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

0287042 (1–7)

Authorization Number 993234 (8–13)

ETHICON INC (Company Name) | 5001 W. 67TH ST. (Address)
CHICAGO (City) | ILL. (State) | 60638 (Zip)

031 6000260 G (14–24 Generator Number)
ILD 010300531

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE (Hauler Name) | GRIFFITH IND (Hauler Address)
S.W.H. Registration Number (25–31) SWH 031101 2
ILT 000646810

STRAND TRUCKING (Hauler Name) | CRESTWOOD, IL (Hauler Address)
S.W.H. Registration Number (32–38) ILT 000646810

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 4020 S. COLFAX (Address)
GRIFFITH (City) | INDIANA (State) | 46319 (Zip)
9180902 (39–46 Site Number)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: POLISHING 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: DRUMMED
HAZARD CLASS: COMBUSTIBLE
WEIGHT FOR D.O.T. USE 37,350 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 83
QUANTITY OF WASTE DELIVERED: 4565 (47–52)
1 GALLONS (Circle One) / 2 CU. YDS. (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-25-82

G. Stowell
(Authorized Signature)

US EPA RECORDS CENTER REGION 5
460645

WASTE HAULER

I HEREBY CERTIFY 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: 3/25/82 (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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael T Burke (Authorized Signature) DATE: 3 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

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

On dock 3/25/82 GRM
To 210K T-50 GRM 6-2-82

SITE COPY - PART 3

002578

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

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

SPECIAL WASTE HAULING MANIFEST

Authorization Number 0287037 (8–13)

ETHICON INC (Company Name) | 5001 W. 67TH ST, (Address)
CHICAGO (City) | ILL. (State) | 60638 (Zip)
0316000260 G (14–24) Generator Number
ILD 010300531

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | 13642 KENTON (Hauler Address) | S.W.H. Registration Number 0311004 (25–31)
LEASED BY ECOLOGICAL TRANSFER (Hauler Name) | CRESTWOOD IL (Hauler Address) 385-8440 | ILT 0006468.0 S.W.H. Registration Number (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE (708-388-3400)

AMERICAN CHEMICAL SERVICE (Facility Name) | 4020 S. COLFAX (Address) | 91808902 (39–46) Site Number
GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND 016 360 265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: POLISHING 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: DRUMMED | HAZARD CLASS: COMBUSTIBLE | WEIGHT FOR D.O.T. USE 24300 (LBS) TONS (circle one)
UN 1993

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. ~~55~~ 54 | QUANTITY OF WASTE DELIVERED: 002970 (47–52) | GALLONS (Circle One) 2 CU. YDS. (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-1-82 | (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: 7 1 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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) | DATE: 7 1 82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

TO 210 RT · 50 GRM 7.1.82

SITE COPY - PART 3

002579

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

0691
1

Authorization Number ____ 8 ____ 13

TO BE COMPLETED BY WASTE GENERATOR

ETHICON INC (Company Name) | 5001 W. 67TH ST (Address) | 3127678171 (Phone Number) | 03160000260 G (14 Generator Number 24)

CHICAGO (City) | IL. (State) | 60638 (Zip) | ILD010300531 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | 13642 KENTON (Hauler Address) | S.W.H. Registration Number 03 11 011 (25 31)

LEASED BY ECOLOGICAL TRANSFER (Hauler Name) | CRESTWOOD, ILLINOIS (Hauler Address) | 3123858440 (Phone Number) | ILD000646810 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL, STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVE (Address) | 9180902 (39 Site Number 46)

GRIFFITH (City) | IN. (State) | 46319 (Zip) | 2197683400 (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: POLISHING SLUDGE WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
ORGANIC SOLVENT	FLAMMABLE	UN1993	F005

WEIGHT FOR D.O.T. USE 23600 LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 003245 (47 52) G (2) GALLONS (Circle One) / CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 59 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) VAH

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (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) Stan Strand (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 WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael C Davis (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 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 To 204 TK To S.W. T-50 GKM 11-29-82

002560

TO BE COMPLETED BY WASTE GENERATOR

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

0165820
1 7

Authorization Number 997250
8 13

ETHYL PRODUCTS COMPANY (Company Name) | 3600 W. PRATT AVE. (Address)

0 3 1 6 0 0 0 3 7 4 G
14 Generator Number 24

CHICAGO (City) | ILLINOIS (State) | 60645 (Zip)

WASTE HAULER(S)

(1) AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX AVE. GRIFFITH IN (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 1 / ILT000646810
25 31

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | SAME AS ABOVE (Address)

9 1 8 0 8 9 0.2
39 Site Number 46

IND016360265

City | State | Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: USED ACETONE

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: SOLVENTS

HAZARD CLASS: FLAMMABLE

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/5/82

Sharon L Cruse (Authorized Signature)

WASTE HAULER*

1500 lbs

QUANTITY OF WASTE RECEIVED: 0 0 0 1 6 5
47 52

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

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

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

(1) _____ (Authorized Signature) DATE: 2/5/82
54 59

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

_____ (Authorized Signature) DATE: 2/12/82
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

T0210 R
T-50 61201 2/19/82

On dock 2/15/82 6RM 2/15/82

002581

COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0559224

Authorization Number 997250

ETHYL PRODUCTS COMPANY (Company Name) | 3600 W. PRATT AVE. (Address) | 312-675-9000 (Phone Number) | 0316000374 G (Generator Number)

CHICAGO (City) | ILLINOIS (State) | 60645 (Zip) | ILD540972688 (EPA Number)

WASTE HAULER(S)

AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX AVE. GRIFFITH IN. (Hauler Address) | S.W.H. Registration Number 0024001

Phone Number | ILT000646810 (EPA Number)

STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILLINOIS (Hauler Address) | S.W.H. Registration Number

Phone Number | IND163602 65 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | SAME AS ABOVE (Address) | 91808902 (Site Number)

City | 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: USED ACETONE WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: SOLVENTS

HAZARD CLASS: FLAMMABLE

UN or NA Number | EPA HW Number

WEIGHT FOR D.O.T. USE 1600 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 000220 (47–52) 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 4 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 Sharon L. Cruse (Authorized Signature) DATE: 3/18/82

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) Thomas Strand (Authorized Signature) DATE: 03/18/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

Michael C Burg (Authorized Signature) DATE 3/15/82

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 On dock 3/18/82

To 109 RT-636 PM 3/19/82

002582

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0559225

Authorization Number 997250

ETHYL PRODUCTS COMPANY (Company Name) | 3600 W. PRATT AVE, (Address) | 312-657-9000 (Phone Number) | 0316000374 G (Generator Number)

CHICAGO (City) | ILLINOIS (State) | 60645 (Zip) | ILD540972688 (EPA Number)

WASTE HAULER(S)

AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX AVE. GRIFFITH IN. (Hauler Address) | S.W.H. Registration Number 0024002

K3522558440 (Phone Number) | ILT000646810 (EPA Number)

STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILLINOIS (Hauler Address) | S.W.H. Registration Number

LND163602 65 (EPA Number)

Phone Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | SAME AS ABOVE 420 S. Colfax (Address) | 91808902 (Site Number)

Griffith (City) | IN (State) | 46319 (Zip) | 3127683400 (Phone Number) | IN0016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: USED ACETONE WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: SOLVENTS

HAZARD CLASS: FLAMMABLE

UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 2000 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 000275 (47–52) 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 5 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Sharon L Cruse (Authorized Signature) DATE: 5/25/82

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) Stan Strand (Authorized Signature) DATE: 5/25/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

Michael O Bury (Authorized Signature) DATE: 5/25/82

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 5-25-82 GRM
To 109 KT-63 GRM 5-27-82

002583

STATE OF ILLINOIS

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

1 -- COMPLETED BY WASTE GENERATOR

0559227
1 7

Authorization Number ~~9 9 7 2 5 0~~
8 13

ETHYL PRODUCTS CO. (Company Name) | 3600 W. PRATT AVE. (Address) | 312-675-9000 (Phone Number) | 0 3 1 6 0 0 0 3 7 4 G (14 Generator Number 24)

CHICAGO (City) | ILLINOIS (State) | 60645 (Zip) | I L D 5 4 0 9 7 2 6 8 8 (EPA Number)

WASTE HAULER(S)

AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX AVE. GRIFFITH IN. (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 2 (25 31)

Phone Number | I L T 0 0 0 6 4 6 8 1 (EPA Number)

STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILLINOIS (Hauler Address) | S.W.H. Registration Number (32 38)

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | SAME AS ABOVE (Address) | 9 1 8 0 8 9 0 2 (39 Site Number 46)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | 312 7653400 (Phone Number) | IN 0016360265 (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: USED ACETONE | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: SOLVENTS 1200 | HAZARD CLASS: FLAMMABLE | U N 1 9 9 3 (UN or NA Number) | F 0 0 5 (EPA HW Number)

WEIGHT FOR D.O.T. USE ____ (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED 0 0 0 1 6 5 (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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Sharon L Cruse (Authorized Signature) | DATE: 7/15/82

WASTE HAULER

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

(1) A. Lindell (Authorized Signature) | DATE: 7/15/82 (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:

Michael Burg (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 109 R-T-63 GPM 7-15-82

002584

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

No. 0559228

Authorization Number

ETHYL PRODUCTS CO.	3600 W. PRATT AVE.	312-675-9000	0316000374
(Company Name)	Address	Phone Number	Generator Number
CHICAGO	ILLINOIS 60645		ILD540972688
City	State Zip		EPA Number

WASTE HAULER(S)

AMERICAN CHEMICAL	420 S. COLFAX AVE. GRIFFITH IN.		0024001
Hauler Name	Hauler Address		S.W.H. Registration Number
		[illegible]	ILT0006468 1
		Phone Number	EPA Number
STRAND TRUCKING	CRESTWOOD, ILLINOIS		
Hauler Name	Hauler Address		S.W.H. Registration Number
			IND16360265
		Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL	420 S. COLFAX AVE.			91808902
(Facility Name)	Address			Site Number
GRIFFITH	INDIANA	46319	312-768-3400	[redacted]
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: USED ACETONE WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	[redacted]	
SOLVENTS	FLAMMABLE	UN1993	F005
		UN or NA Number	EPA HW Number

WEIGHT FOR D.O.T. USE 800 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 000110 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 2 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Sharon L. Cruse (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) Stan Strand (Authorized Signature) DATE: 8/12/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

Michael O Bwg (Authorized Signature) DATE: 8/12/82

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

TC 121RT-63 GRM 8.12.82

002585

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0559230

Authorization Number

ETHYL PRODUCTS CO. | 3600 W. PRATT AVE. | 312-675-9000 | 0 3 1 6 0 0 0 3 7 4

(Company Name) | Address | Phone Number | Generator Number

CHICAGO | ILLINOIS | 60645 | I L D 5 4 0 9 7 2 6 8 8

City | State | Zip | EPA Number

WASTE HAULER(S)

AMERICAN CHEMICAL | 420 S.COLFAX AVE. | GRIFFITH IN. | 0 0 2 4 0 0 1

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

312-385-8440 | I L T 000646810

Phone Number | EPA Number

STRAND TRUCKING | CRESTWOOD,ILLINOIS

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

I N D 1 6 3 6 0 2 6 5

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL | 420 S. COLFAX AVE. | 9 1 8 0 8 9 0 2

(Facility Name) | Address | Site Number

GRIFFITH | INDIANA | 312-768-3400 | I N 0 0 1 6 3 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: USED ACETONE WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: SOLVENTS

HAZARD CLASS: FLAMMABLE

UN 1 ~~993~~ 090 (UN or NA Number)

F 0 0 5 (EPA HW Number)

WEIGHT FOR D.O.T. USE 2000 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 0 2 7 5

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

METHOD OF SHIPMENT (Circle One) (DRUMS 5 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Sharon L Cruse (Authorized Signature) DATE: 12-2-82

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) Jim Batt (Authorized Signature) DATE: 12/3/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

Michael O'Brien (Authorized Signature) DATE: 12/3/82

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 204 RT-50 GRM 12.30.82 Lock 12.3.82

002586

R 4896
Rev. 8/81

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste ☐ Other MI 0217128

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
HB Fuller Company	Valley City Disposal	American Chemical Service Inc
Site Address 2727 Kinney NW Grand Rapids Mich 49504	**Transporters Address** 2646 Thornwood SW wyoming MI 49509	**Facility Address** 420 S Colfax Griffith IN 46319
Phone Number (616) 453-8271	**Phone Number** 616 538-8499	**Phone Number** 219 924-4370
Generator's Site EPA I.D. Number MID065850620	**Transporter's EPA I.D. Number** MID055885373	**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:
NA

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 Flammable Liquid NOS	flammable liquid	UN 1993	017	36	DR		X			001980	GAL	F003
2.													F002
3.													F005
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.
Vapors may ignite explosively. Prevent build up of vapors. Use only with adequate ventilation. Keep away from heat, sparks, and open flame. Close container after use. Avoid breathing vapors. If ill effects occur, remove person to fresh air. Keep warm and quiet. Call a doctor immediately. If swallowed do not induce vomiting. Call a doctor immediately.

