26. Date Accepted M / D / Y: 6 / 1 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302 65
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted: 6 / 1 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To204KT-50
GRM 6-1-82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 48158

003469

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID 099720425
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Air Fleet to American Chemical Service
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414)-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/V	4,000	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	40074
					1. Solid 3. Mixture 2. Liquid [ ]	D001 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D003 D001	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 6 3 82

TRANSPORTER SECTION

18. COMPANY NAME: Air Fleet Inc
19. EPA IDENTIFICATION NO.: ILD069566160
20. P.O. BOX OR STREET ADDRESS: 701 East 115 Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312)-596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Robert Perkins
26. Date Accepted M 6 D 3 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302645
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219)-924-4770
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): [illegible]
40. Date Accepted M 6 D 3 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210K
T-50 6RM 6.3.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
B/L 74.35
A 48160

0034770

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID-[illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by IMR Fink Inc - American Chemical Service
4. P.O. BOX OR STREET ADDRESS: 14500 S. 12th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414)-761-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/M	4000	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	39680
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Schilder
17. DATE SHIPPED M D Y: 6 17 82

TRANSPORTER SECTION

18. COMPANY NAME: IMR Fink Inc
19. EPA IDENTIFICATION NO.: ILD[illegible]
20. P.O. BOX OR STREET ADDRESS: 201 West 155 Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312)-[illegible]
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [illegible]
26. Date Accepted M / D / Y: 6 / 17 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: [illegible]
34. P.O. BOX OR STREET ADDRESS: P.O. Box 119
35. CITY, STATE, ZIP CODE: Gary, Indiana 46519
36. TELEPHONE NUMBER: (219)-[illegible]
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): [illegible]
40. Date Accepted M / D / Y: 6 / 19 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 FT-50
GDM 6-23-82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48161

0034771

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
PPG Industries	WID005979335	
4. P.O. BOX OR STREET ADDRESS		
10800 S. 13th. Street		
5. CITY, STATE, ZIP CODE	6. TELEPHONE NUMBER	
Oak Creek, Wis 53154	414-764-6000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/U	4900	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	454
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 6 19 82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Mr. Frank, Inc.	ILD065506160
20. P.O. BOX OR STREET ADDRESS	
201 West 155 St.	
21. CITY, STATE, ZIP CODE	22. TELEPHONE NUMBER
South Holland, Ill.	(312)-596-3377

23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
[signature]	Hank Garcia	6 19 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

To 210 RT-50
GRM 6-9-82

HAZARDOUS WASTE FACILITY

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IND048309365
34. P.O. BOX OR STREET ADDRESS	
P.O. Box 190	
35. CITY, STATE, ZIP CODE	36. TELEPHONE NUMBER
Griffith, Ind. 46319	(219)-924-4378

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
[signature]	POUNDS	6 19 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen — press hard.

NL 94705 17

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48164

003472

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries, Inc.
2. EPA IDENTIFICATION NO.: WID059172935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis.
6. TELEPHONE NUMBER: (414)-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	5000	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	42420
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Sudder
17. DATE SHIPPED M-D Y: 6/17/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: TLD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 455 St
21. CITY, STATE, ZIP CODE: South Holland, Ill
22. TELEPHONE NUMBER: (312)-596-5377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): M. Pfeifer
26. Date Accepted M / D / Y

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND043026ST
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDVN FEE
40. Date Accepted M / D / Y: 6/17/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO210 FT-63 GRM
6.17.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48165

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059971935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4000	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	37806
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 6/21/82

TRANSPORTER SECTION

18. COMPANY NAME: Air Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155 St.
21. CITY, STATE, ZIP CODE: South Holland, Ill.
22. TELEPHONE NUMBER: (312)-596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [illegible]
26. Date Accepted M D Y: 6/21/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302 65
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted M D Y: 6/21/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO210RT-50 GRM
6.21.82

HAZARDOUS WASTE FACILITY

003473

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
BI # 74365
A 48162

003474

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059977935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th ST.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4,500	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	42900
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 6/11/82

TRANSPORTER SECTION

18. COMPANY NAME: MP Frank, Inc.
19. EPA IDENTIFICATION NO.: TID069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155 St.
21. CITY, STATE, ZIP CODE: South Holland, Ill.
22. TELEPHONE NUMBER: (312)-596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Robert Perkins
25. NAME (Print): Robert Perkins
26. Date Accepted M D Y: 6/11/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F. Dwyer
40. Date Accepted M / D / Y: 6/11/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0211KT-50
GRM 6-11-82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 48170

003475

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059929935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis.
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4960	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	41140
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 7/2/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: TID069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155 St.
21. CITY, STATE, ZIP CODE: South Holland Ill
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [illegible]
26. Date Accepted M D Y: 7/2/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302065
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted M D Y: 7/2/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 RT-50
GRM 7.2.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48168

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
PPG Industries	WIDO59771935	
4. P.O. BOX OR STREET ADDRESS		
1000 S 13th St.		
5. CITY, STATE, ZIP CODE	6. TELEPHONE NUMBER	
Oak Creek, Wis. 53154	414-764-6000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/M	4900	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	41120
					1. Solid 3. Mixture 2. Liquid [ ]	D001 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 6 28 82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
MP. Frank Inc.	TND064506160
20. P.O. BOX OR STREET ADDRESS	
101 West 155 St	
21. CITY, STATE, ZIP CODE	22. TELEPHONE NUMBER
South Holland, Ill.	(312)-596-3377

23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M D Y
[signature]	CE MILBURN	6 28 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY To 210 KT-50 GPM 6-28-82

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chem. Service	IND016302165
34. P.O. BOX OR STREET ADDRESS	
P.O. Box 190	
35. CITY, STATE, ZIP CODE	36. TELEPHONE NUMBER
Griffith, IND. 46319	(219)-924-4370

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M D Y
[signature]	EDUNTEE	6 28 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

00346

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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ML 7551

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48169

003477

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059977435
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4,900	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	39680
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 6 30 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155 St.
21. CITY, STATE, ZIP CODE: South Holland, Ill
22. TELEPHONE NUMBER: (312)-596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Robert Perkins
25. NAME (Print): Robert Perkins
26. Date Accepted M D Y: 6 30 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M D Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016320265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): EDUNFEE
40. Date Accepted M D Y: 6 30 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M D Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 RT-50
GRM 6.30.82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 48167

003416

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPC Industries, Inc
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414)-764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4000	Waste Paint	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	40200
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Stoulder
17. DATE SHIPPED M D Y: 6/25/82

TRANSPORTER SECTION

18. COMPANY NAME: MR Trank Inc
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155 St.
21. CITY, STATE, ZIP CODE: South Holland, Ill.
22. TELEPHONE NUMBER: (312)-596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [illegible]
26. Date Accepted M / D / Y: 6/25/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219)-924-1370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DUNFEE
40. Date Accepted M D Y: 6/25/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

WASTE FACILITY

T0211 RT-50
GRM 6.25.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48163

003479

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-761-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	5200	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	451[illegible]
					1. Solid 3. Mixture 2. Liquid [2]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 6/15/82

TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: TLD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155 St.
21. CITY, STATE, ZIP CODE: South Holland, Ill.
22. TELEPHONE NUMBER: (312)-596-3378
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print):
26. Date Accepted M D Y: 6/15/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: TND016302265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DUNFEE
40. Date Accepted: 6/15/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210K T-50
GRM 6.15.82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48166

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
D.F. Enterprises	WID 006720635	
4. P.O. BOX OR STREET ADDRESS		
10800 S. 13th St.		
5. CITY, STATE, ZIP CODE	6. TELEPHONE NUMBER	
Oak Creek, Wis.	414 764-1620	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/N	4000	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	17,000
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007 D008	
					1. Solid 3. Mixture 2. Liquid [ ]	D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scuglia
17. DATE SHIPPED M D Y: 6/25/82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Mid Trans Inc	WID 045361166
20. P.O. BOX OR STREET ADDRESS	
201 West 155 St	
21. CITY, STATE, ZIP CODE	22. TELEPHONE NUMBER
South Holland, Ill.	(312) 596-2377

23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
[signature]	[illegible]	6/25/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	ILD 063 010 265
34. P.O. BOX OR STREET ADDRESS	
P.O. Box 190	
35. CITY, STATE, ZIP CODE	36. TELEPHONE NUMBER
Griffith, Ind. 46319	(219) 924-4500

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
[signature]	F. DUNFEE	6/30/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

OUS WASTE FACILITY

T0211RT-50
GRM 6-23-82

00348

DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

07-2381

A 48176

003481

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: SPG Industries
2. EPA IDENTIFICATION NO.: WID005992935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10900 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis.
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/M	4200	WASTE PAINT	Flammable Liquid	UN1263	1. Solid 3. Mixture [2] 2. Liquid	F003 F005	39806
					1. Solid 3. Mixture [ ] 2. Liquid	D006 D007	
					1. Solid 3. Mixture [ ] 2. Liquid	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 7 12 82

TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 153rd St.
21. CITY, STATE, ZIP CODE: South Holland, Ill
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Donald N Bult
25. NAME (Print): Donald N Bult
26. Date Accepted M D Y: 7 12 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND063026S
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 46319
36. TELEPHONE NUMBER: 219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print):
40. Date Accepted M / D / Y:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

GENERATOR

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48172

003482

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
PPG Industries	WID059972935	
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th street		
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154	6. TELEPHONE NUMBER: (414) 764-6000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4,700	Waste Paint	flammable liquid	UN1263	1. Solid 3. Mixture 2. Liquid [2]	Foo3 Foo5	3814
					1. Solid 3. Mixture 2. Liquid [ ]	Doo6 Doo7	
					1. Solid 3. Mixture 2. Liquid [ ]	Doo8 Doo9	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D. F. Scudder
17. DATE SHIPPED M D Y: 7 / 9 / 82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Mr. Frank, Inc.	ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th st.	
21. CITY, STATE, ZIP CODE: South Holland, Ill.	22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted
[signature]	C E MILBURN	7 9 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190	
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319	36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M D Y
[signature]	[illegible]	7 9 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 211 R T-50 GRM
7.9.82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 49388

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
T/W	4750	Waste Paint	Flammable Liquid	UN1866 UN1263	1. Solid 3. Mixture 2. Liquid [2]	F003 F005	42640
					1. Solid 3. Mixture 2. Liquid [ ]	D006 D007	
					1. Solid 3. Mixture 2. Liquid [ ]	D008 D009	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 1/7/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [signature]
26. Date Accepted M D Y: 1/7/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDV NEEE
40. Date Accepted M / D / Y

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210 R T-50
CRM 1/7/82

003483

STATE OF 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

0541784 (1–7)

Authorization Number 991562 (8–13)

GLIDDEN C+R DIV SCM Corp (Company Name) | 1333 S. NORMAL (Address) | 3122268200 (Phone Number) | 0316000181 (14 Generator Number 24) G

CHICAGO (City) | IL (State) | 60616 (Zip) | ILT180012080 (EPA Number)

WASTE HAULER(S)

MR FRANK INC (Hauler Name) | 201 W. 155th Street South Holland IL 60473 (Hauler Address) | 3125963377 (Phone Number) | S.W.H. Registration Number 0079001 (25–31) | ILD069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | (Phone Number) | S.W.H. Registration Number (32–38) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX (Address) | 91808902 (39–46 Site Number)

~~CHICAGO~~ GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39–46 Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
ORGANIC SOLVENTS	FLAMMABLE	UN1993	F005

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 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 X Lonnie Bahr Glidden Co (Authorized Signature) 5/14/82 DATE: 5-14-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 5/14/82 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

Bob Mauck (Authorized Signature) DATE: 5/14/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 211K T-50 GPM 5.14.82

003484

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541785

Authorization Number 991562

GLIDDEN C&R D.V. SCM (Company Name) | 1833 S. NORMAL (Address) | 312 226-8200 (Phone Number) | 0316000181 (Generator Number)

CHICAGO (City) | IL (State) | 60696 (Zip) | IL T180012080 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC (Hauler Name) | 201 W. 155th STREET (Hauler Address) | S.W.H. Registration Number 0079001

SOUTH HOLLAND, IL 60473 | 3125963377 (Phone Number) | IL 0069506160 (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) | 2199244370 (Phone Number) | IND D16360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORANIC SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: ORGANIC SOLVENT HAZARD CLASS: FLAMMABLE | UN 1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 003000 (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 Daniel J. Tomasik Glidden (Authorized Signature) 5/21/82 DATE: 5/21/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Mike Pfeifer (Authorized Signature) DATE 5/21/82 (54–59)