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 Monte Hedlock — Date Shipped MO. DAY YEAR: 05 11 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 H213 — Transporter Signature ② Arnold Dykstra — Date(s) Received: 5 11 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 CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ — ☒ Accepted ☐ Rejected — Date Received: 5 12 82

Facility Site EPA I.D. Number IND016360265

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed? ☐ Yes ☒ No

TSDF COMPLETES

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

To 204K T-SO 612M 5-12-82

TSDF COPY

189200

R 4896
Rev. 8/81

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☑ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste ☐ Other

MI 0217130

002588

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
H.B. Fuller Company	Valley City Disposal	American Chemical Service
Site Address: 2727 Kinney N.W. Grand Rapids, MI 49504	Transporters Address: 2646 Thornwood S.W. Wyoming, MI 49509	Facility Address: 420 S. Colfax Griffith, IN 46319
Phone Number: (616) 453-8271	Phone Number: (616) 538-8499	Phone Number: (219) 924-4370
Generator's Site EPA I.D. Number: MID065850620	Transporter's EPA I.D. Number: MID055885373	Facility Site EPA I.D. Number: IND016360265

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

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form Solid	Form Liquid	Form Gas	Form Sludge	Total Weight or Volume	Units	Hazardous or Liquid Waste Number
1.	Waste Adhesive N.O.S. Flammable Liquid	Flammable Liquid	NA-1133	IT	20	drum		X			1060	Gal.	F005
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

Contain; Get Emergency Pumping. After material is captured, flush with water.

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 Charles Jerrill

Date Shipped MO. DAY YEAR: 12 21 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. 1640

Subsequent Transporter Vehicle I.D. No's:

Transporter Signature: ② Arnold Dykstra

Subsequent transporter(s) signature(s): ③

Date(s) Received: 12 21 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 Frank Price

Facility Site EPA I.D. Number: IND016360265

☑ Accepted ☐ Rejected

Date Received: 12 22 82

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed? ☐ Yes ☑ No

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

To 204 KT-50 GRM 12.28.82 TSDF copy: On dock

HAZARDOUS WASTE MANIFEST

STD-81-006
MANIFEST DOCUMENT NUMBER

IND 004 557 815
SHIPPER NUMBER

THOMAS SOLVENT COMPANY
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND 004-557815	General Electric Company, 1701 College Street Fort Wayne, IN 46804 (219)743-7431	
TRANSPORTER # 1	MID 039993902	Thomas Solvent Company, 5605 Planeview Drive Fort Wayne, IN (219)482-9638	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service, 420 South Colfax, Griffith, IN (219)924-4370	3/16/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
70 ~~55~~ 55 gal. bbl	07	F003	Waste Buthyl Alcohol	NA1120	Flammable Liquid		6.8 lb. per gal.	3300 3025 gal.		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

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

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

CERTIFICATION

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

GENERATOR'S SIGNATURE — DATE 3/20/81

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

TSDF SIGNATURE — DATE 03-26-81

5

Pump to #7 Still T-63 3/12/81 Jim Murphy

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

002589

HAZARDOUS WASTE MANIFEST

STD-80-003
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

THOMAS SOLVENT COMPANY
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND 004-557815	General Electric Company, 1701 College Street Fort Wayne, IN 46804 (219) 743-7431	
TRANSPORTER # 1	MID 039993902	Thomas Solvent Company, 5605 Planeview Drive Fort Wayne, IN (219) 482-9638	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service, 420 South Colfax, Griffith, IN (219) 924-4370	1/9/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
40 55 gal bbl		F003	Waste Buthyl Alcohol	NA1120	Flammable Liquid		6.8 lb per gal	2200 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

1-9-80

This is to certify that the above-named materials are properly classified, 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

STACKED ON DOCK 1/9/81 T-63 Jim Murphy

This is to certify acceptance of the hazardous waste shipment.

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

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

TSDF SIGNATURE — DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

002590

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0431551 (1–7)

Authorization Number [redacted] (8–13)

General Electric Co. (Company Name) | 1540 So. 54th Ave (Address) | 786-2713 (Phone Number) | 0310510078G (14 Generator Number 24)

Cicero (City) | Ill (State) | 60650 (Zip) | ILT180011512 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th Street (Hauler Address) | S.W.H. Registration Number 0079/001 (25–31)

South Holland Ill 60473 | (312) 596-3377 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 So. Colfax (Address) | ILL 9180902 (39 Site Number 46)

Griffin (City) | Ind. (State) | 46319 (Zip) | (312) 768-3400 (Phone Number) | IND. 063602650 (EPA Number)

Alternate (Facility Name) | Address | 39 Site Number 45

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Flamable	Flamable	NA1993	F005

WEIGHT FOR D.O.T. USE: 1309 (LBS / TONS (circle one)) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 1925 (47–52) | (GALLONS / CU. YDS. (Circle One)) (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 11/1/82

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) [signature] (Authorized Signature) DATE: 11 1 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: 11 1 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 KT-63 6PM 11.1.82

002591

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 101065

002592

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: General Electric Co.
2. EPA IDENTIFICATION NO.: WID-006-121-347
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 2205 South 43 Street
5. CITY, STATE, ZIP CODE: Milwaukee, WI 53201
6. TELEPHONE NUMBER: (414) 647-4600

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)
11 Drums 26 Drums	605 1430	Waste Paint Liquid Contaminated Solvents	Flammable Liquids	UN1263 UN1993	1. Solid 3. Mixture 2. Liquid [2]	F017 F005	6,600 11,440
17 Drums	935	Waste Lubricants, N.O.S.	Combustible Liquid	NA1270	1. Solid 3. Mixture 2. Liquid [3]	D001	8,500
1 Drum	55	1,1,1 Trichloroethane	N/A	UN2831	1. Solid 3. Mixture 2. Liquid [2]	F002	400

This is to certify that the above 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. W. Horth
17. DATE SHIPPED M D Y: / /

TRANSPORTER SECTION

18. COMPANY NAME: Southeastern Disposal Co.
19. EPA IDENTIFICATION NO.: GAD-000-222-803
20. P.O. BOX OR STREET ADDRESS: P. O. Box 1697
21. CITY, STATE, ZIP CODE: Dalton, GA 30720
22. TELEPHONE NUMBER: (404) 278-0091
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 Services, Inc.
33. EPA IDENTIFICATION NO.: IND-016-360-265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Avenue
35. CITY, STATE, ZIP CODE: Griffith, IN
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): T. DUNFEE
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 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

37 To 125K T-63
18 to 20YK T-50
11.11.82 GMM

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0459224

Authorization Number 992393

GIBRALTAR CHEMICAL WORKS (Company Name) | 2300 W. 41ST ST (Address) | 3125236622 (Phone Number) | 0316000815 (Generator Number)

CHICAGO (City) | ILL (State) | 60609 (Zip) | ILD046550158 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | 13642 S. KENTON CRESTWOOD, ILL. 60445 (Hauler Address) | S.W.H. Registration Number 0024002

3123858440 (Phone Number) | ILI000646810 (EPA Number)

AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 S. COLFAX GRIFFITH, INDIANA 46319 (Hauler Address) | S.W.H. Registration Number 0024

2199244370 (Phone Number) | IND016360265 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

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

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
WASTE SOLVENTS	FLAMMABLE LIQUID	UN1993	F005

WEIGHT FOR D.O.T. USE: 2000 (LBS / TONS (circle one))

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

QUANTITY OF WASTE DELIVERED: 220 (1 GALLONS / 2 CU. YDS. (Circle One))

METHOD OF SHIPMENT (Circle One): (DRUMS 4 (Number)) TANK TRUCK OPEN TRUCK OTHER (Specify) ~~BOX TRAILER~~

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 6/11/82

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 6/11/82

(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:

[signature] (Authorized Signature) DATE: 6/14/82

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

On dock 6-11-82 To 126RT-63 GRM 6-14-82

002593

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

Authorization Number 0459225 (1–7) ~~981393~~ (8–13)

GIBRALTAR CHEMICAL WORKS (Company Name), 2300 W. 41ST ST. (Address), 3125236622 (Phone Number), 0316000815 G (14 Generator Number 24)

CHICAGO (City), ILLINOIS (State), 60609 (Zip)

ILD046550158 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name), 13542 S. KENTON CRESTWOOD, ILL. 60445 (Hauler Address)

S.W.H. Registration Number 0024 (25–31)

3123858440 (Phone Number)

ILT000646810 (EPA Number)

AMERICAN CHEMICAL SERVICE (Hauler Name), 420 S. COLFAX GRIFFITH, INDIANA 46319 (Hauler Address)

S.W.H. Registration Number 0024 (32–38)

2199244370 (Phone Number)

IND016360265 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

91808902 (39 Site Number 46)

GRIFFITH (City), INDIANA (State), 46319 (Zip), 2199244370 (Phone Number), IND016360265 (EPA Number)

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: WASTE SOLVENTS — HAZARD CLASS: FLAMMABLE LIQUID

UN1993 (UN or NA Number) — F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 3500 (LBS / TONS (circle one)) — WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 385 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One): (DRUMS 7 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) BOX TRAILER

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 7/9/82

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) [signature] (Authorized Signature) DATE: 7 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 WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

[signature] (Authorized Signature) DATE 7 9 82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 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 GRM 7.9.82

002544

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0459226

Authorization Number

GIBRALTAR CHEMICAL WORKS (Company Name) 2300 W. 41ST ST. (Address) 3125236622 (Phone Number) 0316000815 (Generator Number)

CHICAGO (City) ILL (State) 60609 (Zip) ILD046550158 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) 13542 S. KENTON CRESTWOOD, ILL. 60445 (Hauler Address) S.W.H. Registration Number 0024002

3123858440 (Phone Number) ILT000646810 (EPA Number)

AMERICAN CHEMICAL SERVICE (Hauler Name) 420 S. COLFAX GRIFFITH, INDIANA (Hauler Address) S.W.H. Registration Number 0024

2199244370 (Phone Number) IND016360265 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) 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 SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE SOLVENTS HAZARD CLASS: FLAMMABLE LIQUID UN1993 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 3000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 330 (47–52) 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 6 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) BOX TRAILER

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (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: 8/12/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 8/12/82

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

TC 126 KT-63 6CM 8/12/82

002595

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0459227 (1–7)

Authorization Number ____ (8–13)

GIBRALTAR CHEMICA WORKS (Company Name) | 2300 W. 41ST ST. (Address) | 3125236622 (Phone Number) | 0316000815 (14–24 Generator Number)

CHICAGO (City) | ILL (State) | 60609 (Zip) | ILD046550158 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | 13542 S.KENTON CRESTWOOD, ILL. 60445 (Hauler Address) | S.W.H. Registration Number 0024002 (25–31)

3123858440 (Phone Number) | ILT000646810 (EPA Number)

AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 S. COLFAX GRIFFITH, INDIANA (Hauler Address) | S.W.H. Registration Number 0024 (32–38)

2199244310 (Phone Number) | IND016360265 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX (Address) | 9180890 2 (39–46 Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 2199244310 (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 FLAMMABLE LIQUID

HAZARD CLASS: UN1993 (UN or NA Number) E005 (EPA HW Number)

WEIGHT FOR D.O.T. USE: 3000 LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 330 (47–52) (1 GALLONS / 2 CU. YDS. (Circle One)) (53)

METHOD OF SHIPMENT (Circle One): (DRUMS 6 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) BOX TRAILER

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) DATE: 9/16/82

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: 9/16/82 (54–59)

(2) ____ (Authorized Signature) DATE: ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

____ (Authorized Signature) DATE 9/16/82 (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 124 KT-63 GRM 9.16.82

002546

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

0682871 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number ____ (8–13)

GIBRALTAR CHEMICAL WORKS (Company Name) | 2300 W. 41ST ST. (Address) | 3125236622 (Phone Number) | 03 (14) | 1600081 5 (Generator Number) G (24)

CHICAGO (City) | ILL (State) | 60609 (Zip) | ILD046550158 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | 13542 S. KENTON CRESTWOOD, ILL. 60445 (Hauler Address) | S.W.H. Registration Number 0024002 (25–31)

AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 S. COLFAX GRIFFITH, INDIANA (Hauler Address) | 3123858440 (Phone Number) | ILT000646810 (EPA Number) | S.W.H. Registration Number 0024 (32–38)

2199244370 (Phone Number) | IND016360265 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

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

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

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

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
WASTE SOLVENTS	FLAMMABLE LIQUID	UN1993	F005

WEIGHT FOR D.O.T. USE: 3500 (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 Number 7) TANK TRUCK OPEN TRUCK OTHER (Specify) BOX TRAILER

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION: John J. Genail (Authorized Signature) DATE: 10/20/82

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) Stan Strain (Authorized Signature) DATE: 10/20/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

Michael O'Brien (Authorized Signature) DATE: 10/20/82 (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 125 E T-63 G/M 10-20-82

002597

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

06828 1

Authorization Number ____ (8–13)

TO BE COMPLETED BY WASTE GENERATOR

GIBRALTAR CHEMICAL WORKS (Company Name) | 2300 W. 41ST ST. (Address) | 3175236622 (Phone Number) | 0316000815 (Generator Number, 14–24) | G
CHICAGO (City) | ILL (State) | 60609 (Zip) | ILD046550158 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | 13542 S. KENTON CRESTWOOD, ILL. 60445 (Hauler Address) | S.W.H. Registration Number 0024 (25–31)
3123859440 (Phone Number) | ILT000646810 (EPA Number)

AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 S. COLFAX GRIFFITH, INDIANA (Hauler Address) | S.W.H. Registration Number 0024002 (32–38)
2199244370 (Phone Number) | IND016360265 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX (Address) | 91808902 (Site Number, 39–46)
GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number, 39–46)
(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: WASTE SOLVENTS | HAZARD CLASS: FLAMMABLE LIQUID | UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 2000 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 220 (47–52) | (GALLONS) 2 CU. YDS. (Circle One) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 4 Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify) BOX TRAILER