(2) _____ (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

_____ (Authorized Signature) DATE 5/21/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3 TO 211 KT-50 GRM 5.21.82

003485

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0078130

003480

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Hastings Mfg Co.	Rozema Industrial Waste	American Chemical Services
Site Address: 325 N. Hanover St. Hastings, MI 49058	Transporters Address: 2900 Peach Ridge N.W. Walker, MI 49504	Facility Address: 420 S. Colfax Griffith, IN 46319
Phone Number: (616) 945-2491	Phone Number: (616) 453-3600	Phone Number: (219) 924-4370
Generator's Site EPA I.D. Number: MID006025324	Transporter's EPA I.D. Number: MID000647032	Facility Site EPA I.D. Number: MID016360265

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 Paints + Solvents	Flammable	UN-1263	23	8	DR		X			-400-	GAL	D001
2.													F017
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 Scott J. Doty — Date Shipped MO. DAY YEAR 033082

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. 1 218

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② Beach R — Date(s) Received 033082

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 Frank Price

Facility Site EPA I.D. Number IND016360265

☑ Accepted ☐ Rejected

Date Received 4 2 82

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY To 125 RT-63 GRM 4.2.82

STATE OF MICHIGAN

STE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
[illegible]	Kazemo [illegible]	American Chem
Site Address 325 N [illegible] St [illegible], MI 47058	**Transporters Address** 2[illegible] Beach Ridge NW [illegible], MI 4[illegible]	**Facility Address** 420 S. Colfax Griffith, IN 46319
Phone Number (616) 945-2491	**Phone Number** (616) 453-3600	**Phone Number** (219) 924-4370
Generator's Site EPA I.D. Number MID006025324	**Transporter's EPA I.D. Number** MID000647032	**Facility Site EPA I.D. Number** MID016360265

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 Safety Sheets	Toxic	NOS	21	1	DR		X			150	[illegible]	[illegible]
2.	(INTOX)												
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 Scott J. Doty — Date Shipped MO. DAY YEAR 033082

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. 1 218

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② Butch R — Date(s) Received 033082

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 Frank Price

Facility Site EPA I.D. Number IND016360265

☒ Accepted ☐ Rejected

Date Received 4.2.82

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

To 125 RT-63 GRM 4.2.82

003487

STATE OF MICHIGAN

...E DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0105191

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Hastings MFG Co.	Valley City Refuse Disposal, Inc.	American Chemical Services
Site Address	**Transporters Address**	**Facility Address**
325 N. Hanover St. Hastings, MI 49058	2650 Thornwood Dr. Wyoming, MI 49509	420 S. Colfax Griffith, IN 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 945-2491	(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**
MI D 0 0 1 6 0 2 5 3 2 4	MI D 0 5 5 8 5 5 3 7 3	MI D 0 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Waste Paint & Solvents	Flammable	UN1263	Z 3	3	DR		X			1120	GAL	D 0 0 1
2.													F 0 0 7
3.													
4.													
5.													
6.													

COMMENTS: Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① [signature] Date Shipped MO. DAY. YEAR: 10 01 82

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1** 640

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② Russell Hemminger Date(s) Received: 10 01 82

Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ [signature] Facility Site EPA I.D. Number IN D 0 1 1 6 3 6 0 2 6 5

☒ Accepted ☐ Rejected Date Received: 10 5 82

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY To 210 E T-50 GRM 10-5-82

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0343047

Authorization Number 997552

McWhorter Inc. formerly Midwest Syn. Div. (Company Name) — 200 Sayre Street (Address)

Rockford (City) — Illinois (State) — 61101 (Zip)

2010300122 G (Generator Number)

WASTE HAULER(S)

Mr. Frank Inc. ~~Amer. Chem. Service~~ (Hauler Name) — S. Holland, Il. (Hauler Address) — S.W.H. Registration Number ~~0102~~ 0079029

201 W. 155th S

Hauler Name — Hauler Address 312-596-3377 — S.W.H. Registration Number ILD069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

420 S Cottage Ave

Amer. Chem. Service (Facility Name) — Griffith, Ind. (Address) — 91808901 (Site Number)

312-768-3400

City — State — 46319 (Zip)

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Xylol Waste Fed K078 SPA Est. Wt.

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: UN 1993

SHIPPING DESCRIPTION: Flammable Liquid

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: 5000 (47–52)

1 GALLONS (Circle One)
2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: William Anderson (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE: / / (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT 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: 6/4/82 (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 120KT-63 GRM 6.4.82

SITE COPY - PART 3

003489

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

0343048

Authorization Number 997552

McWhorter Inc. formerly Midwest Syn. Div. (Company Name) — 200 Sayre Street (Address)
Rockford (City) — Illinois (State) — 61101 (Zip)

2010300122 G (Generator Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) — 201 W. 155th St. S. Holland, Il. (Hauler Address) — S.W.H. Registration Number 0079029
312-596-3377

Hauler Name — Hauler Address — ILD069506160 Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Amer. Chem. Service (Facility Name) — 420 S. Colfax Ave (Address) — 3127683400 — 91808902 (Site Number)
Griffith, (City) — Ind. (State) — 46319 (Zip)

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Xylol Waste
Fed K078
SPA Est. Wt.

WASTE PHASE: ~~Liqu~~ Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

UN1993

SHIPPING DESCRIPTION: Flammable Liquid — 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. 7

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-14-82 — William Anderson (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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: 07 14 82

(2) (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

F. Dunlop (Authorized Signature) — DATE: 7/14/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

To 122 E T-63 GRM 7.14 S2

SITE COPY - PART 3

003490

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0343049

SPECIAL WASTE HAULING MANIFEST

Authorization Number

McWhorter Inc. formerly Midwest Syn. Div. (Company Name) — 200 Sayre Street (Address)

Rockford (City) — Illinois (State) — 61101 (Zip)

2 0 1 0 3 0 0 1 2 2 G — Generator Number

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) — 201 W. 155th St. S. Holland, Il. 312-596-3377 (Hauler Address)

S.W.H. Registration Number 0 0 7 9 0 2 6

Hauler Name — Hauler Address

S.W.H. Registration Number ILD069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Amer. Chem. Service (Facility Name) — 420 S. Colfax Ave (Address) 312-768-3400

9 1 8 0 8 9 0 2 — Site Number

Griffith (City) — Ind. (State) — 46319 (Zip)

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Xylol Waste Fed K078 SPA Est. Wt.

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid

HAZARD CLASS: Flammable UN 1866

WEIGHT FOR D.O.T. USE 36,250 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

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: 7/20/82 — Charles Mattack (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 07 20 82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 7 20 82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

To 122 KT-63 GRM 7-20-82

SITE COPY - PART 3

003491

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0476010

Authorization Number 99773

TO BE COMPLETED BY WASTE GENERATOR

Abbott Laboratories Attn: Dept. 726 (Company Name)	1400 N. Sheridan Rd. (Address)	3129378090 (Phone Number)	0971250001G (Generator Number)
North Chicago (City)	Illinois (State)	60064 (Zip)	ILD055409940 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)	South Holland, Il. 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 Avenue (Address)			918089002 (Site Number)
Griffith (City)	Indiana (State)	46319 (Zip)	2199244370 (Phone Number)	IND016360265 (EPA Number)
(Alternate (Facility Name))	(Address)			(Site Number)
(City)	(State)	(Zip)	(Phone Number)	(EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Aromatic & Aliphatic Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Waste Solvents, nos (Aromatic & Aliphatic Solvents)	Flammable Liquid	NA1993	D001 F002 F003 F005

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: 00500 0 (1 GALLONS (Circle One) 2 CU. YDS.) 1

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Frank Kelly (Authorized Signature) DATE: 2-23-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Robert Perkins (Authorized Signature) DATE 02/23/82

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE — YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 2/23/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 212 RT-50 61M 2/23/82

003492

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0577157

Authorization Number 9 9 7 7 3

Abbott Laboratories
Attn: Dept. 726 (Company Name) | 1400 N. Sheridan Rd. (Address) | 312 937-8090 (Phone Number) | 0 9 7 1 2 5 0 0 0 1 G (Generator Number)

North Chicago (City) | Illinois (State) | 60064 (Zip) | I L D 0 5 5 4 0 9 9 4 0 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | South Holland, Il. 60473 (Hauler Address) | S.W.H. Registration Number 0 0 7 9 1 0 1 8

312 596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 0 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service 420 Colfax Ave. (Facility Name) (Address) | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 219 924-4370 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Aromatic & Aliphatic Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:		
Waste Solvents, nos (Aromatic & Aliphatic Solvents)	Flammable Liquid	N A 1 9 9 3 (UN or NA Number)	D 0 0 1 (EPA HW Number) F 002 F 003 F 005

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 (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 Frank Kelly (Authorized Signature) DATE: 5-5-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 05/05/82

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 5/5/82

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 203 RT-50 GPM 5.4.82

003493

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0476038

Authorization Number 9 9 7 7 7 3

Abbott Laboratories | Attn: Dept. 726 (Company Name) | 1400 N.Sheridan Rd. (Address) | 312 937-8090 (Phone Number) | 0 9 7 1 2 5 0 0 0 1 G (Generator Number)

North Chicago (City) | Illinois (State) | 60064 (Zip) | I L D 0 5 5 4 0 9 9 4 0 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | South Holland, Il. 60473 (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 1 8

2010.155

312 596-3377 (Phone Number) | I L D0 69 5 06 1 60 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax Ave. (Address) | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 219 924-4370 (Phone Number) | I ND 0 16 36 0 26 5 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Aromatic & Aliphatic Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Waste Solvents, nos (Aromatic & Aliphatic Solvents)	Flammable Liquid	N A 1 9 9 3	D 0 0 1 F 002 F 003 F 005

WEIGHT FOR D.O.T. USE 40,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 (47–52) (GALLONS) CU. YDS. (Circle One) 2 | 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 Frank Kelly (Authorized Signature) DATE: 5-14-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) _____ (Authorized Signature) DATE: 05 14 82 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

_____ (Authorized Signature) DATE: 5-14-82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS, 217 / 782-3637 OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 212K T-50 GRM 5.14.82

003494

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0577163

Authorization Number 9 9 7 7 3

Abbott Laboratories (Company Name)
Attn: Dept. 726
1400 N. Sheridan Rd. (Address)
3 1 2 9 3 7 8 0 9 0 (Phone Number) 0 9 7 1 2 5 0 0 0 1 G (Generator Number)
North Chicago (City) Illinois (State) 60064 (Zip)
I L D 0 5 5 4 0 9 9 4 0 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)
201 W. 155th Street
South Holland, Il. 60473 (Hauler Address)
S.W.H. Registration Number 0 0 7 9 0 0 9
3 1 2 5 9 6 3 3 7 7 (Phone Number)
I L D 0 6 9 5 0 6 1 6 0 (EPA Number)

(Hauler Name) (Hauler Address)
S.W.H. Registration Number
(Phone Number) (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name)
420 S. Colfax Ave. (Address)
9 1 8 0 8 9 0 2 (Site Number)
Griffith (City) Indiana (State) 46319 (Zip)
2 1 9 9 2 4 4 3 7 0 (Phone Number)
I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

(Alternate (Facility Name)) (Address) (Site Number)
(City) (State) (Zip) (Phone Number) (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Aromatic & Aliphatic 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, nos (Aromatic & Aliphatic Solvents) Flammable Liquid
HAZARD CLASS:
~~N~~ A 1 9 9 3 (UN or NA Number)
D 0 0 1 (EPA HW Number)
F 002
F 003
F 005

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_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Frank Kelly (Authorized Signature) DATE: 6-15-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Tom Berry (Authorized Signature) DATE 06 15 82 (54–59)
(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

(Authorized Signature) DATE: 6 15 82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3 To 212E T-50 GRM 6-15-82

003495

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0476040

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 9 9 7 7 7 3

Abbott Laboratories (Company Name) | Attn: Dept. 726 | 1400 N. Sheridan Rd. (Address) | 312 937-8090 (Phone Number) | 0 9 7 1 2 5 0 0 0 1 G (Generator Number)

North Chicago (City) | Illinois (State) | 60064 (Zip) | I L D 0 5 5 4 0 9 9 4 0 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th Street, South Holland, Il. 60473 (Hauler Address) | S.W.H. Registration Number 0 0 7 9 1 0 0 9

312 596-3377 (Phone Number) | I L D 06 95 0 61 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) | 420 S. Colfax Ave. (Address) | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 219 924-4370 (Phone Number) | I N D0 1 63 6 02 6 5 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Aromatic & Aliphatic Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number	
Waste Solvents, nos (Aromatic & Aliphatic Solvents)	Flammable Liquid	N A 1 9 9 3	D 0 0 1	F 002 F 003 F 005

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_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH 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. Frank Kelly (Authorized Signature) DATE: 6-11-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Michael Martin (Authorized Signature) DATE: 06/11/82 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature) DATE: 06/11/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3 To 212E T-50 6RM 6-11-82

003496

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0577164

Authorization Number 997735

TO BE COMPLETED BY WASTE GENERATOR

Abbott Laboratories (Company Name)
Attn: Dept. 726
1400 N. Sheridan Rd. (Address)
3129378090 (Phone Number) 09712500 01 G (Generator Number)
North Chicago (City) Illinois (State) 60064 (Zip)
ILD055409940 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)
201 W. 155th Street
South Holland, Il. 60473 (Hauler Address)
S.W.H. Registration Number 0079009
3125963377 (Phone Number)
ILD069506160 (EPA Number)

(Hauler Name) (Hauler Address)
S.W.H. Registration Number
(Phone Number) (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name)
420 S. Colfax Ave. (Address)
9180890 2 (Site Number)
Griffith (City) Indiana (State) 46319 (Zip) 2199244370 (Phone Number) INDO16360265 (EPA Number)

(Alternate (Facility Name)) (Address) (Site Number)
(City) (State) (Zip) (Phone Number) (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Aromatic & Aliphatic 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, nos (Aromatic & Aliphatic Solvents) Flammable Liquid
HAZARD CLASS:
NA1993 (UN or NA Number)
D001 (EPA HW Number)
F 002
F 003
F 005

WEIGHT FOR D.O.T. USE 40,000 (LBS) TONS (circle one) — WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 005000 (1 GALLONS 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-Frank Kelly (Authorized Signature) DATE: 6-21-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Richard D Martin (Authorized Signature) DATE: 06/21/82

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE 06/21/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3 To 212 RT-50 6PM 6.21.82

003447

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0577166 (1–7)

Authorization Number 9977738 (8–13)

TO BE COMPLETED BY WASTE GENERATOR

Abbott Laboratories (Company Name)
Attn: Dept. 726
1400 N. Sheridan Rd. (Address)
3129378090 (Phone Number)
0971250001G (14 Generator Number 24)
North Chicago (City)
Illinois (State) 60064 (Zip)
ILD055409940 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)
201 W. 155th Street
South Holland, Il. 60473 (Hauler Address)
S.W.H. Registration Number 0079/009 (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 Ave. (Address)
918089002 (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: Waste Aromatic & Aliphatic 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, nos (Aromatic & Aliphatic Solvents) Flammable Liquid
HAZARD CLASS: NA1993 (UN or NA Number)
EPA HW Number: D001
F 002
F 003
F 005

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: 00500 0 (47–52)
(1 GALLONS (Circle One) / 2 CU. YDS.) 1 (53)

METHOD OF SHIPMENT (Circle One): (DRUMS_____ Number) TANK TRUCK Y OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Frank Kelly (Authorized Signature) DATE: 7-2-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Donald H Bult (Authorized Signature) DATE: 07/021/82 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO_____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature) DATE: 7/2/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 210 RT-50 GRM 7-2-82

003493

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0577165 (1–7)

Authorization Number 9 9 7 7 7 3 (8–13)

Abbott Laboratories (Company Name)
Attn: Dept. 726
1400 N. Sheridan Rd. (Address)
3 1 2 9 3 7 8 0 9 0 (Phone Number)
0 9 7 1 2 5 0 0 0 1 G (14–24 Generator Number)
North Chicago (City)
Illinois (State) 60064 (Zip)
I L D 0 5 5 4 0 9 9 4 0 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)
201 W. 155 th Street
South Holland, Il. 60473 (Hauler Address)
S.W.H. Registration Number 0 0 7 9 / 0 2 9 (25–31)
3 1 2 5 9 6 3 3 7 7 (Phone Number)
I L D 0 6 9 5 0 6 1 6 0 (EPA Number)

Hauler Name
Hauler Address
S.W.H. Registration Number (32–38)
Phone Number
EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name)
420 S. Colfax Ave. (Address)
9 1 8 0 8 9 0 2 (39–46 Site Number)
Griffith (City)
Indiana (State) 46319 (Zip)
2 1 9 9 2 4 4 3 7 0 (Phone Number)
I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

Alternate (Facility Name)
Address
39 Site Number 46
City
State
Zip
Phone Number
EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Aromatic & Aliphatic 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, nos (Aromatic & Aliphatic Solvents) Flammable Liquid
HAZARD CLASS:
N A 1 9 9 3 (UN or NA Number)
D 0 0 1 (EPA HW Number)
F 003
F 002
F 005

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_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Frank Kelly (Authorized Signature) DATE: 6/24/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Michael D Martin (Authorized Signature) DATE 06/24/82 (54–59)

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature) DATE 06/24/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3 To 212 RT-50 GRM 6.24.82

003499

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0577168 (1–7)

Authorization Number 997773 (8–13)

TO BE COMPLETED BY WASTE GENERATOR

Abbott Laboratories (Company Name)
Attn: Dept. 726
1400 N. Sheridan Rd. (Address)
3 12 93 78 0 90 (Phone Number)
0 9 7 1 25 0 0 0 1 6 (14 Generator Number 24)
North Chicago (City)
Illinois (State)
60064 (Zip)
I L D 0 5 5 4 0 9 9 4 0 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)
201 W. 155th Street
South Holland, Il. 60473 (Hauler Address)
S.W.H. Registration Number 0 0 7 9 / 0 0 9 (25–31)
3 1 2 5 9 6 3 3 7 7 (Phone Number)
I L D 0 6 9 5 0 6 1 6 0 (EPA Number)

(Hauler Name)
(Hauler Address)
S.W.H. Registration Number (32–38)
(Phone Number)
(EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name)
420 S. Colfax Ave. (Address)
9 1 8 0 8 9 0 2 (39 Site Number 46)
Griffith (City)
Indiana (State)
46319 (Zip)
2 19 9 24 4 3 70 (Phone Number)
I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

(Alternate (Facility Name))
(Address)
(39 Site Number 46)
(City)
(State)
(Zip)
(Phone Number)
(EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Aromatic & Aliphatic 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, nos (Aromatic & Aliphatic Solvents) Flammable Liquid
HAZARD CLASS: N A 1 9 9 3 (UN or NA Number)
D 0 0 1 (EPA HW Number)
F 002
F 003
F 005

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 ~~550~~ 48 0 0 (47–52)
(1 GALLONS (Circle One) 2 CU. YDS.) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION S. Frank Kelly (Authorized Signature) DATE: 7-12-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry (Authorized Signature) DATE: 07/21/82 (54–59)
(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE 7/28/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3 T021F & 212F T-50 GRM 7.12.82

003500

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0577174

Authorization Number

Abbott Laboratories Attn: Dept. 726 (Company Name) | 1400 N. Sheridan Rd. (Address) | 3 1 2 9 3 7 8 0 9 0 (Phone Number) | 0 9 7 1 2 5 0 0 0 1 G (Generator Number)

North Chicago (City) | Illinois (State) | 60064 (Zip) | I L D 0 5 5 4 0 9 9 4 0 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th Street South Holland, Il. 60473 (Hauler Address) | S.W.H. Registration Number 0 0 7 9 / 0 1 8

3 1 2 5 9 6 3 3 7 7 (Phone Number) | I L D 0 6 9 5 0 6 1 6 0 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax Ave. (Address) | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 2 1 9 9 2 4 4 3 7 0 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Aromatic & Aliphatic 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, nos (Aromatic & Aliphatic Solvents)

HAZARD CLASS: Flammable Liquid

N A 1 9 9 3 (UN or NA Number) | D 0 0 1 (EPA HW Number) | F 002 F 003 F 005

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 ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Frank Kelly (Authorized Signature) DATE: 8-9-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Gary Druen (Authorized Signature) DATE: 08/09/82 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

T Dunfee (Authorized Signature) DATE: 8/9/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3 TO 210 R T-50 GPM 8.9.82

003501

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

0577175 (1–7)

Authorization Number ____ (8–13)

Abbott Laboratories (Company Name)	1400 N. Sheridan Rd. (Address)	3129378090 (Phone Number)	0971250001 G (14 Generator Number 24)	
Attn: Dept. 726				
North Chicago (City)	Illinois (State)	60064 (Zip)	ILD055409940 (EPA Number)	

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)	201 W. 155th Street South Holland, Il. 60473 (Hauler Address)	S.W.H. Registration Number 00790099 (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 Ave. (Address)		9180902 (39 Site Number 46)	
Griffith (City)	Indiana (State)	46319 (Zip)	2192443 70 (Phone Number)	IND016360265 (EPA Number)
(Alternate (Facility Name))	(Address)		(39 Site Number 46)	
(City)	(State)	(Zip)	(Phone Number)	(EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Aromatic & Aliphatic Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:		
Waste Solvents, nos (Aromatic & Aliphatic Solvents) Flammable Liquid	NA1993 (UN or NA Number)	D001 (EPA HW Number)	F 002 F 003 F 005

WEIGHT FOR D.O.T. USE 40,000 (LBS / TONS (circle one))

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 (47–52) (1 GALLONS / 2 CU. YDS. (Circle One)) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Frank W. Kelly (Authorized Signature) DATE: 8-30-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Michael D Martin (Authorized Signature) DATE: 08/30/82 (54–59)

(2) ____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 83082 (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 212 R-T-50 GRM 8-30-82

003502

STATE OF ILLINOIS

0577176

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

Authorization Number ____

Abbott Laboratories (Company Name)
Attn: Dept. 726
1400 N. Sheridan Rd. (Address)
3129378090 (Phone Number) 097 12 500 01 G (Generator Number)
North Chicago (City) Illinois (State) 60064 (Zip)
IL D0 55409 940 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)
201 W. 155th Street
South Holland, Il. 60473 (Hauler Address)
S.W.H. Registration Number 00 79/02/
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 Ave. (Address)
91808902 (Site Number)
Griffith (City) Indiana (State) 46319 (Zip)
2199244370 (Phone Number)
IND016360265 (EPA Number)

Alternate (Facility Name)
Address
Site Number
City
State
Zip
Phone Number
EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Aromatic & Aliphatic Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	
Waste Solvents, nos (Aromatic & Aliphatic Solvents) Flammable Liquid	NA1993 (UN or NA Number)	D001 (EPA HW Number) F002 F003 F005

WEIGHT FOR D.O.T. USE 40,000 (LBS) TONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 00500 (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 Frank Kelly (Authorized Signature) DATE: 10-19-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Gary Druen (Authorized Signature) DATE: 10/19/82

(2) ____ (Authorized Signature) DATE: ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 10/19/82

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 212 E T-50 GRM 10.19.82

003503

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0577179 (1–7)

Authorization Number ____ (8–13)

Abbott Laboratories
Attn: Dept. 726 (Company Name) | 1400 N. Sheridan Road (Address) | 3129378090 (Phone Number) | 097125 00 01 G (14 Generator Number 24)
North Chicago (City) | Illinois (State) | 60064 (Zip)
ILD055409940 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)
201 W. 155th Street
South Holland, Il. 60473 (Hauler Address)
S.W.H. Registration Number 0079/021 (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 Ave. (Address)
9 18 08 90 2 (39 Site Number 46)
Griffith (City) | Indiana (State) | 46319 (Zip) | 219 924 4370 (Phone Number)
IND016360265 (EPA Number)

(Alternate (Facility Name)) (Address)
(39 Site Number 46)
(City) (State) (Zip) (Phone Number) (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Aromatic & Aliphatic 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, nos (Aromatic & Aliphatic Solvents) Flammable Liquid
HAZARD CLASS:
NA1993 (UN or NA Number)
D001 (EPA HW Number)
F 002
F 003
F 005

WEIGHT FOR D.O.T. USE 40,000 (LBS) TONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 005000 (47–52) (1) GALLONS (2) CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION — Frank Kelly (Authorized Signature) — DATE: 11-17-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) ____ (Authorized Signature) — DATE 11/17/82 (54–59)
(2) ____ (Authorized Signature) — DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

____ (Authorized Signature) — DATE: 11/17/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 202 Fr T-50 6AM 11.17.82

003504

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

07-10239
1 7

Authorization Number ____ 8 13

TO BE COMPLETED BY WASTE GENERATOR

Abbott Laboratories — (Company Name)
Attn: Dept. 726
1400 N. Sheridan Rd. — Address
3 1 2 9 3 7 8 0 9 0 — Phone Number
0 9 7 1 2 5 0 0 0 1 G — 14 Generator Number 24
Notth Chicago — City
Illinois — State
60064 — Zip
I L D 0 5 5 4 0 9 9 4 0 — EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. — Hauler Name
201 W. 155th Street
South Holland, Il. 60473 — Hauler Address
S.W.H. Registration Number 0 0 7 9/0 0 9 — 25 31
3 1 2 5 9 6 3 3 7 7 — Phone Number
I L D 0 6 9 5 0 6 1 6 0 — EPA Number