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Joan L. Ferri (Authorized Signature) | DATE: 11/14/82

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) [signature] (Authorized Signature) | DATE: 11/10/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) | DATE: 11/10/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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 T-63 GRM 11.10.82

002548

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

068287

Authorization Number

GIBRALTAR CHEMICAL WORKS, INC. (Company Name) | 2300 W. 41ST ST. (Address) | 3125236622 (Phone Number) | 0316000815 (Generator Number)

CHICAGO (City) | ILL (State) | 60609 (Zip) | ILD046550158 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | 13542 S. KENTON CRESTWOOD, ILL. 60445 (Hauler Address) | S.W.H. Registration Number 0024002

3123858440 (Phone Number) | ILT000646810 (EPA Number)

AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 S. COLFAX GRIFFITH, INDIANA (Hauler Address) | S.W.H. Registration Number 0024

2199244370 (Phone Number) | IND016360265 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

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

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

SHIPPING DESCRIPTION: WASTE SOLVENTS

HAZARD CLASS: FLAMMABLE LIQUID

UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 3000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 325 (1 GALLONS (Circle One) 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One) (DRUMS 6 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) BOX TRAILER

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 12/1/82

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) [signature] (Authorized Signature) DATE: 12/1/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 12/1/82

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

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 12.1.82 To 124 KT-63 GRM 12.9.82

002599

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0459221

Authorization Number 9 92 3 9 3

GIBRALTAR CHEMICAL WORKS (Company Name) 2300 W. 41ST ST. (Address) 3 125 2 36 62 2 (Phone Number) 0 3 1 6 0 0 0 8 1 5 (Generator Number)

CHICAGO (City) ILL (State) 60609 (Zip) I L D 0 4 6 5 5 0 1 5 8 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) 13642 S. KENTON CRESTWOOD, ILL 60445 (Hauler Address) S.W.H. Registration Number ~~0311~~ 0024 001

3 12 38 5 84 4 0 (Phone Number) IL T 0 0 0 6 4 6 8 10 (EPA Number)

AMERICAN CHEMICAL SERVICE (Hauler Name) 420 S. COLFAX GRIFFITH, IND. 46319 (Hauler Address) S.W.H. Registration Number 0 0 2 4

2 19 92 4 43 7 0 (Phone Number) I ND 01 6 36 0 26 5 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) 420 S. COLFAX (Address) 9 18 0 8 9 0 2 (Site Number)

GRIFFITH (City) INDIANA (State) 46319 (Zip) 2 19 92 4 4370 (Phone Number) I N D 0 163 6 0 2 6 5 (EPA Number)

Alternate (Facility Name) Address Site Number

City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: WASTE SOLVENTS HAZARD CLASS: FLAMMABLE LIQUID UN 1 9 9 3 (UN or NA Number) F 0 0 5 (EPA HW Number)

WEIGHT FOR D.O.T. USE 2500 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 2 5 0 (1 GALLONS (Circle One) 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One) (DRUMS 5 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) BOX TRAILER

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 2-19-82

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 2/18/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 2/19/82

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

On dock 2/19/82
To 210 K T-50 GRM 2/19/82 002600

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0459222

Authorization Number 992393

GIBRALTAR CHEMICAL WORKS (Company Name) 2300 W. 41ST ST. (Address) 3125236622 (Phone Number) 0316000815 G (Generator Number)

CHICAGO (City) ILL (State) 60609 (Zip) ILD046550158 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) 13642 S. KENTON CRESTWOOD, ILL. 60445 (Hauler Address) S.W.H. Registration Number 0024002

3123858440 (Phone Number) ILI000646810 (EPA Number)

AMERICAN ~~CHEMICAL SERVICE~~ (Hauler Name) 420 S. COLFAX ~~GRIFFITH, INDIANA~~ 46319 (Hauler Address) S.W.H. Registration Number 0024

2199244370 (Phone Number) IND016360265 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

~~GRIFFITH~~ (City) ~~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 SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
WASTE SOLVENTS	FLAMMABLE LIQUID	UN1993	F005

WEIGHT FOR D.O.T. USE 2000 (LBS / TONS (circle one))

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

QUANTITY OF WASTE DELIVERED: 200 (1 GALLONS (Circle One) / 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One) (DRUMS 4 (Number)) TANK TRUCK OPEN TRUCK OTHER (Specify) BOX TRAILER

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Joan L. Fenil (Authorized Signature) DATE: 4-1-82

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) L. Lund (Authorized Signature) DATE: 4/1/82

(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: 4/1/82

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

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

REV. # 3

SITE COPY - PART 3

On dock 4.1.82 GRM
To 125 RTT-63 GRM 4.2.82

002601

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0459223

Authorization Number 992393

GIBRALTAR CHEMICAL WORKS (Company Name) | 2300 W. 41ST ST. (Address) | 3125236622 (Phone Number) | 0316000815 (Generator Number)

CHICAGO (City) | ILL (State) | 60609 (Zip) | ILD046550158 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | 13642 S. KENTON CRESTWOOD, ILL. 60445 (Hauler Address) | S.W.H. Registration Number 0024001

3123858440 (Phone Number) | ILT000646810 (EPA Number)

AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 S. COLFAX GRIFFITH, INDIANA 46319 (Hauler Address) | S.W.H. Registration Number 0024

2199244370 (Phone Number) | IND016360265 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

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

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
WASTE SOLVENTS	FLAMMABLE LIQUID	UN 1993	F005

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: 605 (GALLONS / 2 CU. YDS. (Circle One))

METHOD OF SHIPMENT (Circle One) (DRUMS 11 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) BOX TRAILER

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) DATE 5/6/82

WASTE HAULER

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

(1) (Authorized Signature) DATE 5/10/82

(2) (Authorized Signature) DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

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

(Authorized Signature) DATE 5/10/82

COMMENTS OR SPECIAL INSTRUCTIONS.

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

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

REV. # 3

SITE COPY - PART 3

On dock 5-10-82 GRM
5-11-82 T-63 126R T-63 GRM

002602

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0469577

Authorization Number 997018

J.A. GITS PLASTIC CORP (Company Name) | 200 W. CENTRAL (Address) | 312-529-2051 (Phone Number) | 0434820002 G (Generator Number)

ROSELLE (City) | ILLINOIS (State) | 60172 (Zip) | ILD005246491 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) | 201 W. 155 ST. SOUTH HOLLAND, IL (Hauler Address) | S.W.H. Registration Number 007900 | 3125963377 (Phone Number) | ILD069506160 (EPA Number)

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

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

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

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

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: LIQUID | HAZARD CLASS: FLAMMABLE | UN or NA Number | EPA HW Number

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 2800 | (1) GALLONS (Circle One) 2 CU. YDS. 1

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 1/28/82

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE 1/28/82

(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.

Bob Mauck (Authorized Signature) DATE 1/28/82

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 124R T-63 6RM 1/28/82

002603

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0469579

Authorization Number 997018

J.A. GITS PLASTIC CORP (Company Name) | 200 W. CENTRAL (Address) | 312-529-2051 (Phone Number) | 0434820002G (Generator Number)

ROSELLE (City) | ILLINOIS (State) | 60172 (Zip) | ILD005246491 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) | 201 W. 155th ST. SOUTH HOLLAND, IL (Hauler Address) | S.W.H. Registration Number 007900 1

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 CO. (Facility Name) | 420 S. COLFAX AVE. (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: PAINT SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: LIQUID | HAZARD CLASS: FLAMMABLE | UN1993 (UN or NA Number) | (EPA HW Number)

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

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

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 3/10/82

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 03/10/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

[signature] (Authorized Signature) DATE: 03/10/82

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 124 RT-63 GLEN 3/10/82

002604

STATE OF ILLINOIS

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

0469580

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997018

J.A. GITS PLASTIC CORP (Company Name) | 200 W. CENTRAL (Address) | 312-529-2051 (Phone Number) | 0 4 3 4 8 2 0 0 0 2 G (Generator Number)

ROSELLE (City) | ILLINOIS (State) | 60172 (Zip) | I L D 0 0 5 2 4 6 4 9 1 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) | 201 W. 155th St. South Holland, IL (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 1 | ____ (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 CO. (Facility Name) | 420 S. Colfax Ave. (Address) | 9 1 8 0 8 9 0 2 (Site Number)

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

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

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

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: Liquid | HAZARD CLASS: Flammable | UN1993 (UN or NA Number) | ____ (EPA HW Number)

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

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

QUANTITY OF WASTE DELIVERED: 002500 (1 GALLONS (Circle One) / 2 CU. YDS.) 1

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION John Burkhardt (Authorized Signature) | DATE: 4/7/82

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) Mike Reiter (Authorized Signature) | DATE: 4 07 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: 4 07 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 125 RT-63 6PM 4.7.82

002605

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0469581 (1–7)

Authorization Number 9 9 7 0 1 8 (8–13)

J.A. GITS PLASTIC CORP (Company Name) | 200 W. CENTRAL (Address) | 312-529-2051 (Phone Number) | 0 4 3 4 8 2 0 0 0 2 G (14–24 Generator Number)

ROSELLE (City) | ILLINOIS (State) | 60172 (Zip) | I L D 0 0 5 2 4 6 4 9 1 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. South Holland, IL (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 1 (25–31)

(Phone Number) | I L D069506160 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

Griffith (City) | Indiana (State) | 46319 (Zip) | (Phone Number) | I N D 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: Paint Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Liquid | HAZARD CLASS: Flammable | 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: 002500 (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: 4/30/82

WASTE HAULER

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

(1) _____ (Authorized Signature) | DATE: 4/30/82 (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 4/30/82 (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 124 TR T-63 6PM 4-30-82

002606

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0469583 (1–7)

Authorization Number 997018 (8–13)

J.A. GITS PLASTIC CORP (Company Name) | 200 W. CENTRAL (Address) | 312-529-2051 (Phone Number) | 0 4 3 4 8 2 0 0 0 2 G (14–24 Generator Number)

ROSELLE (City) | ILLINOIS (State) | 60172 (Zip) | I L D 0 0 5 2 4 6 4 9 1 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. South Holland, IL (Hauler Address) | 312-596-3371 (Phone Number) | S.W.H. Registration Number 0 0 7 9 0 0 1 (25–31) | ILD069506169 (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 Co. (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) | 312 768 3400 (Phone Number) | IND016360265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: Liquid | HAZARD CLASS. Flammable | UN or NA Number NA1993 | EPA HW Number 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: 002,500 (47–52) (1 GALLONS / 2 CU. YDS.) (Circle One) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) | DATE: 5/26/82

WASTE HAULER

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

(1) [signature] (Authorized Signature) | DATE: 5/26/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

[signature] (Authorized Signature) | DATE: 5/26/82 (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. # 3

SITE COPY - PART 3

To 124KT-63 GRM 5-26-82

002607

TO BE COMPLETED BY WASTE GENERATOR

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

046

Authorization Number 99701 (8–13)

J.A. GITS PLASTIC CORP (Company Name) | 200 W. CENTRAL (Address) | 312-529-2051 (Phone Number) | 0 4 3 4 8 2 0 0 0 2 G (14–24 Generator Number)

ROSELLE (City) | ILLINOIS (State) | 172 (Zip) | I L D 0 0 5 2 4 6 4 9 1 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. South Holland, IL (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 3 (25–31)

312-596-3377 (Phone Number) | ILD069506169 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | IND016360265 (EPA Number)

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Liquid	Flammable	U N 1 9 9 3	F 0 0 5

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

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

QUANTITY OF WASTE DELIVERED: 0 0 2 2 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 E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION John Kuldbrandt (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) _____ (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: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 4

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 FT-636 RM 6.24.82

002608

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0469585 (1–7)

Authorization Number 997018 (8–14)

J.A. GITS PLASTIC CORP (Company Name) | 200 W. CENTRAL (Address) | 312-529-2051 (Phone Number) | 0 4 3 4 8 2 0 0 0 2 G (14–24 Generator Number)

ROSELLE (City) | ILLINOIS (State) | 60172 (Zip) | I L D 0 0 5 2 4 6 4 9 1 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. South Holland, IL (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 1 (25–31)

312-596-3377 (Phone Number) | ILD069506169 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | IND016360265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Liquid	Flammable	U N 1 9 9 3	F 0 0 5

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

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

QUANTITY OF WASTE DELIVERED: 0 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 John Rueckbrodt (Authorized Signature) DATE 7-20-82

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) Mike Reifer (Authorized Signature) DATE 7/20/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

_____ (Authorized Signature) DATE 7/20/82 (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 ET-63 GRM 7.20.82

002609

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

0628107
1 7

Authorization Number ____ 8 13

TO BE COMPLETED BY WASTE GENERATOR

J.A. GITS PLASTIC CORP (Company Name) | 200 W. Central (Address) | 312-529-2051 (Phone Number) | 0 4 3 4 8 2 0 0 0 2 G (14 Generator Number 24)

Roselle (City) | Illinois (State) | 60172 (Zip) | I L D 0 0 5 2 4 6 4 9 1 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 3 (25 31)

312-596-3377 (Phone Number) | ILD069506169 (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) | 9 1 8 0 8 9 0 2 (39 Site Number 46)

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | IND016360265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Liquid	Flammable	U N 1 9 9 3	F 0 0 5

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

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

QUANTITY OF WASTE DELIVERED: 0 0 2 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 John Riedboard (Authorized Signature) DATE: 8-6-82