____ Hauler Name
____ Hauler Address
S.W.H. Registration Number ____ 32 38
____ Phone Number
____ EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service — (Facility Name)
420 S. Colfax Avenue — Address
9 1 8 0 8 9 0 2 — 39 Site Number 46
Griffith — City
Indiana — State
46319 — Zip
219 92 4 43 70 — Phone Number
I N D0 1 6 3 6 0 2 6 5 — EPA Number

____ Alternate (Facility Name)
____ Address
____ 39 Site Number 46
____ City
____ State
____ Zip
____ Phone Number
____ EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Aromatic & Aliphatic 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, nos (Aromatic & Aliphatic Solvents) Flammable Liquid
HAZARD CLASS: (1) N A 1 9 9 3 — UN or NA Number
D 0 0 1 — EPA HW Number
F 003
F 002
F 005

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 ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Frank Kelly (Authorized Signature) DATE: 12-22-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Michael Morter (Authorized Signature) DATE: 12/22/82 — 54 59

(2) ____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE . YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 12/22/82 — 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 212 R 7-50 6EM 12-22-82

003505

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 26709

003506

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: American Can Co
2. EPA IDENTIFICATION NO.: WID006119986
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: PO Box 702
5. CITY, STATE, ZIP CODE: Neenah Wis 54956
6. TELEPHONE NUMBER: 414-729-7000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Parker	x 2.550	Waste Solvent	Flammable	NA 1993	1. Solid (3) Mixture 2. Liquid ☐	D001 F003 F005	x 16.450#
			Liquid		1. Solid 3. Mixture 2. Liquid ☐		
					1. Solid 3. Mixture 2. Liquid ☐		

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Harry Krueger
16. NAME (Print): Harry Krueger
17. DATE SHIPPED: M D Y 3/10/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr Frank Inc
19. EPA IDENTIFICATION NO.: ILD 069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th St.
21. CITY, STATE, ZIP CODE: South Holland Ill 60476
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: C.E. Milburn
25. NAME (Print): C.E. MILBURN
26. Date Accepted: 3/10/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: Colfax Ave 420 South
35. CITY, STATE, ZIP CODE: Griffith Ind 46318
36. TELEPHONE NUMBER: 219-924-4270
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F Dunfee
39. NAME (Print): F DUNFEE
40. Date Accepted: M / D / Y 3/11/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO204RT-50
GRM 3/11/82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 26708

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: American Can Co
2. EPA IDENTIFICATION NO.: WID 006119978
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: P.O. Box 702 Attn Larry Krueger Bldg 3
5. CITY, STATE, ZIP CODE: Neenah Wis 54956
6. TELEPHONE NUMBER: (414)-729-7000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Tanker	2.650	Coating Printing Laminating Waste	Plain Liquid	NA 1993	1. Solid 3. Mixture 2. Liquid ☐		18,550 #
					1. Solid (3) Mixture 2. Liquid ☐	F003 F005	X
					1. Solid 3. Mixture 2. Liquid ☐	D001	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Larry Krueger
16. NAME (Print): Larry Krueger
17. DATE SHIPPED: M D Y 3/10/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr Frank Inc
19. EPA IDENTIFICATION NO.: ILD 069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th St
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60476
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: C E Milburn
25. NAME (Print): C.E. MILBURN
26. Date Accepted: 3/10/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: Calfax Ave, 420 South
35. CITY, STATE, ZIP CODE: Griffith Ind 46318
36. TELEPHONE NUMBER: 219-924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F Donfee
39. NAME (Print): F DONFEE
40. Date Accepted: 3/11/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 204 T-50
GRM 3/11/82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 27503

003502

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
American Chem. Co	WID 006119928	
4. P.O. BOX OR STREET ADDRESS: P.O. Box 702 Attn Harry R. Krueger		
5. CITY, STATE, ZIP CODE: Neenah, Wis 54956	6. TELEPHONE NUMBER: 414-729-7000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Tanker	4300	Coating, printing, laminating waste	Flam. liquid	NA 1993	1. Solid 2. Liquid 3. Mixture [3]	U001 F003	30,000 t
					1. Solid 2. Liquid 3. Mixture [ ]	F005	
					1. Solid 2. Liquid 3. Mixture [ ]		

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Harry Krueger
16. NAME (Print): Harry Krueger
17. DATE SHIPPED (M D Y): 3 11 5 82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
MR Truck Inc	IID 064506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th St.	
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60476	22. TELEPHONE NUMBER: 312-596-3377
23. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted (M D Y)
[signature]	C.E. MILBURN	3/11/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted (M / D / Y)

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IND 016260245
34. P.O. BOX OR STREET ADDRESS: Griffith Ave 420 South	
35. CITY, STATE, ZIP CODE: Griffith, Ind 46319	36. TELEPHONE NUMBER: 219-924-4270
37. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted (M D Y)
[signature]	FOUNTEE	3/15/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted (M / D / Y)

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 K T-50
Cahill 3/15/82

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

[illegible]

TO:	FROM:
T/S/D FACILITY [illegible]	Generator [illegible]
E.P.A. ID Code No. [illegible]	E.P.A. ID Code No. [illegible]
Address [illegible]	Address [illegible]
Destination [illegible]	Origin [illegible]
Phone [illegible]	Phone [illegible]

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5000 gals	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	
	[illegible]	[illegible]		[illegible]		
	[illegible]			[illegible]		

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 [illegible] Date [illegible]

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

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature [illegible] Date [illegible]

HAZARDOUS WASTE

HAZARDOUS WASTE

T/S/D F COPY

003509

BLS-G (6 PLY) REV 10/80

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

...e 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
M A 27513

003510

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
American Can Co	WIO006119978	In event of leakage, contain and clean-up with sorbent material.
4. P.O. BOX OR STREET ADDRESS: P.O. Box 702 Attn: Harry P Krueger		
5. CITY, STATE, ZIP CODE: Neenah, Wis 54956	6. TELEPHONE NUMBER: 414 729 7000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
5000 gal tanker	X 5000	Coating, Printing, Reworking Waste	Flammable Liquid	NA 1993	1. Solid 2. Liquid 3. Mixture [3]	D001 F003	X 35,000
					1. Solid 2. Liquid 3. Mixture [ ]	F005	
	X	Waste Solvents NOS			1. Solid 2. Liquid 3. Mixture [ ]		

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Harry P. Krueger
16. NAME (Print): Harry P. Krueger
17. DATE SHIPPED M D Y: 8 23 82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Mr Frank Inc	IL0069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th St.	
21. CITY, STATE, ZIP CODE: South Holland, Ill 60476	22. TELEPHONE NUMBER: 312 596 3377

23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M D Y
[signature]	C.E. MILBURN	8 17 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

To 211 F T-50 GPM
8-23-82

HAZARDOUS WASTE FACILITY

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IND016360265
34. P.O. BOX OR STREET ADDRESS: Calfal Ave 420 South	
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46318	36. TELEPHONE NUMBER: 219 924 4370

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
[signature]		8 23 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

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

N [illegible]

TO:	FROM:
T/S/D FACILITY [illegible]	Generator [illegible]
E.P.A. ID Code No. [illegible]	E.P.A. ID Code No. [illegible]
Address [illegible]	Address [illegible]
Destination [illegible]	Origin [illegible]
Phone [illegible]	Phone [illegible]

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	
[illegible]	[illegible]	[illegible]		[illegible]		
	[illegible]			[illegible]		
	[illegible]					

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 [illegible] Date [illegible]

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

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature [illegible] Date 10/29/82

T/S/D F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

BEST COPY AVAILABLE REV 10/80

003511

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

...e 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

N

MANIFEST NUMBER
A 27541

003512

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: American Can Co
2. EPA IDENTIFICATION NO.: WID006119986
3. COMMENTS/SPECIAL INSTRUCTIONS: In event of leakage, contain and clean up with sorbent material
4. P.O. BOX OR STREET ADDRESS: P.O. Box 702
5. CITY, STATE, ZIP CODE: Neenah, Wis 54956
6. TELEPHONE NUMBER: 414 729 7000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
5000 gal tanker	1500 x	Coating, Printing, Laminating	Flammable	NA1993	1. Solid 3. Mixture 2. Liquid [3]	D001 F003	12000 x #
		Waste	Liquid		1. Solid 3. Mixture 2. Liquid [ ]	F005	
		Waste Solvent NOS			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: Larry P. Krueger
16. NAME (Print): Larry P. Krueger
17. DATE SHIPPED M D Y: 10 28 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr Frank Inc
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60476
22. TELEPHONE NUMBER: 312 596 3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Michael P. Martin
25. NAME (Print): MICHAEL MARTIN
26. Date Accepted: 10 28 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: Calfax Ave 420 South
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46318
36. TELEPHONE NUMBER: 219 924 4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDON FEE
40. Date Accepted M D Y: 10 29 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 118R T-50
GRM 10.29.82

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

H 27540

TO:		FROM:	
T/S/D FACILITY	[illegible]	Generator	[illegible]
E.P.A. ID Code No.	[illegible]	E.P.A. ID Code No.	[illegible]
Address	[illegible]	Address	[illegible]
Destination	[illegible]	Origin	[illegible]
Phone	[illegible]	Phone	[illegible]

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]		[illegible]		
	[illegible]			[illegible]		
	[illegible]					

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 [illegible] Date [illegible]

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

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature [illegible] Date 10/29/82

T/S/D F COPY

003513

7-PLS-C (6 PLY) REV 10/80

HAZARDOUS WASTE

HAZARDOUS WASTE

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

...verse 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 27540

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: American Can Co
2. EPA IDENTIFICATION NO.: WID006119972
3. COMMENTS/SPECIAL INSTRUCTIONS: Disposal of leakage, contaminated clean-up with sorbent material
4. P.O. BOX OR STREET ADDRESS: P.O. Box 702 Attn: Larry P. Krueger
5. CITY, STATE, ZIP CODE: Neenah, Wisc 54956
6. TELEPHONE NUMBER: 414 729 7000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
5000 gal tanker	3500 X	Coating, Printing, Remanufacturing waste	Flammable Liquid	NA 1993	1. Solid 2. Liquid 3. Mixture [3]	D001 F003	28,000 #X
					1. Solid 2. Liquid 3. Mixture [ ]	F005	
		Waste Solvent Nos			1. Solid 2. Liquid 3. Mixture [ ]		

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Larry P Krueger
16. NAME (Print): Larry P. Krueger
17. DATE SHIPPED M D Y: 10 12 82

TRANSPORTER SECTION

18. COMPANY NAME: Mid Frank Inc
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th ST.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60476
22. TELEPHONE NUMBER: 312 596 3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Michael Moretti
25. NAME (Print): MICHAEL MORETTI
26. Date Accepted M D Y: 10 12 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: VND016360265
34. P.O. BOX OR STREET ADDRESS: Calumet Ave 420 South
35. CITY, STATE, ZIP CODE: Griffith, Ind 46318
36. TELEPHONE NUMBER: 219 924 4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F Dunfee
39. NAME (Print): FDUNFEE
40. Date Accepted M D Y: 10 29 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 118K T-50
GMM 10.29.82

#16800

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

TO: T/S/D FACILITY	FROM: Generator
E.P.A. ID Code No.	E.P.A. ID Code No.
Address	Address
Destination	Origin
Phone	Phone

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

$_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____
(Signature of Consignor)

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY	CONTACT Name
E.P.A. ID Code No.	Phone
Address	National Response Center 1-800-424-8802
Destination	in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 _____ 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

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature _____ Date _____

HAZARDOUS WASTE

HAZARDOUS WASTE

T/S/D F COPY

003515

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 27542

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: American Can Co
2. EPA IDENTIFICATION NO.: WID006119478
3. COMMENTS/SPECIAL INSTRUCTIONS: In event of leakage, contain and clean up with sorbent material.
4. P.O. BOX OR STREET ADDRESS: P.O. Box 702 Attn: Larry P. Krueger
5. CITY, STATE, ZIP CODE: Neenah Wis 54956
6. TELEPHONE NUMBER: 414-729-7000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
5000 gl tanker	5000	Coating, Painting, Remanufacturing waste	Flammable Liquid	NA 1993	1. Solid 2. Liquid (3) Mixture [3]	D001 F003	40.000
					1. Solid 3. Mixture 2. Liquid [ ]	F005	
		Waste Solvent NOS			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: Larry P. Krueger
16. NAME (Print): Larry P. Krueger
17. DATE SHIPPED M D Y: 12/7/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr Frank Inc
19. EPA IDENTIFICATION NO.: IL D069506160
20. P.O. BOX OR STREET ADDRESS: 301 West 155th St
21. CITY, STATE, ZIP CODE: South Holland Ill 60476
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: C E Milburn
25. NAME (Print): C E MILBURN
26. Date Accepted M D Y: 12 7 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016360245
34. P.O. BOX OR STREET ADDRESS: Colfax Ave 420 South
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: 219-924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): D WEE
40. Date Accepted: 12/8/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 122 FT-63
GRM 12.9.82

003519

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

TO:	FROM:
T/S/D FACILITY	Generator
E.P.A. ID Code No.	E.P.A. ID Code No.
Address	Address
Destination	Origin
Phone	Phone

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____

National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 _____ 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

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature _____ Date 10/7/82

T/S/D F COPY

BLS-C (6 PLY) REV. 10/80

003517

HAZARDOUS WASTE

HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM
is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

TO: T/S/D FACILITY	FROM: Generator
E.P.A. ID Code No.	E.P.A. ID Code No.
Address	Address
Destination	Origin
Phone	Phone

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____
(Signature of Consignor)

FREIGHT CHARGES
PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 _____ 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 10/7/82

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 10/7/82

T/S/D F COPY

003518

HAZARDOUS WASTE

HAZARDOUS WASTE

REV 10-80

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

N

MANIFEST NUMBER
A 27536

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: American Can Co
2. EPA IDENTIFICATION NO.: WID006119986
3. COMMENTS/SPECIAL INSTRUCTIONS: In event of leakage, contain and clean up with sorbent material.
4. P.O. BOX OR STREET ADDRESS: P.O. Box 702 Attn: Larry P. Krueger
5. CITY, STATE, ZIP CODE: Neenah, Wis 54956
6. TELEPHONE NUMBER: 414-729-7000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
X 5000 gal. Tanker	X ~~660~~ 1,150	Coating, Printing, Laminating Waste	Flammable Liquid	NA1993	1. Solid 3. Mixture [3] 2. Liquid	D001 F002	X ~~6~~ 4200 #
		Waste Sorbent NOS			1. Solid 3. Mixture [ ] 2. Liquid	F005	
					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: Larry P. Krueger
16. NAME (Print): LARRY P. KRUEGER
17. DATE SHIPPED M D Y: 10 6 82

TRANSPORTER SECTION

18. COMPANY NAME: TTR Truck Inc
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th ST
21. CITY, STATE, ZIP CODE: South Holland, Ill 60476
22. TELEPHONE NUMBER: 312 596 3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Robert Perkins
25. NAME (Print): Robert PERKINS
26. Date Accepted M 10 D 18 Y 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND011360265
34. P.O. BOX OR STREET ADDRESS: Central Ave 420 South
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: 219 924 4340
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: R Dunbee
39. NAME (Print): R DUNBEE
40. Date Accepted: 10/9/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

0035?3

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 27514

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: American Can Co
2. EPA IDENTIFICATION NO.: WID 006119978
3. COMMENTS/SPECIAL INSTRUCTIONS: In event of leakage, contain and clean up with sorbent material.
4. P.O. BOX OR STREET ADDRESS: P.O. Box 702 Attn: Larry P. Krueger
5. CITY, STATE, ZIP CODE: Neenah, Wis 54956
6. TELEPHONE NUMBER: 414 429 7000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
5000 gal tanker	x 3850	Coating, Printing, Laminating waste	3 Flammable	NA 1993	1. Solid 3. Mixture 2. Liquid [3]	D001 F003	x 30800 #
			Liquid		1. Solid 3. Mixture 2. Liquid [ ]	F005	
		Waste Solvent NOS			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: Larry P. Krueger
16. NAME (Print): Larry P. Krueger
17. DATE SHIPPED M D Y: 10 16 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr Frank Inc
19. EPA IDENTIFICATION NO.: ILD 069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60476
22. TELEPHONE NUMBER: 312 586 3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Robert Perkins
25. NAME (Print): Robert Perkins
26. Date Accepted M D Y: 10 16 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: Calfax Ave 420 South
35. CITY, STATE, ZIP CODE: Griffith, Ind 46318
36. TELEPHONE NUMBER: 219 924 4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): EDWARD
40. Date Accepted: 10 17 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 122 TC T-63 GRM
10.7.82

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

TO:	FROM:
T/S/D FACILITY	Generator
E.P.A. ID Code No.	E.P.A. ID Code No.
Address	Address
Destination	Origin
Phone	Phone

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property *is hereby specifically stated by the shipper to be not exceeding*

$_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES
PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 _____ 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 7-19-82

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 7/13/82

HAZARDOUS WASTE

HAZARDOUS WASTE

T/S/D F COPY

EPA FORM 8700-22 (REV. 10-80)

003521

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

M

MANIFEST NUMBER
A 27512

003522

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: American Can Co
2. EPA IDENTIFICATION NO.: WID006119978
3. COMMENTS/SPECIAL INSTRUCTIONS: In event of leakage, contain and clean up with sorbent material
4. P.O. BOX OR STREET ADDRESS: P O Box 702 Attn: Larry P. Krueger
5. CITY, STATE, ZIP CODE: Neenah, Wis 54956
6. TELEPHONE NUMBER: 444 429 7000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
5000 gal Tanker	x 3200	Waste Solvents NOS	Flammable Liquid	NA 1993	1. Solid 3. Mixture 2. Liquid [3]	D001 F003	x 22400 #
		Coating, Printing, Laminating			1. Solid 3. Mixture 2. Liquid [ ]	F005	
		Waste			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: Larry P. Krueger
16. NAME (Print): Larry P. Krueger
17. DATE SHIPPED M D Y: 7 12 82

TRANSPORTER SECTION

18. COMPANY NAME: NW Frank Inc
19. EPA IDENTIFICATION NO.: ILD 069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60476
22. TELEPHONE NUMBER: 312 596 3377
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Robert Perkins
25. NAME (Print): Robert PERKINS
26. Date Accepted M D Y: 7 12 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: Calfat Ave 420 South
35. CITY, STATE, ZIP CODE: Griffith, Ind 46318
36. TELEPHONE NUMBER: 219 924 4370
37. COMMENTS

7.15 AM

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F Dunfee
39. NAME (Print): F DUNFEE
40. Date Accepted M D Y: 7 13 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0211 KT-50
GKM 7.13.82

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

N [illegible]

TO:	FROM:
T/S/D FACILITY [illegible]	Generator American Can Co
E.P.A. ID Code No. [illegible]	E.P.A. ID Code No. [illegible]
Address [illegible]	Address [illegible]
Destination [illegible]	Origin Neenah Wis [illegible]
Phone [illegible]	Phone [illegible]

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	
[illegible]	[illegible]	[illegible]		[illegible]		
[illegible]	[illegible]	[illegible]				

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 [illegible] Date [illegible]

TRANSPORTER #1 [illegible] E.P.A. ID No. _____
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 7-17-82

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature [illegible] Date 7/13/82

T/S/D F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

[illegible] REV. 10/80

003523

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

N

MANIFEST NUMBER
A 27511

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
American Can Co	WID006119981	
4. P.O. BOX OR STREET ADDRESS: P.O. Box 102 Attn: Larry P. Krueger		
5. CITY, STATE, ZIP CODE: Neenah, Wis 54956	6. TELEPHONE NUMBER: 414 729 1000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
55 DM Sealed	x 1800	Waste Solvents Mix	Flammable	NA1993	1. Solid 3. Mixture [3] 2. Liquid	D001 F003	x 12,500
		Coating Printing Ink Waste	Regd		1. Solid 3. Mixture [ ] 2. Liquid	F005	
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE	16. NAME (Print)	17. DATE SHIPPED M D Y
Larry P. Krueger	Larry P. Krueger	7 12 82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Ind Trans Inc	IL 0 069 506 160
20. P.O. BOX OR STREET ADDRESS: 301 West 155th St	
21. CITY, STATE, ZIP CODE: South Holland, Ill 60476	22. TELEPHONE NUMBER: 312-596-3377
23. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
Robert Perkins	Robert PERKINS	7 / 13 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IND 016 360 765
34. P.O. BOX OR STREET ADDRESS: Central Ave 420 East	
35. CITY, STATE, ZIP CODE: Griffith Ind 46319	36. TELEPHONE NUMBER: 219 924 4370
37. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
[signature]	FDUNFEE	7 13 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

DOUS WASTE FACILITY

T0211RT-50
GRM 7.13.82

4255300

HAZARDOUS WASTE MANIFEST

MEMORANDUM

...l acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

TO:	FROM:
T/S/D FACILITY	Generator
E.P.A. ID Code No.	E.P.A. ID Code No.
Address	Address
Destination	Origin
Phone	Phone

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$ _____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____
(Signature of Consignor)

FREIGHT CHARGES
PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator
Signature _____ Date _____

TRANSPORTER #1 _____ 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

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY
Signature _____ Date _____

T/S/D F COPY

7-BLS-C (6 PLY)
REV 10/80

HAZARDOUS WASTE

HAZARDOUS WASTE

003525

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 27504

003529

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
American Can Co	WID006119978	
4. P.O. BOX OR STREET ADDRESS: PO Box 702 attn: Larry Krueger		
5. CITY, STATE, ZIP CODE: Neenah Wis 54956	6. TELEPHONE NUMBER: 414-729-1000	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Barrels	4200	Coating, Printing, Laminating Waste	Flam. Liquid	NA1993	1. Solid 2. Liquid (3. Mixture) [3]	D001 F003	29,450
					1. Solid 3. Mixture 2. Liquid [ ]	F005	
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE	16. NAME (Print)	17. DATE SHIPPED M D Y
Larry P. Krueger	Larry P. Krueger	5/10/82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
The Frank Jones	ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th St	
21. CITY, STATE, ZIP CODE: South Holland Ill 60476	22. TELEPHONE NUMBER: 312-596-3377
23. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M D Y
Robert Perkins	Robert PERKINS	5/10/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

To 112 R T-63
GBM 5-11-82

RDOUS WASTE FACILITY

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Service	IND016360265
34. P.O. BOX OR STREET ADDRESS: Calumet Ave 420 South	
35. CITY, STATE, ZIP CODE: Griffith, Ind 46319	36. TELEPHONE NUMBER: 219-924-4370
37. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M D Y
[signature]	[illegible]	5/11/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

TO:	FROM:
T/S/D FACILITY	Generator
E.P.A. ID Code No.	E.P.A. ID Code No.
Address	Address
Destination	Origin
Phone	Phone

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
	800 GALS					

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

$ _____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

(Signature of Consignor)

FREIGHT CHARGES
PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator
Signature _____ Date _____

TRANSPORTER #1 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1
Signature [signature] Date 5-11-92

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 [signature]

T/S/D F COPY

7-BLS-C (6 PLY)
REV 10/80

003527

HAZARDOUS WASTE

HAZARDOUS WASTE

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 27505

N

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: American Can Co
2. EPA IDENTIFICATION NO.: WID 006119986
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: P.O. Box 702 Attn Larry P. Krueger
5. CITY, STATE, ZIP CODE: Neenah, Wis 54956
6. TELEPHONE NUMBER: 414-729-7000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Tanker	x 800	Waste Solvent	Flam	NA 1993	1. Solid 3. Mixture 2. Liquid [3]	D001 F003	x
			Liquid		1. Solid 3. Mixture 2. Liquid [ ]	F005	
					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: Larry P. Krueger
16. NAME (Print): Larry P. Krueger
17. DATE SHIPPED (M D Y): 5 10 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr Frank Inc
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th St.
21. CITY, STATE, ZIP CODE: So Holland, Ill 60476
22. TELEPHONE NUMBER: 312-596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Robert Perkins
25. NAME (Print): Robert Perkins
26. Date Accepted: 5 10 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. TRANSPORTER COMPANY 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: Colfax Ave 420 South
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46318
36. TELEPHONE NUMBER: 219-924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDVNF-EE
40. Date Accepted: M / D / Y

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. *Emergency 24 Hour Assistance Telephone Number*
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 112 E T-63
GRM 5.11.82

HAZARDOUS WASTE FACILITY

003523

METROPOLITAN SANITARY DISTRICT OF GREATER CHICAGO
100 EAST ERIE STREET • CHICAGO, IL 60611
INDUSTRIAL WASTE DIVISION (312) 751-5697

NO. 095305

INDUSTRIAL WASTE/SLUDGE GENERATION, SHIPMENT AND DISPOSAL RECORD

TYPE OF WASTE ▶ [X] LIQUID [ ] SLUDGE [ ] SOLID
TYPE OF CONTAINER ▶ [X] BULK TANK TRUCK [ ] DRUMS [ ] OTHER (SPECIFY)
VOLUME [illegible] GALS / CU. YDS. / LBS.