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) R. Robertson (Authorized Signature) DATE: 08/06/82 (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 QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

____ (Authorized Signature) DATE: 8/6/82 (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. # 4

SITE COPY - PART 3

To 124 R 7-63 GWM 8.6.82

002610

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

0628108 (1–7)

Authorization Number ____ (8–13)

J.A. GITS PLASTIC CORP (Company Name) | 200 W. Central Ave. (Address) | 312-529-2051 (Phone Number) | 0 4 3 4 8 2 0 0 0 2 G (14–24 Generator Number)

Roselle, (City) | Illinois (State) | 60172 (Zip) | I L D 0 0 5 2 4 6 4 9 1 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 1 (25–31)

312-596-3377 (Phone Number) | ILD069506169 (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) | 9 1 8 0 8 9 0 2 (39–46 Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Liquid	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: 002700 (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 Jim Riedbrandt (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) Mike Geiger (Authorized Signature) DATE: 8/26/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 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 25 T-63 EPM 8-26-82

002611

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

0628109
1 7

Authorization Number 000000
8 13

J.A. GITS PLASTIC CORP. (Company Name) | 200 W. Central Ave. (Address) | 312-529-2051 (Phone Number) | 0 4 3 4 8 2 0 0 0 2 G (Generator Number) 14 24

Roselle (City) | Illionois (State) | 60172 (Zip) | I L D 0 0 5 2 4 6 4 9 1 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 1 (25 31)

312-596-3377 (Phone Number) | ILD069506169 (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) | 9 1 8 0 8 9 0 2 (Site Number) 39 46

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | IND016360265 (EPA Number)

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Liquid

HAZARD CLASS: Flammable

UN 1 9 9 3 (UN or NA Number) | F 0 0 5 (EPA HW Number)

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

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

QUANTITY OF WASTE DELIVERED: 2,500 (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 John Hildebrandt (Authorized Signature) DATE: 9-17-82

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 Rufer (Authorized Signature) DATE: 9/17/82 (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: 9/17/82 (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 K T-63 GPM 9.17.82

002612

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

0628111
1 7

Authorization Number ____ 8 13

TO BE COMPLETED BY WASTE GENERATOR

J.A. GITS PLASTIC CORP. | 200 W. CENTRAL | 312-529-2051 | 0 4 3 4 8 2 0 0 0 2 G
(Company Name) | Address | Phone Number | 14 Generator Number 24

ROSELLE | ILLINOIS 60172 | I L D 0 0 5 2 4 6 4 9 1
City | State Zip | EPA Number

WASTE HAULER(S)

MR. FRANK INC. | 201 W. 155th St. South Holland, IL | S.W.H. Registration Number 0 0 7 9 6 0 1 (25 31)
Hauler Name | Hauler Address | 312-596-3377 Phone Number | ILD069506169 EPA Number

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH | INDIANA | 46219 | 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: PAINT SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: LIQUID | HAZARD CLASS: FLAMMABLE | U N 1 9 9 3 (UN or NA Number) | F 0 0 5 (EPA HW Number)

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED 0 0 2 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 John Heatherman (Authorized Signature) | DATE: 10-6-82

WASTE HAULER

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

(1) Tom Berry (Authorized Signature) | DATE: 10 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:

T Dwyer (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

To 124 FT-63 GRM 10.7.82 002613

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

0628112
1 7

Authorization Number ____ 8 13

J.A. GITS PLASTIC CORP (Company Name) | 200 W. Central Ave. (Address) | 312-529-2051 (Phone Number) | 0 4 3 4 8 2 0 0 0 2 G (Generator Number) 14 24

Roselle (City) | Illinois (State) | Zip | I L D 0 0 5 2 4 6 4 9 1 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) | 201 W. 155th St. South Holland, IL (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 1 25 31

312-596-3377 (Phone Number) | I L D 069506169 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

Griffith (City) | Indiana (State) | 46219 (Zip) | 312-768-3400 (Phone Number) | I N D 016360265 (EPA Number)

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Liquid HAZARD CLASS: Flammable

U N 1 9 9 3 (UN or NA Number) F 0 0 5 (EPA HW Number)

WEIGHT FOR D.O.T. USE ____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 002500 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 John [signature] (Authorized Signature) DATE: 10-25-82

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) [signature] (Authorized Signature) DATE: 10/25/82 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:

[signature] (Authorized Signature) DATE: 10/25/82 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. # 4

SITE COPY - PART 3 To 124 KT-63 GRM 10-25-82

002614

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

0689515 (1–7)

Authorization Number 000000 (8–13)

J.A. GITS PLASTIC CORP (Company Name) | 200 W. Central (Address) | 312-529-2051 (Phone Number) | 0 4 3 4 8 2 0 0 0 2 G (14–24 Generator Number)

Roselle (City) | Illinois (State) | 60172 (Zip) | I L D 0 0 5 2 4 6 4 9 1 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. South Holland, IL (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 1 (25–31)

312-596-3377 (Phone Number) | I L D 069506169 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

Griffith (City) | Indiana (State) | 46219 (Zip) | 312-768-3400 (Phone Number) | I N D 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: Paint Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Liquid | HAZARD CLASS: Flammable | U N 1 9 9 3 (UN or NA Number) | F 0 0 5 (EPA HW Number)

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

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

QUANTITY OF WASTE DELIVERED: 002,500 (47–52) (1 GALLONS / 2 CU. YDS. (Circle One)) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 11-12-82

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 11/12/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

[signature] (Authorized Signature) DATE: 11/12/82 (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 125 RT-63 GPM 11.12.82

002615

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

0689516 (1–7)

Authorization Number (8–13)

J.A.GITS PLASTIC CORP | 200 W. Central Ave. | 312-529-2051 | 0 4 3 4 8 2 0 0 0 2 G (14–24)
(Company Name) | Address | Phone Number | Generator Number

Roselle | Illinois | 60172 | I L D 0 0 5 2 4 6 4 9 1
City | State | Zip | EPA Number

WASTE HAULER(S)

Mr. Frank Inc. | 201 W. 155th St. South Holland | S.W.H. Registration Number 0 0 7 9 0 0 3 (25–31)
Hauler Name | Hauler Address

312-596-3377 | I L D 069506169
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 Co. | 420 S. Colfax Ave. | 9 1 8 0 8 9 0 2 (39–46)
(Facility Name) | Address | Site Number

Griffith | Indiana | 46219 | 312-768-3400 | I N D 016360265
City | State | Zip | Phone Number | EPA Number

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: Liquid | HAZARD CLASS: Flammable | U N 1 9 9 3 (UN or NA Number) | F 0 0 5 (EPA HW Number)

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

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

QUANTITY OF WASTE DELIVERED: 0 0 2 6 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 John Goldbrandt (Authorized Signature) DATE: 12-7-82

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) _____ (Authorized Signature) DATE: 12/07/82 (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: 12/7/82 (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 124 RT-63 6PM 12.7.82

002616

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

0689517 (1–7)

Authorization Number ____ (8–13)

J.A.GITS PLASTIC CORP. (Company Name) | 200 [redacted] W. CENTRAL AVE. (Address) | 312-529-2051 (Phone Number) | 0 4 3 4 8 2 0 0 0 2 G (14–24 Generator Number)

ROSELLE (City) | Illinois (State) | 60172 (Zip) | I L D 0 0 5 2 4 6 4 9 1 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. South Holland (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 1 (25–31)

312-596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 9 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL CO. (Facility Name) | 420 S. Colfax Ave. (Address) | (39–46 Site Number)

Griffith (City) | Indiana (State) | 46219 (Zip) | 312-768-3400 (Phone Number) | IND 0 16360265 (EPA Number)

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: Liquid | HAZARD CLASS: Flammable | U N 1 9 9 3 (UN or NA Number) | F 0 0 5 (EPA HW Number)

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 0 0 2,5 0 0 (47–52) (1 GALLONS (Circle One) / 2 CU. YDS.) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) | DATE: 12-28-82

WASTE HAULER

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

(1) [signature] (Authorized Signature) | DATE: 12/28/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) | DATE: 12/28/82 (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. # 4

SITE COPY - PART 3

To 126 RT-63 6PM 12-28-82

002617

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: 6

TO: T/S/D/F American Chemical	FROM: Generator Grabill Cabinet Co., Inc.
E.P.A. ID Code No. [illegible]	E.P.A. ID Code No. [illegible] 005421441
Address [illegible] 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			F005		
	Waste Paint Thinning Compound	Flammable Liquid			330	[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.

HAZARDOUS WASTE

HAZARDOUS WASTE

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: [signature] Date 4-1-82

TRANSPORTER #1 Thomas Solvent Co. E.P.A. ID No. MIDU-39993902
Address 5805 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 [signature] Date [illegible]

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

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL/FACILITY

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

T/S/D/F Signature [signature] Date 4/14/82

T/S/D/F COPY To 125 KT-63 GRM 4.14.82

002618

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: 1

TO: T/S/D/F: American Chemical	FROM: Generator: Grabill Cabinet Co., Inc.
E.P.A. ID Code No. [illegible]	E.P.A. ID Code No. [illegible]
Address: 420 S. Collar	Address: [illegible] 46
Destination: Griffith, Ind. 46319	Origin: Grabill, Ind. 46741
Phone: 219 [illegible]	Phone: 219 627-2134

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5	55 Gal. Drums			F005		
	Waste Paint Thinning Compound	Flammable Liquid			2	1

HAZARDOUS WASTE

HAZARDOUS WASTE

PLACARDS REQUIRED

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

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

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

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

EMERGENCY RESPONSE INFORMATION

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

CERTIFICATION

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

Generator Signature GRABILL CABINET CO. INC. By: _____ Date 7-14-82

TRANSPORTER #1 Thomas Solvent Co. E.P.A. ID No. [illegible]
Address 5005 Flanavice Dr.
City Ft. Wayne State IN Zip 46825 Phone 219 482-7030

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date 7-14-82

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

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

TREATMENT/STORAGE/DISPOSAL/FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D/F Signature _____ Date 7-14-82

T/S/D/F COPY T6124R T-63 GRM 7-14-82

002619

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

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

MANIFEST DOCUMENT NUMBER: 8

TO: T/S/D/F, American Chemical	FROM: Generator Grabill Cabinet Co., Inc.
E.P.A. ID Code No. INDO-16360265	E.P.A. ID Code No. IND 005421441
Address 420 S. Colfax	Address 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.)
7	55 Gal. Drums			F005		
	Waste Paint Thinning Compound	Flammable Liquid				

PLACARDS REQUIRED

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

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

(Signature of Consignor)

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D/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: [signature] Date [illegible]

TRANSPORTER #1 Thomas Solvent Co. E.P.A. ID No. [illegible]
Address 5605 Planeview Dr.
City Fort Wayne State In Zip 46825 Phone 219 482-9635

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

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

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL/FACILITY

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

T/S/D/F Signature [signature] Date [illegible]

T/S/D/F COPY

To 125 R T-63
6KM 70 2

002620

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

#01

TO:		FROM:	
T/S/D FACILITY	AMERICAN CHEMICAL SERVIC	Generator	GREENE LINE MFG. CORPORATION
E.P.A. ID Code No.	INDO-1630265	E.P.A. ID Code No.	EXEMPT
Address	420 S. Colfax	Address	2703 W. 9th Street
Destination	Griffith, Indiana	Origin	Marion, Indiana
Phone	219-924-4370	Phone	~~XXXX~~ 317-662-9881

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	WASTE TOLUENE	FLAMMABLE	1294	F003		FLAMMABLE

PLACARDS REQUIRED FLAMMABLE

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

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

(Signature of Consignor)

FREIGHT CHARGES
PREPAID ☐ COLLECT ☐

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

HAZARDOUS WASTE

HAZARDOUS WASTE

ALTERNATE DESTINATION (EMERGENCY ONLY)

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

EMERGENCY RESPONSE INFORMATION

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

CERTIFICATION

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

Generator Signature _____ Date _____

TRANSPORTER #1 THOMAS SOLVENT COMPANY E.P.A. ID No. MID-039993902
Address 5605 Planeview Drive
City Fort Wayne State IN Zip 46825 Phone 219-482-9638

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date 10/11/82

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

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

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

T/S/D FACILITY Signature _____ Date 10/21/82

T/S/D F COPY To IBFT-63
ERM 10-21-82

002621

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0486390

Authorization Number 991852

Guardian Packaging Corp. (Company Name) | 475 N. Kirk Rd. (Address) | 3128795850 (Phone Number) | 0890100007 G (Generator Number)

Batavia (City) | IL (State) | 60510 (Zip) | ILD009668492 (EPA Number)

WASTE HAULER(S)

Mr Frank Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address) | S.W.H. Registration Number 0079021

South Holland IL. | 3125963377 (Phone Number) | ILD069506160 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem Service (Facility Name) | 410 S. Colfax (Address) | 91808902 (Site Number)

Griffith (City) | IND (State) | 46319 (Zip) | 3197683400 (Phone Number) | IND016360265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: Ink Solvents NOS | HAZARD CLASS: Flammable | F-003 (UN or NA Number) | (EPA HW Number)

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

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

QUANTITY OF WASTE DELIVERED: 005000 | 1 GALLONS (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 T.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 4/16/82

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) Tom Berry (Authorized Signature) DATE: 04/16/82

(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:

_____ (Authorized Signature) DATE: 4/16/82

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 210 RT 50 GRM 4-16-82

002622

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

0486391 (1–7)