WASTE CONTAINS:

[ ] FATS, OILS OR GREASE [ ] ACID [ ] ALKALI
[ ] CYANIDE [ ] ZINC [ ] CADMIUM
[ ] COPPER [ ] CHROME [ ] IRON
[ ] NICKEL [ ] LEAD [ ] SELENIUM
[ ] MERCURY [X] OTHER (SPECIFY) WASTE SOLVENTS

DISPOSAL METHOD ▶ [ ] LANDFILL [ ] DESTRUCTION (SPECIFY) [X] OTHER (SPECIFY) [illegible]

NAME OF COMPANY [illegible] — FEDERAL TAX I. D. NUMBER [illegible]
LOCATION [illegible]
TYPE OF INDUSTRY [illegible] — DATE REMOVED [illegible] — TIME REMOVED [illegible]

I certify that the described waste, in the designated volume, was removed from this location by the contractor named below for legal disposal.

SIGNATURE OF AUTHORIZED AGENT AND TITLE [illegible] — PHONE [illegible]

NAME [illegible] — FEDERAL TAX I. D. NUMBER
ADDRESS [illegible] — DATE RECEIVED [illegible] — TIME RECEIVED [illegible]
WASTE HAULER'S REGISTRATION NO. [illegible] — STATE [illegible] — TRUCK LICENSE NO. [illegible]

I certify that the described waste, in the designated volume, was removed from the above location and delivered to the disposal site *designated below.*

SIGNATURE OF CONTRACTOR'S AGENT AND TITLE [illegible] — PHONE [illegible]

DISPOSAL SITE

NAME [illegible] — FEDERAL TAX I. D. NUMBER [illegible]
ADDRESS [illegible] — DATE RECEIVED [illegible] — TIME RECEIVED [illegible]

I certify that the above named contractor delivered the described waste, in the designated volume to this facility and same was received for lawful disposition as designated.

SIGNATURE OF OPERATOR AND TITLE [illegible] — PERMIT NO. — PHONE [illegible]

DISPOSAL SITE'S COPY

003529

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0039082
Out of State Disposal
Authorization Number

AMERICAN CAN Co. 6011 So. Western 312 434 6100
(Company Name) Address

Chicago IL. 60636
City State Zip

031600024 8 G
Generator Number

IL0074372517
EPA NUMBER

WASTE HAULER(S)

(1) MR. FRANK INC. 201 West 155th St. South HOLLAD IL. 312-596 3377
Hauler Name Hauler Address

S.W.H. Registration Number 0079001
ILD069506160
EPA NUMBER

(2) _____
Hauler Name Hauler Address

S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AM CHEMICAL P.O. Box 190 Phone Number 219 924 4370
(Facility Name) Address

GRIFFITH Indiana 64319
City State Zip

91808902
Site Number

IND016360265
EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:
UN NUMBER UN 1993

HAZARD CLASS:
FLAMMABLE

EPA Number F003

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12/21/82 Joseph P Szczap.
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 002500 (1 GALLONS / 2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry DATE: 12/22/82
(Authorized Signature)

(2) _____ DATE: ___/___/___
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ DATE: 12/22/82
(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART 1 GENERATOR PART 2 IEPA PART 3 SITE PART 4 HAULER PART 5 IEPA PART 6 GENERATOR

SITE COPY - PART 3

To 210 RT - 50 GPM 12-22-82

003530

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 26707

003531

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: American Can Co
2. EPA IDENTIFICATION NO.: WIS 0[illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: [illegible] Larry Krueger [illegible]
5. CITY, STATE, ZIP CODE: Neenah, Wis
6. TELEPHONE NUMBER: (414) 429-7000

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Hanker	5000	Coating, Printing, Laminating waste	Alcohol	NA 1993	1. Solid 3. Mixture 2. Liquid ☐		
			Liquid		1. Solid 3. Mixture 2. Liquid ☒	F005 F005	35,000
					1. Solid 3. Mixture 2. Liquid ☐	D001	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Larry Krueger
16. NAME (Print): Larry Krueger
17. DATE SHIPPED M D Y: 2 12 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Dee
19. EPA IDENTIFICATION NO.: ILD 069306160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th St
21. CITY, STATE, ZIP CODE: South Holland Ill 60476
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: 2 12 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND 0[illegible]
34. P.O. BOX OR STREET ADDRESS: Calumet Ave, 420 South
35. CITY, STATE, ZIP CODE: Griffith Ind 46318
36. TELEPHONE NUMBER: 219 924-4570
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: Frank James Price
39. NAME (Print): FRANK JAMES PRICE
40. Date Accepted: 2 13 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 210 K T-50
GRM 2/3/82

HAZARDOUS WASTE FACILITY

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0667226
Authorization Number 8 — 13

MEYERCORD COMPANY (Company Name) | 365 EAST NORTH AVE. (Address) | 312/682/6373 (Phone Number) | 0 4 3 0 2 0 0 0 0 4 G (14 — Generator Number — 24)

CAROL STREAM (City) | ILLINOIS (State) | 60187 (Zip) | I L D 0 0 5 1 0 3 5 9 3 (EPA Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) | 3009 S. SHIELDS (Hauler Address) | I C C S.W.H. Registration Number 3 0 0 5 (25 — 31)

312/721/0095 (Phone Number) | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number (32 — 38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420. S. COLFAX AVENUE (Address) | 9 1 8 0 8 9 0 2 (39 — Site Number — 46)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 219/924/4370 (Phone Number) | 0 1 6 3 6 0 2 6 5 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE ORGANIC SOLVENTS | WASTE PHASE: LIQUID/SOLID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS | HAZARD CLASS: 3/4

9 1 8 9 (UN or NA Number) | EPA HW Number

WEIGHT FOR D.O.T. USE: 10,450 LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 1045 (47 — 52) | 1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 19 Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH 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) F005 DATE: NOV. 15, 1982

WASTE HAULER

I HEREBY 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] (17) (Authorized Signature) DATE: 11/16/82 (54 — 59)

(2) _____ (Authorized Signature) DATE: / / (54 — 59)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE / YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Frank True (Authorized Signature) DATE: 11/17/82 (60 — 65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

76125 7-63 GRW 11-17-82

003532

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0667223
Authorization Number 9XXX24

MEYERCORD COMPANY (Company Name) | 1838 W. HASTINGS (Address) | 312/829/8776 (Phone Number) | 0 3 1 6 0 0 0 9 7 8 G (Generator Number)
CHICAGO (City) | ILLINOIS (State) | 60608 (Zip) | I L D 0 7 4 3 6 7 6 1 6 (EPA Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) | 3009 S. SHIELDS (Hauler Address) | I C C 3 0 0 5 (S.W.H. Registration Number)
312/721/0095 (Phone Number) | 0 0 9 8 4 2 8 2 4 (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 AVENUE (Address) | 9 1 8 0 8 9 0 2 (Site Number)
GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 219/924/4370 (Phone Number) | 0 1 6 3 6 0 2 6 5 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)
(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE ORGANIC SOLVENTS WASTE PHASE: LIQUID/SOLID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS.	UN or NA Number	EPA HW Number
WASTE SOLVENTS	3/4	9189	

WEIGHT FOR D.O.T. USE 3,850 (LBS) TONS (circle one) — WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 385 (1) GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 7 Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) F005 DATE: NOV. 15, 1982

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 11/16/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Frank Price (Authorized Signature) DATE: 11/17/82

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 125 R 7-63 Gal 11-17-82

003533

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0667225

Authorization Number 997199

MEYERCORD COMPANY	365 EAST NORTH AVENUE	312/682/6373	0430200004
(Company Name)	Address	Phone Number	Generator Number
CAROL STREAM	ILLINOIS 60187		ILD005103593
City	State Zip		EPA Number

WASTE HAULER(S)

LANDGREBE	3009 S. SHIELDS		ICC 3005-135
Hauler Name	Hauler Address		S.W.H. Registration Number
		312/721/0095	009842824
		Phone Number	EPA Number
Hauler Name	Hauler Address		S.W.H. Registration Number
		Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL	420 S. COLFAX AVENUE			91808902
(Facility Name)	Address			Site Number
GRIFFITH	INDIANA	46319	219/924/4370	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 ORGANIC SOLVENTS WASTE PHASE: LIQUID/SOLID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS
HAZARD CLASS: 3/4
UN or NA Number: 9189
EPA HW Number:

WEIGHT FOR D.O.T. USE 8,250 LBS TONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 825 (47–52)
1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 15 Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH 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: SEPT. 29, 1982

F005

WASTE HAULER

I HEREBY 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] (15) (Authorized Signature) DATE: 9/29/82 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 9/30/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3 To 125 R 7-63 61 PM 9.30 S2

003534

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0667224
1 7

Authorization Number 9 2 1 1 2 4
8 13

MEYERCORD COMPANY (Company Name) | 1838 W. HASTINGS (Address) | 312/829/8776 (Phone Number) | 0 3 1 6 0 0 0 9 7 8 G (14 Generator Number 24)

CHICAGO (City) | ILLINOIS (State) | 60608 (Zip) | I L D 0 7 4 3 6 7 6 1 6 (EPA Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) | 3009 S. SHIELDS (Hauler Address) | S.W.H. Registration Number I C C 3 0 0 5 - 1 3 5 (25 31)

312/721/0095 (Phone Number) | 0 0 9 8 4 2 8 2 4 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32 38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVENUE (Address) | 9 1 8 0 8 9 0 2 (39 Site Number 46)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 219/924/4370 (Phone Number) | 0 1 6 3 6 0 2 6 5 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39 Site Number 46)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR:

WASTE NAME: WASTE ORGANIC SOLVENTS | WASTE PHASE: LIQUID/SOLID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS | HAZARD CLASS: 3/4 | 9 1 8 9 (UN or NA Number) | (EPA HW Number)

WEIGHT FOR D.O.T. USE 7,150 LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 715 (47 52) | (1) GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 13 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH 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] F005 DATE: SEPT 29, 1982
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (13) (Authorized Signature) DATE: 9/29/82 (54 59)

(2) _____ (Authorized Signature) DATE: / / (54 59)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO_____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 9/30/82 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 125K T-63 GKM 9-30-82

003535

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0619258
Authorization Number 997199

MEYERCORD COMPANY (Company Name) | 365 EAST NORTH AVE. (Address) | 312/682/6373 (Phone Number) | 0 4 3 0 2 0 0 0 0 4 G (14 Generator Number 24)

CAROL STREAM (City) | ILLINOIS (State) | 60187 (Zip) | IL D 0 0 5 1 0 3 5 9 3 (EPA Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) | 3009 S. SHIELD (Hauler Address) | I C C, S.W.H. Registration Number 2980 3005 (25 31)

312/721/0095 (Phone Number) | 009-842-824 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32 38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVENUE (Address) | 9 1 8 0 8 9 0 2 (39 Site Number 46)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 219/924/4370 (Phone Number) | IND 0 1 6 3 6 0 2 6 5 (EPA Number)

Alternate (Facility Name) | Address | 39 Site Number 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE ORGANIC SOLVENTS | WASTE PHASE: LIQUID/SOLID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS | HAZARD CLASS: 3/4 | 9189 (UN or NA Number) | EPA HW Number

WEIGHT FOR D.O.T. USE 14,000 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 1540 (47 52) GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 28 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH 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 7-14-82

E005

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) F Schlunett SMT (Authorized Signature) DATE: 7/14/82 (54 59)

(2) _____ (Authorized Signature) DATE: / / (54 59)

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: (Authorized Signature)

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

DATE: 7/15/82 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS, 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 210 ET-50 GRM 7.15.82

003536

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0583345 (1–7)

Authorization Number ~~9 2 1 1 2 4~~ (8–13)

TO BE COMPLETED BY WASTE GENERATOR

MEYERCORD COMPANY (Company Name) | 1838 W. HASTINGS STREET (Address) | 312/829/8776 (Phone Number) | 0 3 1 6 0 0 0 9 7 8 (14–24 Generator Number)

CHICAGO (City) | ILLINOIS (State) | 60608 (Zip) | I L D 0 7 4 3 6 7 6 1 6 (EPA Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) | 3009 S. SHIELDS (Hauler Address) | I C C ~~3 0 0 5~~ 2980 (S.W.H. Registration Number 25–31)

312/721/0095 (Phone Number) | 009-842-824 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVENUE (Address) | 9 1 8 0 8 9 0 2 (39–46 Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 219/924/4370 (Phone Number) | IND 0 1 6 3 6 0 2 6 5 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39–46 Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE ORGANIC SOLVENTS | WASTE PHASE: LIQUID/SOLID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS | HAZARD CLASS: 3/4 | 9189 (UN or NA Number) | (EPA HW Number)