Authorization Number 997852 (8–13)

GUARDIAN PKG CORP. (Company Name) | 475 N. KIRK RD. (Address) | 3128795850 (Phone Number) | 08901000007 G (14 Generator Number 24)

BATAVIA (City) | IL (State) | 60510 (Zip) | ILD009668492 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) | 201 W. 155TH ST. SOUTH HOLLAND IL. (Hauler Address) | S.W.H. Registration Number 0079021 (25–31)

3125963377 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERVICE (Facility Name) | 4/0 So. COLFAX (Address) | 9180890 2 X (39–46 Site Number)

GRIFFTH (City) | IND. (State) | 46319 (Zip) | 3127683400 (Phone Number) | INDO16360265 (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: INK SOLVENT NOS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: INK SOLVENTS NOS-FLAMMABLE

HAZARD CLASS: UN1993 (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: 5500 (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 IEPA.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (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) Tom Berry (Authorized Signature) DATE: 05/05/82 (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: 5/5/82 (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 6RM 5-5-82

002623

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

0620397
1 7

Authorization Number 991852
8 13

TO BE COMPLETED BY WASTE GENERATOR

Guardian Packaging (Company Name) | 475 N. Kirk Rd Address | 3128795850 Phone Number | 089 14 Generator Number 24

Batavia City | Ill. State | 60510 Zip | ILD009618492 EPA Number

WASTE HAULER(S)

MR Tank Inc. Hauler Name | 901 W. 155th St Hauler Address | S.W.H. Registration Number 0079018 25 31

3125963377 Phone Number | ILD069506160 EPA Number

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem Service (Facility Name) | 410 So. Colfax Address | 9180890 02 39 Site Number 46

Griffith City | IND State | 46319 Zip | 3127683400 Phone Number | ILD016360265 EPA Number

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: Ink Solvents | HAZARD CLASS: Flammable | UN1263 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: 005000 47 52 | (1) GALLONS (Circle One) (2) CU. YDS. 1 53

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 6/4/82

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) _____ (Authorized Signature) DATE: 06/04/82 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: 06/04/82 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: _____

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

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

REV. # 4

SITE COPY - PART 3

To 211 RT-50 6PM 6.4.82

002624

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

0620399
1 7

Authorization Number ~~997852~~
8 13

Guardian Packaging (Company Name) | 475 N. Kirk Rd (Address) | 312 8795850 (Phone Number) | 0890100007 G (Generator Number) 14 24

Batavia (City) | Il. (State) | 60510 (Zip) | ILD009668492 (EPA Number)

WASTE HAULER(S)

Mr Frank Inc (Hauler Name) | 201 W. 155th (Hauler Address) | S.W.H. Registration Number 0079009 25 31

312 5963377 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem Service (Facility Name) | 410 So. Colfax (Address) | 91808902 39 46 (Site Number)

Griffith (City) | Ind (State) | 46319 (Zip) | 3127683400 (Phone Number) | ILD016360265 (EPA Number)

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Sdvents NOS WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Ink Sdvents HAZARD CLASS: Flammable | NA1993 (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: 005000 47 52 (1 GALLONS (Circle One) 2 CU. YDS.) 53

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 9-8-82

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 09/08/82 54 59

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____

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

[signature] (Authorized Signature) DATE: 9/ 60

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSID

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

REV. # 4

SITE COPY - PART 3 To 210 F 7-50 GRM

002625

HAZARDOUS WASTE MANIFEST

HW-82002
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Landgrebe Motor Transport
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND084580430	Harter Corporation/Wall Division P.O. Box 399, 11555 Packard Dr. Middlebury, IN 46540-0399 219/825-5871	
TRANSPORTER # 1	IND009842824	Landgrebe Motor Transport P.O. Box 32 State Route 130 West Valparaiso, IN 46383 219/462-4181	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service 420 S. Colfax Avenue Griffith, IN 46319 219/924-4370	7/16/82
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)
45 DM	X	F005	Flammable liquid N.O.S. 45 Drums 500 Pounds apiece 22,500 LBS. Total	1993	2475					

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

_____ Signature

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

_____ (Signature of Consignor)

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

CERTIFICATION

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

GENERATOR'S SIGNATURE — DATE 7-15-82

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 7/16/82

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

25 To 124 R T-63 6 RM 7-19-82 20 To 210 R T-50 6 RM 7-19-82

TRANSPORTER #1

IL 532-610
LPC 62 8/6

STATE OF ILLINOIS

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

0620408 (1–7)

Authorization Number ____ (8–13)

TO BE COMPLETED BY WASTE GENERATOR

Guardian Packaging Corp. (Company Name) | 475 N. Kirk Rd (Address) | 3128195850 (Phone Number) | 0890100007 (14–24 Generator Number)

Batavia (City) | IL (State) | 60510 (Zip)

ILD009668492 (EPA Number)

WASTE HAULER(S)

MR Frank Inc (Hauler Name) | 201 W 155th (Hauler Address) | PO-8948

S.W.H. Registration Number 0079021 (25–31)

3129963377 (Phone Number) | ILD069506160 (EPA Number)

South Holland (Hauler Name) | IL. (Hauler Address)

S.W.H. Registration Number ____ (32–38)

____ (Phone Number) | ____ (EPA Number)

DESTINATION — DISPOSAL, STORAGE OR TREATMENT SITE

American Chem Ser. (Facility Name) | 410 So. Colfax (Address) | PO-8949

9180890 2 (39–46 Site Number)

Griffith (City) | IN (State) | 46319 (Zip) | 3127683400 (Phone Number) | ILD016360265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK Solvents NOS

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: Ink Solvents Flammable

HAZARD CLASS: NA1993 (UN or NA Number) | I003 (EPA HW Number)

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

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

QUANTITY OF WASTE DELIVERED: 004200 (47–52) (1 ~~GALLONS~~ (Circle One) 2 CU. YDS.) ____ (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) DATE: 11-5-82

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) Tom Beary (Authorized Signature) DATE: 11 OCT 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: 11/5/82 (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 F T-50 Griffith 11-5-82

002627

HAZARDOUS WASTE MANIFEST

HW-82001
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

NAME OF CARRIER (SCAC) CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND084580430	Harter Corporation/Wall Div. 219/825-5871 P. O. Box 399, 11555 Packard Dr., Middlebury, IN 46540-0399	
TRANSPORTER # 1	IND016360265	American Chemical Service 219/924-4370 420 S. Colfax Ave., Griffith, IN 46319	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service 219/924-4370 420 S. Colfax Ave., Griffith, IN 46319	12/15/81
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 # / NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
55DR		F005	Flammable Liquid N.O.S.	1993						

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

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

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

CERTIFICATION

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

This is to certify acceptance of the hazardous waste shipment.

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

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

5

GENERATOR'S SIGNATURE DATE TSDF SIGNATURE DATE 12/15/81

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

On Dock 12/15/81 GRM 50 TO 143 T-63 GRM 5 TO #3 Still T-63 GRM 1/13/82

TSDF COPY

002628

HAZARDOUS WASTE MANIFEST

HW-82003
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Landgrebe Motor Transport
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND034580430	Harter Corp./Wall Division P.O. Box 399 219-825-5871 11555 Packard Dr. Middlebury, IN 46540-0399	9/27
TRANSPORTER # 1	IND009342824	Landgrebe Motor Transport P.O. Box 32 St. Rt. 130 West Valparaiso, IN 46383 219-462-4181	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service 420 S. Colfax Ave. Griffith, IN 46319 219-924-4370	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
6 drums		F005	Flammable Liquid N.O.S.	1993		330	550 lbs	3300#		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO:
ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

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

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

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

TOTAL CHARGES: $

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

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

CERTIFICATION

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

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

GENERATOR'S SIGNATURE DATE

TSDF SIGNATURE DATE 9/28/82

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

To 204 K7-80 GPM
9.28.82

002629

HAZARDOUS WASTE MANIFEST

5-10-82-1
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

AMERICAN CHEMICAL SERVICE
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	Exempt	Hugh J. McLaughlin and Son, Inc. (219)663-0935 614 W. Indiana Ave. Crown Point, IN 46307	
TRANSPORTER # 1	IND016306026	American Chemical Service (219) 924-4370 420 S. Colfax Ave. Griffith, IN 46319	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016306026	American Chemical Service (219)924-4370 420 S. Colfax Ave. Griffith, IN 46319	5/10/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
5 Drums		F005	Flammable Liquid N.O.S.	1993	X		275gal	1.275gal.		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

_____ Signature

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

_____ (Signature of Consignor)

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

CERTIFICATION

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

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

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

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

TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

On dock 5-10-82 GRM

TSDF COPY

T-63 5-11-82 126E GRM

002630

HAZARDOUS WASTE MANIFEST

6-9-82 2
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

AMERICAN CHEMICAL SERVICE
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	Exempt	Hugh J. McLaughlin And Sons, Inc. (219)663-0965 614 N. Indiana ave. Crown Point, IN 46307	6/9/
TRANSPORTER # 1	IND016360269	American Chemical Service (219)924-4370 420 S. Colfax Ave. Griffith, IN 46319	6/9/
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DIS— POSAL FACILITY	IND016360269	American Chemical Service (219)924-4370 420 S. Colfax Ave., Griffith IN 46319	6/9/
TSDF TREATMENT STORAGE OR DIS— POSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
5 Drums		F009	Flammable Liquid N.O.S.	1993	X		275gals	275 gal.		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

_____ Signature

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

_____ (Signature of Consignor)

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

CERTIFICATION

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

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

On dock 6.9.82
TSDF COPY To 125 T-63 6RM 6.10.82

002631

HAZARDOUS WASTE MANIFEST

7-19-82-3
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

AMERICAN CHEMICAL SERVICE
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	Exempt	Hugh J. McLaughlin And Son, Inc. (219) 663-0965 614 N. Indiana Ave. Crown Point, IN 46307	
TRANSPORTER # 1	IND016350265	American Chemical Service (219) 924-4370 420 E. Colfax Ave. Griffith, IN 46319	7/19
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016350265	American Chemical Service (219) 924-4370 420 E. Colfax Ave., Griffith, IN 46319	7/19/82
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)
5 Drums		F005	Flammable Liquid N.O.S.	1993	X		275gal	275 gal.		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

_____ Signature

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

_____ (Signature of Consignor)

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

CERTIFICATION

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

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

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

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

TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

To124k T-63 GPM 7-20-82

TSDF COPY

002632

HAZARDOUS WASTE MANIFEST

8-18-82-4
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

AMERICAN CHEMICAL SERVICE
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	EXEMPT	Hugh J. McLaughlin And Son, Inc. (219) 663-0985 614 N. Indiana Ave. Crown Point, IN 46307	
TRANSPORTER # 1	IND016360265	American Chemical Service (219) 924-4370 420 S. Colfax Ave. Griffith, IN 46319	
TRANSPORTER # 2 (If required)		STRAND TRUCKING	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service (219) 924-4370 420 S. Colfax Ave., Griffith, IN 46319	8/18/82
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)
5 Drums		F005	Flammable Liquid N.O.S.	1993	X		275 gal.	275 gal.		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

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

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

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

TOTAL CHARGES: $

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

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

CERTIFICATION

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

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (If required)

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

TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

To 124E T-63 6PM 8-18-82

TSDF COPY

002633

HAZARDOUS WASTE MANIFEST

11-24-82-5
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

LANDGREBE MOTORS TRANSPORT
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	Exempt	Hugh J. McLaughlin And Son, Inc. (219) 663-0985 614 N. Indiana Ave. Crown Point, IN 46307	
TRANSPORTER # 1	IND009842824	Landgrebe Motors Transport (219) 462-4181 P.O. Box 32 State Rd. 130W. Valparaiso, IN 46383	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265 4	American Chemical Service (219) 924-4370 420 S. Colfax Ave. Griffith, IN 46319	11/29/82
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)
11 Drums		F005	Flammable Liquid N.O.S.	1993	X		605gal.	605gal.		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

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

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

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

TOTAL CHARGES: $

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

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

CERTIFICATION

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

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

To 124RT-63 GRM 12.9.82 On dock

TSDF COPY

002634

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY 312 593-3239
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115760

Authorization Number 9 9 1 3 0 7

ILD 069499234

MID-AMERICA PROTECTIVE COATINGS (Company Name) 1395 LOUIS AVENUE (Address)
ELK GROVE VILLAGE, (City) ILLINOIS (State) 60007 (Zip)

0 3 1 4 4 0 0 0 2 6 G
Generator Number

WASTE HAULER(S)

ILT 000646810

(1) STRAND TRUCKING (Hauler Name) CRESTWOOD, ILLINOIS (Hauler Address) S.W.H. Registration Number 0 0 2 4 0 0 1

(2) AMERICA CHEMICAL SERVICE (Hauler Name) GRIFFITH, INDIANA (Hauler Address) S.W.H. Registration Number 0 0 2 4 0 0 1

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) 420 ~~240~~ COLFAX (Address)
GRIFFITH, (City) INDIANA (State) 46319 (Zip)

9 1 8 0 0 9 0 2
Site Number

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S.