WEIGHT FOR D.O.T. USE 1500 LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 165 (47–52) | 1 GALLONS (Circle One) / ~~2 CU YDS~~ (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 3 Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify) VAN TRAILER

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE ~~7-18-82~~ F005

WASTE HAULER

I HEREBY 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) [signature] DATE: 7/14/82 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE 7/15/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 210 ET-50 GCM 7/15/82

003537

IL 532-610
LPC 52 8/81

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0619257
1 7

Authorization Number 997199
8 13

TO BE COMPLETED BY WASTE GENERATOR

MEYERCORD COMPANY (Company Name) | 365 EAST NORTH AVENUE (Address) | 312/682/6373 (Phone Number) | 0 4 3 0 2 0 0 0 0 4 (14 Generator Number 24)

CAROL STREAM (City) | ILLINOIS (State) | 60187 (Zip)

I L D 0 0 5 1 0 3 5 9 3 (EPA Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) | 3009 S. SHIELDS (Hauler Address) | I C C | S.W.H. Registration Number 3005-126 (25 31)

312/721/0095 (Phone Number) | [illegible] (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32 38)

(Phone Number) | (EPA Number)

DESTINATION - DISPOSAL, STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVENUE (Address) | 9 1 8 0 8 9 0 2 (39 Site Number 46)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 219/924/4370 (Phone Number) | IND016360765 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39 Site Number 46)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE ORGANIC SOLVENTS | WASTE PHASE: LIQUID/SOLID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS | HAZARD CLASS: 3/4 | 9189 (UN or NA Number) | (EPA HW Number)

WEIGHT FOR D.O.T. USE 4400# LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 665 (47 52) | GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 11 Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) F005 DATE: 6-22-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) LMT F Schlundt (Authorized Signature) DATE: 6/23/82 (54 59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 6/24/82 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS, 217 / 782-3637 OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. 4 (8/81)

SITE COPY - PART 3

To 124R T-63 GRM 6-24-82

003538

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0583344 (1–7)

Authorization Number 9 2 1 1 2 4 (8–13)

MEYERCORD COMPANY (Company Name) | 1838 W. HASTINGS ST. (Address) | 312/829/8776 (Phone Number) | 0 3 1 6 0 0 0 0 9 7 8 G (14–24 Generator Number)

CHICAGO (City) | ILLINOIS (State) | 60608 (Zip) | I L D 0 7 4 3 6 7 6 1 6 (EPA Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) | 3009 S. SHIELDS (Hauler Address) | I C C S.W.H. Registration Number 3 0 0 5 – 1 2 6 (25–31)

~~312/721/0095~~ (Phone Number) | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVENUE (Address) | 9 1 8 0 8 9 0 2 (39–46 Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 219/924/4370 (Phone Number) | 0 1 6 3 6 0 2 6 5 (EPA Number)

Alternate (Facility Name) | Address | (39–46 Site Number)

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE ORGANIC SOLVENTS | WASTE PHASE: LIQUID/SOLID (7 — Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS | HAZARD CLASS: 3/4 | 9189 (UN or NA Number) | EPA HW Number

WEIGHT FOR D.O.T. USE 3700 LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 440 (47–52) | (1) GALLONS (Circle One) (2) CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS X8 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH 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) F005 DATE: 6-22-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 6/23/82 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE: 6/24/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3 To 124 RT-63 CRM 6.24.82

003539

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0583341 (1–7)

Authorization Number 997199 (8–13)

MEYERCORD COMPANY (Company Name) | 365 EAST NORTH AVENUE (Address) | 312/682/6373 (Phone Number) | 0430200004 (14–24 Generator Number)

CAROL STREAM (City) | ILLINOIS (State) | 60187 (Zip) | ILD005103593 (EPA Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) | 3009 S. SHIELDS (Hauler Address) | S.W.H. Registration Number ICC 3005-134 (25–31)

312/721/0095 (Phone Number) | IND 009842824 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVENUE (Address) | 9180890 2 (39–46 Site Number)

GRIFFTH (City) | INDIANA (State) | 46319 (Zip) | 219/924/4370 (Phone Number) | 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39–46 Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE ORGANIC SOLVENTS | WASTE PHASE: LIQUID/SOLID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
WASTE SOLVENTS	3/4	9189	F005

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 825 (47–52) (1) GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ~~X~~ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) F005 DATE: ~~MAY 4, 1982~~

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 5/4/82 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE 5/6/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 5-6-82 GRM

To 125K T-63 GRM 5-6-82

003540

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0583343
Authorization Number 9 2 1 1 2 4

MEYERCORD COMPANY (Company Name) | 1838 W. HASTINGS ST. (Address) | 312/829/8776 (Phone Number)

CHICAGO (City) | ILLINOIS (State) | 60608 (Zip)

~~0316000978~~ Generator Number | ~~ILD074367616~~ EPA Number

WASTE HAULER(S)

LANDGREBE (~~LANGREBE~~) (Hauler Name) | 3009 S. SHIELDS (Hauler Address) | 312/721/0095 (Phone Number)

ICC 3005-134 S.W.H. Registration Number

IND 009842824 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 AVENUE (Address) | 9 1 8 0 8 9 0 2 Site Number

GRIFFTH (City) | INDIANA (State) | 46319 (Zip) | 219/924/4370 (Phone Number) | 0 1 6 3 6 0 2 6 5 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE ORGANIC SOLVENTS | WASTE PHASE: LIQUID/SOLID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS | HAZARD CLASS: 3/4 | ~~9189~~ 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: 385 (47–52) (1) GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS X Number) TANK TRUCK OPEN TRUCK OTHER (Specify) UAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) F005 DATE: MAY 5, 1982

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 5/14/82 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

[signature] (Authorized Signature) DATE: 5/6/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 | OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 5-6-82 GRN To 125 RT-63 GRN 5-6-82

003541

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0555056

Authorization Number 997199

(Company Name)	Address	Phone Number	Generator Number
MEYERCORD COMPANY	365 EAST NORTH AVE	312/682/6373	0430200004 G

City	State	Zip	EPA Number
CAROL STREAM	ILLINOIS	60187	ILD005103593

WASTE HAULER(S)

Hauler Name	Hauler Address	Phone Number	S.W.H. Registration Number / EPA Number
LANDGREBE	3009 S. SHIELDS	312/721/0095	ICC3005-123

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number
AMERICAN CHEMICAL	420 S. COLFAX AVE	91808902

City	State	Zip	Phone Number	EPA Number
GRIFFTH	INDIANA	46319	219/924/4370	016360265

Alternate (Facility Name)	Address	Site Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE ORGANIC SOLVENTS WASTE PHASE: LIQUID/SOLID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS

HAZARD CLASS: 3/4

UN or NA Number: 9189

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: 935 (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 L A Henderson (Authorized Signature) DATE: MARCH 18, 1982

F005

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE 3/18/82 (54–59)

(2) _____ (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Frank James Price (Authorized Signature) DATE 3/19/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3 To 125 K T-63 GPM 3/19/82

003542

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0583340 (1–7)

Authorization Number 997199 (8–13)

MEYERCORD COMPANY (Company Name) | 365 E. NORTH AVENUE (Address) | 312/682-6373 (Phone Number) | 0430200004 G (14 Generator Number 24)

CAROL STREAM (City) | ILLINOIS (State) | 60187 (Zip) | ILD005103593 (EPA Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) | 3009 S. SHIELDS (Hauler Address) | ICC S.W.H. Registration Number 3005-148 (25–31)

312/721/0095 (Phone Number) | IND009842824 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVENUE (Address) | 91808902 (39 Site Number 46)

GRIFFTH (City) | INDIANA (State) | 46319 (Zip) | 219/924/4370 (Phone Number) | 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39 Site Number 46)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE ORGANIC SOLVENTS | WASTE PHASE: LIQUID/SOLID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
WASTE SOLVENTS	3/4	9189	

WEIGHT FOR D.O.T. USE ____ LBS / ____ TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 1540 (47–52) (1) GALLONS (Circle One) (2) CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 28 Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH 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) F005 DATE: ~~FEB 8, 1982~~

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 2/8/82 (54–59)

(2) ____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE: 2/29/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3 Ondock 2/9/82

12 To 126 R T-63 GRM 2/17/82
16 to 210 R T-50 GRM 2/17/82

003543

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

0555054 (1–7)

Authorization Number 997199 (8–13)

MEYERCORD COMPANY (Company Name) | 365 E. NORTH AVE (Address) | 3126826373 (Phone Number) | 04302000004 G (14 Generator Number 24)

CAROL STREAM (City) | ILLINOIS (State) | 60187 (Zip) | ILD000510359 3 (EPA Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) | 3009 S. SHIELDS (Hauler Address) | ICC S.W.H. Registration Number 3005-133 (25–31)

312/721/0095 (Phone Number) | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVE (Address) | 9180890 2 (39 Site Number 46)

GRIFFTH (City) | INDIANA (State) | 46319 (Zip) | 219/924/4370 (Phone Number) | 0163602 65 (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: WATE ORGANIC SOLVENTS | WASTE PHASE: LOQUID/SOLID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
WASTE SOLVENTS	3/4	9189	

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 2,0900 (47–52) (1) GALLONS (Circle One) (2) CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ✓ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) F005 DATE: ~~JAN 7, 1982~~

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Mitchell S. Mullas (Authorized Signature) DATE: 1/7/82 (54–59)

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

[signature] (Authorized Signature) DATE: / / (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 125R T-63 6PM 1/7/82

003544

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

LYNWOOD SUPPLY CO,INC(LSC SERVICES,INC) — NAME OF CARRIER (SCAC)

0980/001 — CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER		HART SCHAFFNER & MARKZS,CORPORATION DES PLAINS,ILL.	1-20-82
TRANSPORTER # 1	~~IN-4527304011~~ IL-0980/001	~~LSC SERVICES,INC.~~ 1950 OLD PORTER ROAD ~~PORTER,INDIANA 46304~~ PHONE 219 762 4955	1-20-82
TRANSPORTER # 2 (if required)	N/A		
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		AMERICAN CHEMICAL SERVICE,INC. ~~COLFAX ST AT REDER ROAD~~ GRIFFITH,INDIANA 46319 ~~PHONE 219 924 4370~~	3/[illegible]
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)
15~~X~~55 ~~XXXXXX~~ DRUMS	ORMA	N/A	1,1,1, TRICHLOROETHANE (DIRTY) CLASS ORMA	2831	NONE		605	9000	2.79	CWT

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
BILL TO PETRO PRODUCTS,INC CHGO,ILL.60610

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: LSC SERVICES,INC. 1950 OLD PORTER ROAD PORTER,INDIANA 46304
ADDRESS

COD Amt: $

C.O.D. FEE PREPAID ☒ XXXXXXX 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.

HART SCHAFFNER & MARKZ, CORPORATION

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

LSC SERVICES, INC.

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 122 TCT-63 GPM 4.1.82 TSDF COPY On dock 3/10/82

003545

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 17251

003546

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: HARNISCHFEGER CORP.
2. EPA IDENTIFICATION NO.: WI0096348321
3. COMMENTS/SPECIAL INSTRUCTIONS: FLAMMABLE WASTE - VEHICLE TAGGED PER EPA REQUIREMENTS
4. P.O. BOX OR STREET ADDRESS: 4400 W. NATIONAL AVE.
5. CITY, STATE, ZIP CODE: MILWAUKEE WI 53246
6. TELEPHONE NUMBER: (414)-671-4400

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US 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 5000 GAL TANKER	5000	HAZARDOUS WASTE N.O.S.		NA9189	1. Solid 3. Mixture 2. Liquid [X]	FU17	[illegible]
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): ANDREW TOTH IV
17. DATE SHIPPED M D Y: 8/9/82

TRANSPORTER SECTION

18. COMPANY NAME: RON LARSON TRUCKING
19. EPA IDENTIFICATION NO.: ILD043904549
20. P.O. BOX OR STREET ADDRESS: P.O. Box 153
21. CITY, STATE, ZIP CODE: NORTH CHICAGO ILL. 60064
22. TELEPHONE NUMBER: (312). 68[illegible]
23. COMMENTS: [illegible] LIC. # 11319

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted 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): RALPH LUBBERS
26. Date Accepted M D Y: 8/9/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: AMERICAN CHEMICAL SERVICE INC
33. EPA IDENTIFICATION NO.: IND016361265
34. P.O. BOX OR STREET ADDRESS: 420 COLFAX
35. CITY, STATE, ZIP CODE: GRIFFITH IN 46319
36. TELEPHONE NUMBER: (312)-327-0290 (CHC)
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): EDUNFEE
40. Date Accepted M D Y: 8/9/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 210 K T-50
GRM 8.9.82