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:
FLAMMABLE LIQUID NOS	FLAMMABLE... CLASS 55
~~WASTE SOLVENTS~~	UN1993

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-5-82 Laura Johnson (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 001045 (47–52) (1) GALLONS (2) CU. YDS. (Circle One) 1 (53)

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

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

(1) Thomas Paul Strand (Authorized Signature) DATE 01/05/82 (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: 1/5/82 (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

On dock 1/5/82 GRH
To 124K+63 GRH 1/6/82

002635

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0115761

312 593-3239

Authorization Number 9 91 301

MID-AMERICA PROTECTIVE COATINGS (Company Name) | 1395 LOUIS AVENUE (Address) | ILD 069499234

ELK GROVE VILLAGE, (City) | ILLINOIS (State) | 60007 (Zip)

0 31 44 0002 6 G
Generator Number

WASTE HAULER(S)

(1) STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILLINOIS (Hauler Address) | ILT 000646810 | S.W.H. Registration Number 0 024 002

(2) AMERICAN CHEMICAL (Hauler Name) | GRIFFITH, INDIANA (Hauler Address) | S.W.H. Registration Number 0 024 002

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 240 COLFAXXXX (Address) | 91 800 902 Site Number

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S.... | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:
~~FLAMMABLE LIQUID N.O.S.~~	~~FLAMMABLE CLASS 55~~
~~WASTE SOLVENTS~~	~~UN1993~~

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: ~~3-30-82~~ (Authorized Signature)

WASTE HAULER* 14,850 lbs QUANTITY OF WASTE RECEIVED: 00815 (1) GALLONS (2) CU. YDS. (Circle One) 1

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

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

(1) (Authorized Signature) DATE: 3/30/82

(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: 3/30/82

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

SITE COPY - PART 3

On dock 3-30-82 GRM
To 125 K 7-63 GRM 4/1/82

002636

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

0350428

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 91381

MID-AMERICA PROTECTIVE COATINGS (Company Name) | 3348 WASHINGTON ST. (Address)

FRANKLIN PARK, (City) | ILLINOIS (State) | 60131 (Zip)

031096005 4 G (Generator Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILLINOIS (Hauler Address) | S.W.H. Registration Number 0024002

ILT000646810

STRANS TRUCKING (Hauler Name) | CRESTWOOD, ILLINOIS (Hauler Address) | S.W.H. Registration Number 0024002

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

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

~~IND016316715~~

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S.

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
FLAMMABLE. LIQUID N.O.S.	FLAMMABLE	9000 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 001100

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/30/82 Betty Lee (Authorized Signature)

WASTE HAULER

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

(1) Stan Strand (Authorized Signature) DATE: 3 30 82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

Michael C. Bailey (Authorized Signature) DATE: 3 30 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 3-30-82 6PM
To 125RT-63 GRM 4/1/82

SITE COPY - PART 3

002637

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0377040

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 9 9 1 3 8 1

MID-AMERICA PROTECTIVE CTGS, INC. (Company Name) | 3348 WASHINGTON STREET (Address)

FRANKLIN PARK, (City) | ILLINOIS (State) | 60131 (Zip)

0 3 1 0 9 6 0 0 5 4 G — Generator Number

ILD069499234

WASTE HAULER(S)

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

S.W.H. Registration Number 0 0 2 4 0 0

ILT000646810

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

S.W.H. Registration Number 0 0 2 4 0 0

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

9 1 8 0 8 9 0 2 — Site Number

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

INDO16360965

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S.

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	
FLAMMABLE LIQUID N.O.S.	FLAMMABLE	WEIGHT FOR D.O.T. USE 11040 LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 1 3 2 0

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

METHOD OF SHIPMENT (Circle One) 20 DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/14/82 (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: 4 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:

(Authorized Signature) DATE: 4/14/82

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 125 RT-63 GRW 4/14/82

SITE COPY - PART 3

002638

STATE OF ILLINOIS

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

0377036

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9913 81

TO BE COMPLETED BY WASTE GENERATOR

MID-AMERICA PROTECTIVE COATINGS (Company Name) | 3348 WASHINGTON STREET (Address)
FRANKLIN PARK, (City) | ILLINOIS (State) | 60131 (Zip)
0 3 1 0 9 6 0 0 5 4 G (Generator Number)
ILD069499234

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILLINOIS (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 12
385-8440
ILD000646810

STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILLINOIS (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 12

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

IND 016360265
AMERICAN CHEMICAL SERVICE (Facility Name) | P.O. BOX 190 (Address)
9 1 8 0 8 9 0 2 (Site Number)
GRIFFITH, (City) | INDIANA (State) | 46319 (Zip)
[redacted] 768-3400

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: FLAMMABLE. LIQUID N.O.S. | HAZARD CLASS: FLAMMABLE...
WEIGHT FOR D.O.T. USE 5,980 (LBS) TONS (circle one)

UN 1993 | EPA R078

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 0 0 0 7 1 5
(1) GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) 13 (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: 6/18/82 Betty Lee (Authorized Signature)

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 6/18/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

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

[signature] (Authorized Signature) DATE: 6/23/82

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 6-18-82
To 126R T-63 6RM 6-23-82

SITE COPY - PART 3

002639

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0350427

312 593-3239

Authorization Number 9 9 1 3 8 1

TO BE COMPLETED BY WASTE GENERATOR

MID-AMERICA PROTECTIVE CTGS (Company Name) | 1395 LOUIS AVENUE (Address) | ILD 069499234

ELK GROVE VILAGE, I (City) | ILLINOIS (State) | 60007 (Zip)

0 3 1 4 4 0 0 0 2 6 G — Generator Number

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILLINOIS (Hauler Address) 385-5440 | ILT 000646810 S.W.H. Registration Number 0 0 2 4 0 0 1

AMERICAN CHEMICAL SERVICE (Hauler Name) | GRIFFITH, INDIANA (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 1

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 240 COLFAX AVENUE (Address) 769-3400 | 9 1 8 0 0 9 0 2 Site Number

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O..S | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	
FLAMMABLE LIQUID N.O.S.	CLASS 55	WEIGHT FOR D.O.T. USE 11,700 (LBS) TONS (circle one)
WASTE SOLVENTS	UN1993	EPA Waste #

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

QUANTITY OF WASTE DELIVERED: 0 0 1 4 3 0 | (1) GALLONS (Circle One) (2) CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (26) (DRUMS) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-18-82 | Laura Johnson (Authorized Signature)

WASTE HAULER

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

(1) (Authorized Signature) DATE: 6/18/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE 6/18/82

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

On dock. 6.18.82
To 126 RT-63 61 2W 6.23.82

SITE COPY - PART 3

002640

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0377037 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

312 593-3239

Authorization Number [redacted] (8–13)

MID-AMERICA PROTECTIVE COATINGS (Company Name) | 1395 LOUIS AVE. (Address) | ILD 069499234

ELK GROVE VI, IL. (City) | ILLINOIS (State) | 60007 (Zip)

03 14 400 26 G (14–24) Generator Number

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILLINOIS (Hauler Address) | ILT 000646810 S.W.H. Registration Number 00240 01 (25–31)

(312) 385-8440

AMERICAN CHEMICAL SERVICE (Hauler Name) | GRIFFITH, INDIANA (Hauler Address) | IND 016360265 S.W.H. Registration Number (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

(312) 768-3400

AMERICAN CHEMICAL SERVICE (Facility Name) | 240 COLFAX AVENUE (Address) | 91800902 (39–46) Site Number

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S. | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	
FLAMMABLE LIQUID N.O.S.	CLASS 55	WEIGHT FOR D.O.T. USE 15300 (LBS) TONS (circle one)
WASTE SOLVENTS	UN1993	

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

QUANTITY OF WASTE DELIVERED: 001870 (47–52) — (1) GALLONS (Circle One) (2) CU. YDS. (53)

34

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/18/82 — Mildred Wagner (Authorized Signature)

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 8/18/82 (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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael D Burger (Authorized Signature) DATE: 8/18/82 (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 124K 7-63 6PM 8/18/82

SITE COPY - PART 3

002641

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0115773 (1–7)

Authorization Number [illegible] (8–13)

MID AMERICA PROTECTIVE COATINGS (Company Name) 3348 WASHINGTON (Address)
FRANKLIN PARK (City) ILL (State) 60131 (Zip)

031440002 6 G (14–24) Generator Number

WASTE HAULER(S)

(1) AMERICAN CHEMICAL (Hauler Name) GRIFFITH, IND. (312) 768-3400 (Hauler Address) S.W.H. Registration Number 0024001 (25–31)

(2) STRAND TRUCKING (Hauler Name) 385-8440 13642 KENTON CRESTWOOD (Hauler Address) ILT S.W.H. Registration Number 00064681 (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) GRIFFITH IND. 312-7683400 (Address) 91X08902 (39–46) Site Number
420 S. COLLAX (City) IN (State) 46319 (Zip)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: WASTE SOLVENT F005 HAZARD CLASS: CLASS 1993

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/18/82 J. Mancini (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 000495 (47–52) (1 GALLONS / 2 CU. YDS.) (Circle One) (53)

METHOD OF SHIPMENT (Circle One) 9 (DRUMS) TANK TRUCK OPEN TRUCK OTHER VAN (Specify)

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

(1) [signature] (Authorized Signature) DATE: 8/18/82 (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:

Michael O'Brien (Authorized Signature) DATE: 8/18/82 (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 124R T-63 6PM 8.18.82

002642

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

0657961

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number

ILD 069499234

MID-AMERICA PROTECTIVE COATINGS-1395 LOUIS AVE. 312-593-3239 0 3 1 4 4 0 0 0 2 6
(Company Name) Address Phone Number Generator Number

ELK GROVE VILLAGE ILLINOIS 60007
City State Zip EPA Number

WASTE HAULER(S)

ILT 000646810

STRAND TRUCKING CRESTWOOD, ILLINOIS 003 1 0 0 1 ~~0 0 2 4 0 0~~ ✓
Hauler Name Hauler Address S.W.H. Registration Number

(312)385--8440
Phone Number EPA Number

AMERICAN CHEMICAL SERVICE GRIFFITH, INDIANA
Hauler Name Hauler Address S.W.H. Registration Number 0 0 2 4 0 0 2 ✓

35
(312) 768-3400
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 420 ~~240~~ COLFAX AVENUE 9 1 8 0 8 9 0 2 ✓
(Facility Name) Address Site Number

IND 016360265
GRIFFITH INDIANA 46319 (312)768-3400
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: FLAMMABLE LIQUID N.O.S WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: FLAMMABLE LIQUID N.O.S. CLASS 55

HAZARD CLASS.

U N 1 9 9 3
UN or NA Number

F005
EPA HW Number

WEIGHT FOR D.O.T. USE: 12,750 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 1650 (1) GALLONS (Circle One) 2 CU. YDS. 1

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION B. Kuempel (Authorized Signature) DATE: 10/13/82

WASTE HAULER

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

(1) L. Lindwall (Authorized Signature) DATE: 10/13/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

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

Michael O'Brien (Authorized Signature) DATE: 10/13/82

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

REV. # 4

SITE COPY - PART 3 TO 124 RT-63 GRM 10.13.82

002643

IL 532-610
LPC 62 8/81

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

0657960
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number ILD 069499234 (8–13)

MID-AMERICA PROTECTIVE COATINGS | 1395 LOUIS | 312-593-3239 | 0 3 1 4 4 0 0 0 2 6 G (14–24)
(Company Name) | Address | Phone Number | Generator Number

ELK GROVE VILLAGE | ILLINOIS | 60007 | EPA Number
City | State | Zip

WASTE HAULER(S)

ILT 000646810

STRAND TRUCKING | CRESTWOOD, ILLINOIS | S.W.H. Registration Number 002400 (25–31)
Hauler Name | Hauler Address

(312) 385-8440 | EPA Number
Phone Number

AMERICAN CHEMICAL SERVICE | GRIFFITH, INDIANA | IND 016360265 | S.W.H. Registration Number 002400 (32–38)
Hauler Name | Hauler Address

(312) 768-3400 | EPA Number
Phone Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE | 240 COLFAX AVENUE | IND 016360265 | 9 1 8 0 8 9 0 2 (39–46)
(Facility Name) | Address | Site Number

GRIFFITH | INDIANA | 46319 | (312) 768-3400 | EPA Number
City | State | Zip | Phone Number

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S. | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: FLAMMABLE LIQUID N.O.S. CLASS 55

HAZARD CLASS: UN 1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE: 7,050 (LBS) TONS (circle one)

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

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

METHOD OF SHIPMENT (Circle One): (DRUMS) 15 (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: Mildred Wagner (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) Jim Batten (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:

Michael E. Burns (Authorized Signature) DATE: 11/17/82 (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-50 6AM 11.17.82

002644

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

0717058

Authorization Number: Out of State

MIDLAND DIV DEXTER (Company Name)	1-7 E. WATER (Address)	3126234200 (Phone Number)	0971900001 (Generator Number)
WAUKEGAN (City)	ILL (State)	60085 (Zip)	ILD004531927 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name)	201 W 155th (Hauler Address)		S.W.H. Registration Number 0079019
	S. HOLLAND ILL	3125963317 (Phone Number)	ILD069506160 (EPA Number)
(Hauler Name)	(Hauler Address)		S.W.H. Registration Number
		(Phone Number)	(EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name)	420 COLFAX (Address)			91808902 (Site Number)
GRIFFITH (City)	IND (State)	(Zip)	3127683400 (Phone Number)	ILD016360265 (EPA Number)
(Alternate (Facility Name))	(Address)			(Site Number)
(City)	(State)	(Zip)	(Phone Number)	(EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
HAZARDOUS WASTE NOS	FLAMMABLE LIQUID	UN1263	F005

WEIGHT FOR D.O.T. USE 37920 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 004000 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 12-21-82

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) Tom Berry (Authorized Signature) DATE: 12/21/82 (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:

[signature] (Authorized Signature) DATE: 12/21/82 (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. # 4

SITE COPY - PART 3 TO 210F T-50 GRM 12.21.82

002645

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

0717100

Authorization Number OUTOF STATE

MIDLAND DEXTER 17E WATER 3126234200 097X900001 G
(Company Name) Address Phone Number Generator Number

ILD004531927
City State Zip EPA Number

WASTE HAULER(S)

MR FRANK 201 W 155th S HOLLAND ILL 3125963317 ILD069506160
Hauler Name Hauler Address Phone Number S.W.H. Registration Number 0079029 EPA Number

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH IND 3127683400 IND016360265
City State Zip Phone Number EPA Number

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

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: HAZARDOUS WASTE NOS
HAZARD CLASS: FLAMMABLE LIQUID
UN1263 UN or NA Number
F005 EPA HW Number

WEIGHT FOR D.O.T. USE 37925 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 [signature] (Authorized Signature) DATE: 12-28 82

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 12/28/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

[signature] (Authorized Signature) DATE 12/28/82

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. # 4

SITE COPY - PART 3 T0211K T-50 GAM 12.28.82

002646

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0303286

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 9 9 7 1 0 4

MIDLAND DIV., DEXTER CORP (Company Name) | 1-7 EAST WATER STREET (Address) | ILD 004531927

WAUKEGAN (City) | ILLINOIS (State) | 60085 (Zip)

0 9 7 1 9 0 0 0 0 1 G — Generator Number

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 2 1

SOUTH HOLLAND, ILL | ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | INDIANA (State) | (Zip) | IND 16360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT

K-078

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
PAINT SOLVENT	FLAMMABLE LIQUID	36,950 (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: 0 0 5 0 0 0

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/22/82 (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) D Burt (Authorized Signature) DATE: 01 22 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: 1/22/82

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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

TO 124 E T-63 6RM 1/22/82

SITE COPY - PART 3

002647

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

0303285 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104 (8–13)

MIDLAND DIVISION, DEXTER (Company Name) | 1-7 EAST WATER STREET (Address) | ILD 004531927

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

0971900001 G (14–24) Generator Number

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH (Hauler Address) | S.W.H. Registration Number 0079018 (25–31)

SOUTH HOLLAND, ILL. | ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918089021 (39–46) Site Number

GRIFFITH (City) | INDIANA (State) | (Zip) | IND 16360265

TO BE COMPLETED BY WASTE GENERATOR

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

K-078

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
PAINT SOLVENT	FLAMMABEE LIQUID	37,930 (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: 005000 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-22-81 (Authorized Signature)

WASTE HAULER

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

(1) Donald H Burt (Authorized Signature) DATE: (54–59) 01 29 82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE: YES ____ NO ____

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

(Authorized Signature) DATE: (60–65) 1 29 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 125 TK T-63 6RM 1/20/82

SITE COPY - PART 3

002648

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

0303290 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991104 (8–13)

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

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

D971900001 G (14–24) Generator Number

WASTE HAULER(S)

MR FRAND (Hauler Name) | 201 W 155th (Hauler Address) | S.W.H. Registration Number DD79018 (25–31)

SOUTH HOLLAND, ILL | ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | INDIANA (State) | Zip | IND 163602 65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT K-078

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: PAINT SOLVENT NA1993

HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 37420 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52)

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-27-82 (Authorized Signature)

WASTE HAULER

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

(1) (Authorized Signature) DATE: 01 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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 01 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

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

TO 125K T-63 GRM 1/27/82

SITE COPY - PART 3

002649

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0303291

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104

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

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | 32 623 4200 | 0971900001 G (Generator Number)

WASTE HAULER(S)

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

S. HOLLAND ILL | ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | IND (State) | Zip | IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT K 078

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: PAINT SOLVENT 1993

HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 31,250 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 004500 (47–52)

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/29/82 [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: 01 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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

BOB MANCK (Authorized Signature) DATE: 01 29 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 125 K T-63 GRM 1/29/82

SITE COPY - PART 3

002650

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

0586825 (1–7)

Authorization Number 991104 (8–13)

MIDLAND DUPAGE (Company Name) | I-7 E WATER (Address) | 312 334200 (Phone Number) | 09719 00021 (14 Generator Number, G 24)

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | ILD 004531927 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | S.W.H. Registration Number 0079021 (25–31)

SOUTH HOLLAND ILL | 3125963377 (Phone Number) | ILD 069606160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 9180890 02 (39 Site Number 46)

GRIFFITH (City) | IND (State) | (Zip) | 3127683400 (Phone Number) | ILD 063602652 (EPA Number)

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT K078 | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: PAINT SOLVENT | HAZARD CLASS: FLAMMABLE LIQUID | NA1993 (UN or NA Number) | EPA HW Number

WEIGHT FOR D.O.T. USE: 32815 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 005500 (47–52) (1 GALLONS (Circle One) 2. CU. YDS.) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (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) Robert Perkins (Authorized Signature) DATE 02/05/82 (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: 2/1/82 (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 124K T-63 6RM 2/5/82

002651

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0586824 (1–7)

Authorization Number 991104 (8–13)

MIDLAND DIV DEXTER (Company Name) | I-7 E WATER (Address) | 3126234200 (Phone Number) | 09719000001 G (14–24 Generator Number)

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | ILD045319127 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | S.W.H. Registration Number D079015 (25–31)

SOUTH HOLLAND ILL | 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 (Facility Name) | 420 COLFAX (Address) | 918089D2 (39–46 Site Number)

GRIFFITH (City) | IND (State) | Zip | 3121683400 (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: PAINT SOLVENT K-078 WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: PAINT SOLVENT | HAZARD CLASS: FLAMMABLE LIQUID | NA1993 (UN or NA Number) | 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 004500 (47–52) (1 GALLONS / 2 CU. YDS. (Circle One)) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 2-10-82

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 02/10/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

[signature] (Authorized Signature) DATE: 2/10/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: 11:40

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 6PM 2/10/82

002652

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

0303299 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997104 (13)

MIDLAND DIV DEXTER (Company Name) | 1-7 E WATER (Address)
ILD 004531927
WAUKEGAN (City) | ILL (State) | (Zip)
097190DDD01 G (14–24) Generator Number
312 623 4200

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 15TH (Hauler Address)
S HOLLAND ILL
S.W.H. Registration Number ODT9D18 (25–31)
ILD 069506160

(Hauler Name) | (Hauler Address)
S.W.H. Registration Number 312 546 3377 (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address)
GRIFFITH (City) | IND (State) | (Zip)
9180890Z (39–46) Site Number
IAD 016360265
312 [redacted] 7683400

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT I
K078

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: ~~NA~~ NA1993

SHIPPING DESCRIPTION: PAINT SOLVENT | HAZARD CLASS: FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 8450 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52)

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION.

DATE: 3-4-82 (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) [signature] (Authorized Signature) DATE: 03 04 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 3-4-82 (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 124R T-63 612M 3/4/82

SITE COPY - PART 3

002653

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

0586819 (1–7)

Authorization Number 997104 (8–13)

MIDLAND DEXTER (Company Name) | I-T-E WATER (Address) | 3126234200 (Phone Number) | 09719D0001 G (14 Generator Number 24)

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | ILD004531927 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | S.W.H. Registration Number DD79019 (25–31)

S. HOLLAND, ILL | 3125963317 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | IND (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT K-078 WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: PAINT SOLVENT | HAZARD CLASS: FLAMMABLE LIQUID | NA1993 (UN or NA Number) | EPA HW Number

WEIGHT FOR D.O.T. USE 37,400 (LBS / TONS circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 004500 (47–52) (GALLONS / 2 CU. YDS. Circle One) 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (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) [signature] (Authorized Signature) DATE: 03/01/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 3/1/82 (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 125R T-636 RM 3/1/82

002654

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0586816 (1–7)

Authorization Number 991104 (8–13)

MIDLAND DEXTER (Company Name) | 1-7 E WATER (Address) | 3126234200 (Phone Number) | 0971900001 G (14 Generator Number 24)

WAUKEGAN (City) | IL (State) | 60085 (Zip) | ILD004531927 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | S. HOLLAND IL | 3125963377 (Phone Number) | S.W.H. Registration Number DD19009 (25–31) | ILD069506160 (EPA Number)

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | IND (State) | (Zip) | 3127683400 (Phone Number) | INDD163600265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: PAINT SOLVENT | HAZARD CLASS: FLAMMABLE LIQUID | NA1993 (UN or NA Number) | (EPA HW Number)

WEIGHT FOR D.O.T. USE: 37920 LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 004800 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. | 6 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 3-9-82

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) [signature] (Authorized Signature) DATE: 03/09/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

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

[signature] (Authorized Signature) DATE: 3/9/82 (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 125 RT-63 GRM 3/9/82

002655

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0419504

Authorization Number 997104

MIDLAND DIV DEXTER (Company Name) | 1-7 E. WATER (Address) | 3126234200 (Phone Number) | 0971900001 (Generator Number)

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | ILD004531927 (EPA Number)

WASTE HAULER(S)

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

S. HOLLAND, ILL | 3125963317 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | IND (State) | Zip | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: HAZARDOUS WASTE NOS HAZARD CLASS: FLAMMABLE LIQUID | NA1993 (UN or NA Number) | FD05 (EPA HW Number)

WEIGHT FOR D.O.T. USE 37250 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 005000 (1 GALLONS (Circle One) 2 CU. YDS.)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 4/27/82

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) [signature] (Authorized Signature) DATE: 04 27 82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 04/27/82

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 126 TK T-63 GRM 4.27.82

002656

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

0613951
Authorization Number 99704

MIDLAND DIV DEXTER (Company Name) | I-TE WATER (Address) | 3126234200 (Phone Number) | 09719000D1 G (Generator Number)

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | ILD045319 27 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W 155th (Hauler Address) | S. HOLLAND ILL | S.W.H. Registration Number DD79009

3125963317 (Phone Number) | ILDD695D6160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | IND (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS AND PAINTS | WASTE PHASE: LIQUID (Liquid Gaseous. Solid)

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

SHIPPING DESCRIPTION: HAZARDOUS WASTE, NOS | HAZARD CLASS: FLAMMABLE LIQUID | NA1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 38,125 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED 00500 (1 GALLONS (Circle One) 2 CU. YDS.) 1

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH 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: 5-11-82

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) [signature] (Authorized Signature) DATE: 05/11/82

(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:

[signature] (Authorized Signature) DATE: 5/11/82

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. # 4

SITE COPY - PART 3

TO 124K T-63 GPM 5-11-82

002657

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

0613949 (1–7)

Authorization Number 997104 (8–13)

MIDLAND DIV DEXTER 1-7 E WATER 3126234200 09719000D1 G
(Company Name) (Address) (Phone Number) (14) (Generator Number) (24)

WAUKEGAN ILL 60085 ILD004531927
City State Zip EPA Number

WASTE HAULER(S)

MR FRANK 201 W 155TH
Hauler Name Hauler Address

S. HOLLAND/ILL 3125963317 S.W.H. Registration Number OD79018 (25–31)
Hauler Address 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 420 COLFAX 9180890Z (39–46)
(Facility Name) Address Site Number

GRIFFITH IND 3127683400 IND016360265
City State Zip Phone Number EPA Number

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

City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: HAZARDOUS WASTE, NOS
HAZARD CLASS: FLAMMABLE LIQUID
NA1993 (UN or NA Number)
F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 38,250 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52) 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 E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) 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) [signature] (Authorized Signature) DATE: 05/24/82 (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: 05/24/82 (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

SITE COPY - PART 3

To 125 KT-63 GRM 5-24-82

002658

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

0613947

Authorization Number 997104

MIDLAND DIV., DEXTER CORP (Company Name) | 1-7 EAST WATER STREET (Address) | 3126234200 (Phone Number) | 0971900001 (Generator Number)

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | ILD004531927 (EPA Number)

WASTE HAULER(S)

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

S. HOLLAND, ILL | 3125963317 (Phone Number) | IL0069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918089 02 (Site Number)

GRIFFITH (City) | INDIANA (State) | Zip | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: HAZARDOUS WASTE, NOS

HAZARD CLASS: FLAMMABLE LIQUID

NA 1993 (UN or NA Number) | FD05 (EPA HW Number)

WEIGHT FOR D.O.T. USE 37,230 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 005000 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 6-1-82

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: 06/01/82 (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: 6/1/82 (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 TO126K T-63 GRM 6.1.82

002659

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

0613945

Authorization Number 997104

TO BE COMPLETED BY WASTE GENERATOR

MIDLAND DIV DEXTER | 1-7E WATER | 3126234200 | 0971900001 G
(Company Name) | Address | Phone Number | Generator Number

WAUKEGAN | ILL | 60085 | ILD045319 27
City | State | Zip | EPA Number

WASTE HAULER(S)

MR. FRANK | 201 W 155th | S. HOLLAND, ILL | S.W.H. Registration Number DD79018
Hauler Name | Hauler Address | Phone Number 3125963317 | EPA Number ILD069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL | 420 CLFAX | 9180892
(Facility Name) | Address | Site Number

GRIFFITH | IND | 3127683400 | IND016360265
City | State | Zip | Phone Number | EPA Number

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS AND PAINT. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: HAZARDOUS WASTE NOS | HAZARD CLASS: FLAMMABLE LIQUID | ~~NA~~ 1993 (ON or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 38120 ~~LBS~~ TONS (circle one)