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

0552355
1 7

Authorization Number 9 9 7 0 0 4
8 13

HANDSCHY INDUSTRIES, INC. (Company Name) | 13601 S. ASHLAND AVE. (Address) | 312-59787990 (Phone Number) | 0 3 1 2 5 8 0 0 0 1 G (14 Generator Number 24)

RIVERDALE (City) | ILLINOIS (State) | 60627 (Zip) | I L D 0 0 5 1 0 4 4 4 3 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th STREET SO. HOLLAND (Hauler Address) | S.W.H. Registration Number 0 0 9 9 6 2 9 (25 37)

312-596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 0 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32 38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

~~AMERICAN CHEMICAL SERVICE~~ (Facility Name) | ~~420 S. COLFAX AVENUE~~ (Address) | 0 1 8 0 8 9 0 (39 Site Number 46)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | I N D 0 1 6 3 0 2 6 5 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39 Site Number 46)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASH INK | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: BULK LIQUID | HAZARD CLASS: FLAMMABLE LIQUID

~~U N 1 9 9 3~~ (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: 0 0 5 0 0 0 (47 52) | (1) GALLONS (2) CU. YDS. (Circle One) | 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION x [signature] (Authorized Signature) | DATE: 4-29-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Ronald Brockmeyer (Authorized Signature) | DATE 4/29/82 (54 59)

(2) _____ (Authorized Signature) | DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) | DATE 4/29/82 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 | OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 120 RT-63 6PM 4/29/82

003547

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0163996 (1–7)

WASTE GENERATOR

Authorization Number 9 9 7 2 4 8 (8–13)

Handschy Industries, Inc. (Company Name) | 2525 N. Elston Ave. (Address)

Chicago (City) | Illinois (State) | 60647 (Zip)

0 3 1 6 0 0 0 3 7 6 G (14–24) Generator Number

WASTE HAULER(S)

(1) Mr. Frank Indust. (Hauler Name) | 201 W. 155th St. (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 2 1 (25–31)

South Holland Ill. | 312 596 3377 | ILD006950616 0

(2) _____ (Hauler Name) | _____ (Hauler Address) | S.W.H. Registration Number _____ (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

312-768-3400

American Chem. (Facility Name) | 420 Colfax (Address) | 9 1 8 0 8 9 0 2 (39–46) Site Number

Griffith (City) | Indiana (State) | 46319 (Zip) | IND016360765

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvents | 7003 | UN1993

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Combustible | HAZARD CLASS: Non-Hazardous

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-24-82 | Roy Hawley (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED 04800 (47–52) (GALLONS) 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) [signature] (Authorized Signature) DATE 5 24 82 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[signature] (Authorized Signature) DATE: 5-24-82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

To 210 RT-50 GRM 5-24-82

003548

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL
DIVISION OF LAND POLLUTION
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

HANDSCHY INDUSTRIES, INC. (Company Name) | 13601 S. ASHLAND AVE. (Address) | 312-597-7990 (Phone Number) | 0 3 1 2 5 8 0 0 0 1 (14–24 Generator Number)

RIVERDALE (City) | ILLINOIS (State) | 60627 (Zip) | I L D 0 0 5 1 0 4 4 4 3 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th STREET SO. HOLLAND (Hauler Address) | S.W.H. Registration Number 0079003. (25–31)

312-596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 0 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVENUE (Address) | 0 1 8 0 8 9 0 7 (39–46 Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | I N 0 1 6 3 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 INK | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: BULK LIQUID | HAZARD CLASS: FLAMMABLE LIQUID | U N 1 9 9 3 (UN or NA Number) | F003 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000 (47–52) | 1 GALLONS / 2 CU. YDS. (Circle One) | 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 5/27/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 05/27/82 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

_____ (Authorized Signature) DATE: 5/27/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: 10:00

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 120 FT-63 GRM 5-27-82

003549

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552364 (1–7)

Authorization Number 9 9 7 0 0 4 (8–13)

HANDSCHY INDUSTRIES, INC. (Company Name) | 13601 S. ASHLAND AVE. (Address) | 312-597-7990 (Phone Number) | 0 3 1 2 5 8 0 0 0 1 G (14–24 Generator Number)

RIVERDALE (City) | ILLINOIS (State) | 60627 (Zip) | I L D 0 0 5 1 0 4 4 4 3 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th STREET SO. HOLLAND (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 3 (25–31) 014

312-596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 0 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVENUE (Address) | 9 1 8 0 8 9 0 2 (39–46 Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | I N 0 1 6 3 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 INK | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: BULK LIQUID | HAZARD CLASS: FLAMMABLE [redacted]

U N 1 9 9 3 (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: 0 0 4 5 0 0 (47–52) 1: GALLONS (Circle One) 2: CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 6-25-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE 06/25/82 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 6/25/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 120 KT-63 GPM 6-25-82

003550

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552366
1 7

Authorization Number ____ 8 13

HANDSCHY INDUSTRIES, INC. (Company Name) | 13601 S. ASHLAND AVE. (Address) | 312-597-7990 (Phone Number) | 0 3 1 2 5 8 0 0 0 1 G (Generator Number) 14 24

RIVERDALE (City) | ILLINOIS (State) | 60627 (Zip) | I L D 0 0 5 1 0 4 4 4 3 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th STREET SO. HOLLAND (Hauler Address) | S.W.H. Registration Number 0079/018 25 31

312-596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 0 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number ____ 32 38

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVENUE (Address) | 9 1 8 0 8 9 0 2 (Site Number) 39 46

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | I N 0 1 6 3 0 2 6 5 (EPA Number)

Alternate (Facility Name) | Address | Site Number 39 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASH INK | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: BULK LIQUID | HAZARD CLASS: FLAMMABLE LIQUID | U N 1 9 9 3 (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: 005,000 47 52 | 1 GALLONS (Circle One) 2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 7-13-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 7/13/82 54 59

(2) ____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 7/13/82 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3 TO 120 E T-63 6KM 7.13.82

003551

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

0552367 (1–7)

Authorization Number ____ (8–13)

HANDSCHY INDUSTRIES, INC. (Company Name) | 13601 S. ASHLAND AVE. (Address) | 312-597-7990 (Phone Number) | 0 3 1 2 5 8 0 0 0 1 G (14–24 Generator Number)

RIVERDALE (City) | ILLINOIS (State) | 60627 (Zip) | I L D 0 0 5 1 0 4 4 4 3 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th STREET SO. HOLLAND (Hauler Address) | S.W.H. Registration Number 0079019 (25–31)

312-596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 0 (EPA Number)

____ (Hauler Name) | ____ (Hauler Address) | S.W.H. Registration Number ____ (32–38)

____ (Phone Number) | ____ (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVENUE (Address) | 9 1 8 0 8 9 0 2 (39–46 Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | I N 0 1 6 3 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 INK WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:		
BULK LIQUID	FLAMMABLE LIQUID	U N 1 9 9 3 (UN or NA Number)	K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 6 4 5 0 0 (47–52) (1) GALLONS (2) CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION. [signature] (Authorized Signature) DATE: 8-30-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Donald H Burt (Authorized Signature) DATE: 08/30/82 (54–59)

(2) ____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

[signature] (Authorized Signature) DATE: 8/30/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To IDOT-7-63 6PM 8-30-82 003552

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0653411 (1–7)

Authorization Number ____ (8–13)

TO BE COMPLETED BY WASTE GENERATOR

RANDSCHY INDUSTRIES, INC. | 13601 S. ASHLAND AVE. | 312-597-7990 | 0 3 1 2 5 8 0 0 0 1 G (14–24)
(Company Name) | Address | Phone Number | Generator Number

RIVERDALE | ILLINOIS | 60627 | I L D 0 0 5 1 0 4 4 4 3
City | State | Zip | EPA Number

WASTE HAULER(S)

MR. FRANK | 201 W. 155th ST. SO. HOLLAND | S.W.H. Registration Number 0079018 (25–31)
Hauler Name | Hauler Address

312-596-3377 | I L D 0 6 9 5 0 6 1 6 0
Phone Number | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE | 420 S. COLFAX AVE. | 9 1 8 0 8 9 0 2 (39–46)
(Facility Name) | Address | Site Number

GRIFFITH | INDIANA | 46319 | 2199244370 | I N D 0 1 6 3 6 0 2 6 5
City | State | Zip | Phone Number | EPA Number

Alternate (Facility Name) | Address | (39–46) Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASH INK | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: BULK LIQUID

HAZARD CLASS: FLAMMABLE LIQUID — U N 1 9 9 3 (UN or NA Number) | K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 (47–52) (1 GALLONS (Circle One) / 2 CU. YDS.) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Millard L. Spare (Authorized Signature) DATE: 9/21/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) ____ (Authorized Signature) DATE: 09/21/82 (54–59)

(2) ____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

____ (Authorized Signature) DATE: 9/21/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3 To 210 K T-50 E/M 9-21-82

003553

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0163997 (1–7)

WASTE GENERATOR

Authorization Number [redacted] (8–13)

HANDSCHY INDUSTRIES (Company Name) | 2525 N. ELSTON AVE. (Address) | NON HAZARDOUS

CHICAGO (City) | ILLINOIS (State) | 60647 (Zip)

0 3 1 6 0 0 0 3 7 6 G (14–24) Generator Number

WASTE HAULER(S)

(1) MR. FRANK INDUST. (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | 312-596-3377 | S.W.H. Registration Number 0 0 7 9 0 1 9 (25–31) | ILD069506160

(2) _____ (Hauler Name) | _____ (Hauler Address) | S.W.H. Registration Number _____ (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

312 765 3400

AMERICAN CHEM. (Facility Name) | 420 COLFAX (Address) | 9 1 8 0 8 9 0 2 (39–46) Site Number

GRIFFITH (City) | INDIANA (State) | _____ (Zip) | IND016360267

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: COMBUSTIBLE | UN1993 | RQ03 | HAZARD CLASS: NON-HAZARDOUS

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/12/82 | Yoni Miyagawa (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED 003000 (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) Michael D Morton (Authorized Signature) | DATE 10/12/82 (54–59)

(2) _____ (Authorized Signature) | DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ (Authorized Signature) | DATE 10/12/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

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 KT-506 RM 10-12-82

003554

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0653429
1 7

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number ____ 8 13

Handschy Industries, Inc. | 13601 S. Ashland Ave. | 312-597-7990 | 0312580001 XXXXXXXXXXXXXXXXX G
(Company Name) | Address | Phone Number | 14 Generator Number 24

Riverdale, | Illinois | 60627 | ILD005104443
City | State | Zip | EPA Number

WASTE HAULER(S)

Mr. Frank | 201 W. 155th St. South Holland | S.W.H. Registration Number 0079025 (25 31)
Hauler Name | Hauler Address

312-596-3377 | ILD069506 16
Phone Number | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number (32 38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service | 420 S. Colfax Avenue | 9180890 2 (39 Site Number 46)
(Facility Name) | Address

Griffith | Indiana | 46319 | 312766340 | IND016360265
City | State | Zip | Phone Number | EPA Number

Alternate (Facility Name) | Address | (39 Site Number 46)

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash Ink | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Bulk Liquid	Flammable Liquid	UN1993	K078

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 (47 52) ~~GALLONS (Circle One)~~ 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X [signature] (Authorized Signature) DATE: 11/15/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 11/15/82 (54 59)

(2) ____ (Authorized Signature) DATE: ____ (54 59)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 11/15/82 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 120 K T-63 6AM 11/15 003555

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0653380
1 7

Authorization Number ____ 8 13

HANDSCHY INDUSTRIES, (Company Name) | INC. 13601 S. ASHLAND AVE. (Address) | 312-597-7990 (Phone Number) | 0 3 1 2 5 8 0 0 0 1 G (14 Generator Number 24)

RIVERDALE, (City) | ILLINOIS (State) | (Zip) | 60627 | I L D 0 0 5 1 0 4 4 4 3 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th ST. HOUTH HOLLAND (Hauler Address) | S.W.H. Registration Number 0079009 (25 31)

3 1 2 - 5 9 6 - 3 3 7 7 (Phone Number) | I L D 0 6 9 5 0 6 1 6 0 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32 38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVENUE (Address) | 9 1 8 0 8 9 0 2 (39 Site Number 46)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | (Phone Number) | IN D 0 1 6 3 6 0 2 6 5 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39 Site Number 46)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASH INK | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: BULK LIQUID | HAZARD CLASS: FLAMMABLE LIQUID | U N 1 9 9 3 (UN or NA Number) | K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE ____ LBS. TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 005000 (47 52) | 1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ John S. Metrick (Authorized Signature) | DATE: ____

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Michael Morton (Authorized Signature) | DATE: 12/14/82 (54 59)

(2) ____ (Authorized Signature) | DATE: ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) | DATE: 12/14/82 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 117K T-63 GKM 12.14.82

003556