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

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 6-10-82

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE: 06/10/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES X NO ___

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

_____ (Authorized Signature) DATE: 6/10/82

INSTRUCTIONS _____

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

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

WHITE COPY - PART 3 To 125 K T-63 6PM 6-10-82

002660

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

0613934
1 7

Authorization Number ____ 8 13

MIDLAND DIV DEXTER (Company Name) | 17 E WATER (Address) | 3126234200 (Phone Number) | 0971900001 G (Generator Number) 14 24

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | IL0004531927 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | S.W.H. Registration Number D079009 25 31

S HOLLAND ILL | 3125463317 (Phone Number) | IL0069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH IND (City) | IND (State) | Zip | 3127683400 (Phone Number) | IND016360265 (EPA Number)

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: HAZARDOUS WASTE NOS | HAZARD CLASS: FLAMMABLE LIQUID | UN1263 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 38,120 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 005000 47 52 | 1 GALLONS (Circle One) 2 CU. YDS. 53

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 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) Donald H Bult (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:

[signature] (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. # 4

SITE COPY - PART 3 TO 210 RT-50 GPM 8.9.82

002661

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

0613932 (1–7)

Authorization Number ____ (8–13)

MIDLAND Div Dexter (Company Name) | 1-7 E WATER (Address) | 3126234200 (Phone Number) | D971900001 G (14–24 Generator Number)

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | ILDD04531427 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | 3125963317 (Phone Number) | S.W.H. Registration Number D079 (25–31) | ILD069506160 (EPA Number)

S HOLLAND ILL

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 E 44TH AX (Address) | 9180890 (39–46 Site Number)

GRIFFITH (City) | IND (State) | Zip | 3127683400 (Phone Number) | IND016360265 (EPA Number)

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
HAZARDOUS WASTE, NOS	FLAMMABLE LIQUID	NA1493	F005

WEIGHT FOR D.O.T. USE: 38 120 (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. 6 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) DATE: 8-12-82

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) Robert Bertuna (Authorized Signature) DATE: 08/12/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

R Rumfee (Authorized Signature) DATE: 8/12/82 (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 EPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. 8 4

SITE COPY - PART 3

To 203 R. T-50 6PM 8.12.82

002662

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

0613944

Authorization Number 997104

MIDLAND DIV DEXTER (Company Name) | 1-7 E WATER (Address) | 3126234200 (Phone Number) | 0971900001 (Generator Number)

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | ILD004531927 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | S.W.H. Registration Number 0079029

S HOLLAND ILL | 3125963317 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | IND (State) | Zip | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: HAZARDOUS WASTE NOS | HAZARD CLASS: FLAMMABLE LIQUID | NA1993 (UN or NA Number) | FDDS (EPA HW Number)

WEIGHT FOR D.O.T. USE 37,120 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 [signature] (Authorized Signature) DATE: 6-16-82

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) Ronald Bridgewater (Authorized Signature) DATE: 6/16/82

(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: 6/16/82

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. # 4

SITE COPY - PART 3 To 124 FT-63 GRM 6.16.82

002663

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

0613943

Authorization Number 997104 (8–13)

TO BE COMPLETED BY WASTE GENERATOR

MIDLAND DU DEXTER (Company Name) | I-7 E WATER (Address) | 3126234200 (Phone Number) | 0971900001 (Generator Number) G (24)

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | ILD 004531927 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | 5. HOLLAND, ILL | 3125963317 (Phone Number) | S.W.H. Registration Number 0079029 (25–31) | ILD 069506160 (EPA Number)

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM (Facility Name) | 420 COLFAX (Address) | 9180890 2 (Site Number 39–46)

GRIFFITH (City) | IND (State) | (Zip) | 3127683400 (Phone Number) | IND 016360265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: HAZARDOUS WASTE, NOS | HAZARD CLASS: FLAMMABLE LIQUID | NA 1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 38,120 (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 Michael M. McCreary (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) Mike Geiger (Authorized Signature) | DATE: 6/21/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

(Authorized Signature) | DATE: 6/21/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 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 FT-63 GRM 6·21·82

002664

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

0613940

Authorization Number 997104

MIDLAND DIV DEXTER (Company Name) | 1-7 E WATER (Address) | 3126234200 (Phone Number) | 0971900001 (Generator Number)

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | ILD004531927 (EPA Number)

WASTE HAULER(S)

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

S. HOLLAND, ILL | 3125963317 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918 08902 (Site Number)

GRIFFITH (City) | IND (State) | Zip | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS AND PAINT ; WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: HAZARDOUS WASTE NOS | HAZARD CLASS: FLAMMABLE LIQUID | NA1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 37850 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 Michael N. McCreary (Authorized Signature) DATE: 6-28-82

WASTE HAULER

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

(1) Ronald B. Bridgewater (Authorized Signature) DATE: 6/28/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 6/28/82 (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. # 4

SITE COPY - PART 3

To 124 T-63 GRM 6-28-82

002665

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

0613938
Authorization Number 991104

MIDLAND DIVDEXTER 1-7 E WATER 3126234200 09719DDDD1 G
(Company Name) Address Phone Number 14 Generator Number 24

WAUKEGAN ILL 60085 ILDO453192 7
City State Zip EPA Number

WASTE HAULER(S)

MR FRANK 201 W 155th S. HOLLAND ILL 3125963317 D079009
Hauler Name Hauler Address Phone Number S.W.H. Registration Number 25 31

ILDO69506160
EPA Number

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

Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL 420 COLFAX 9180890 2
(Facility Name) Address 39 Site Number 46

GR. FLTN IND 3127683400 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46

City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: HAZARDOUS WASTE, NOS
HAZARD CLASS: FLAMMABLE LIQUID
NA1993 (UN or NA Number)
FDO 5 (EPA HW Number)

WEIGHT FOR D.O.T. USE 38 350 LBS / TONS (circle one)

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

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 7-14-82

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) [signature] (Authorized Signature) DATE: 07/14/82 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: 7/14/82 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 125F T-63 6RM 7.14.82

002666

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

06139

Authorization Number _____ 8

MIDLAND DN DEXTER (Company Name) | 17 E WATER (Address) | 3126234200 (Phone Number) | 097190000 (14) (Generator Number)

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | ILD004531 9 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W. 155th (Hauler Address) | S.W.H. Registration Number 00790. (25)

S. HOLLAND, ILL | 3125963317 (Phone Number) | ILD06950616 (EPA Number)

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

_____ (Phone Number) _____ (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918 089 (39) (Site Number)

GRIFFITH (City) | IND (State) | _____ (Zip) | 3127683400 (Phone Number) | IND01636026 (EPA Number)

_____ (Alternate (Facility Name)) _____ (Address) _____ (39) (Site Number)

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

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: HAZARDOUS WASTE NOS | HAZARD CLASS: FLAMMABLE LIQUID | NA1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 38,200 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 [signature] (Authorized Signature) DATE: 7-21-82

WASTE HAULER

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

(1) Donald H Bult (Authorized Signature) DATE: 07/21/82 (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: 7/21/82 (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. # 4

SITE COPY - PART 3 TO 124FT-63 GRM 7.21.82

002667

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

0613936 (1–7)

Authorization Number ____ (8–13)

MIDLAND Div DEXTER | 1-7 & WATER | 3126234200 | 0971900001 (G, 14–24)
(Company Name) | Address | Phone Number | Generator Number

WAUKEGAN | ILL | 60085 | ILD004531927
City | State | Zip | EPA Number

WASTE HAULER(S)

MR FRANK | 201 W. 155th, S. HOLLAND, ILL | 3125963317 | S.W.H. Registration Number D079009 (25–31) | ILD069506160
Hauler Name | Hauler Address | Phone Number | EPA Number

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL | 420 COLFAX | 9180890 (39–45) Site Number
(Facility Name) | Address

GRIFFITH | IND | 3127683400 | IND016360265
City | State | Zip | Phone Number | EPA Number

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
HAZARDOUS WASTE NOS	FLAMMABLE LIQUID	NA1993	F005

WEIGHT FOR D.O.T. USE 37970 (LBS / TONS circle one)

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

QUANTITY OF WASTE DELIVERED: 004500 (47–52) (GALLONS / 2 CU. YDS. circle one) (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) DATE: 7/29/82

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) Tom Berry (Authorized Signature) DATE: 07/29/82 (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:

(Authorized Signature) ____ DATE: 7-29-82 (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 1257 T-63 61 MM 7-29-82

002668

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

0613930
1 7

Authorization Number ____ 8 13

MIDLAND Dr Dept | I-57 EAST | Mkt | 312 | 6234200 | 091190000 1 G
(Company Name) | Address | Phone Number | 14 | Generator Number | 24

WANKEGAN | ILL | 60085 | ILD004531927
City | State | Zip | EPA Number

WASTE HAULER(S)

Mr FRANK | 201 W 155th | S. HOLLAND ILL | 312 | 5963317 | S.W.H. Registration Number 0079019 | ILD069506160
Hauler Name | Hauler Address | Phone Number | EPA Number

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

Phone Number | EPA Number

DESTINATION — DISPOSAL, STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL | 420 6 FAX | 9180890 2
(Facility Name) | Address | 39 Site Number 46

GRIFFITH | IND | 312 | 7683400 | IND 016360265
City | State | Zip | Phone Number | EPA Number

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: HAZARDOUS WASTE NOS | HAZARD CLASS: FLAMMABLE LIQUID | UN 1263 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 37250 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 004500 47 52 GALLONS (Circle One) 2 CU. YDS. 53

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) DATE 8-23-82

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 08/23/82 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.

____ (Authorized Signature) DATE: 8/23/82 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. # 4

SITE COPY - PART 3

To 210 E-T-50 61201
8.23.82

002669

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

0613927
1 7

Authorization Number ____ 8 13

TO BE COMPLETED BY WASTE GENERATOR

MIDLAND DEVEL I-7 E WATER 3126234200 0911900001 G
(Company Name) Address Phone Number 14 Generator Number 24

WAUKEGAN ILL 60085 ILD 045319271
City State Zip EPA Number

WASTE HAULER(S)

MR FRANK 201 W 155th S. HOLLAND ILL 3125963317 S.W.H. Registration Number D079009 25 31
Hauler Name Hauler Address 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 420 COLFAX 91808922 39 Site Number 46
(Facility Name) Address
GRIFFITH IND 3127883400 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46

City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
HAZARDOUS WASTE NOS	FLAMMABLE LIQUID	UN1263	F005

WEIGHT FOR D.O.T. USE 38,100 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 47 52 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: 9-9-82

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) Donald D Buell (Authorized Signature) DATE: 09/09/82 54 59

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

(Authorized Signature) DATE: 9/9/82 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. # 4

SITE COPY - PART 3

TO 211K T-50 6PM 9.9.82

002670

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

0613925
1 7

Authorization Number ____ 8 13

TO BE COMPLETED BY WASTE GENERATOR

MIDLAND DIV DEXTER | 1-7 E WATER | 3126234200 | 09719DDDDL G
(Company Name) | Address | Phone Number 14 | Generator Number 24

WAUKEGAN | ILL | 60085 | EPA Number
City | State | Zip

WASTE HAULER(S)

MR FRANK | 201 W 155th | S.W.H. Registration Number D079029
Hauler Name | Hauler Address | 25 31

S. HOLLAND/IL | 3125963317 | ILD069506160
Phone Number | EPA Number

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH | IND | 3127683400 | IND016360265
City | State | Zip | Phone Number | EPA Number

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: HAZARDOUS WASTE NOS | HAZARD CLASS: FLAMMABLE LIQUID | UN or NA Number: NA1263 | EPA HW Number: F005

WEIGHT FOR D.O.T. USE: 37920 LBS / TONS (circle one)

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

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 9-20-82

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE: 09/20/82 (54 59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

_____ (Authorized Signature) DATE: 9/20/82 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. 8 4

SITE COPY - PART 3 To 211 E T-50 GRAM 9-20-82

002671

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

0613917
1 7

Authorization Number ____ 8 ____ 13

TO BE COMPLETED BY WASTE GENERATOR

MIDLAND Div Dexter | 1-75 WATER | 3126234200 | 097190000 1 G
(Company Name) | Address | Phone Number | 14 Generator Number 24

WAUKEGAN | ILL | 60085 | ILD 045 319 27
City | State | Zip | EPA Number

WASTE HAULER(S)

MR FRANK | 201 W 155th
Hauler Name | Hauler Address | S.W.H. Registration Number D079021 (25 31)

S. HOLLAND | 3125963317 | ILD 069 506 160
Hauler Address | Phone Number | EPA Number

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL | 420 COLFAX | 9180892 (39 46)
(Facility Name) | Address | Site Number

GRIFFITH | IND | 31276834 00 | IND 016 360 265
City | State | Zip | Phone Number | EPA Number

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
HAZARDOUS WASTE NOS	FLAMMABLE LIQUID	NA 1993	F005

WEIGHT FOR D.O.T. USE 37,350 (LBS / TONS circle one)

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

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) DATE 10-8-82

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: 10 08 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 08 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

T0124FT-63 6RM1 10/8/82

002672

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

0613915

Authorization Number

MIDLAND DN DEXTER | 17 E WAT | 3126234200 | 0971900001 G
(Company Name) | Address | Phone Number | Generator Number

WAUKEGAN | ILL | 60085 | ILD004531927
City | State | Zip | EPA Number

WASTE HAULER(S)

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

S HOLLAND, ILL | 3125963317 | ILD069506160
Phone Number | EPA Number

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL | 420 COLFAX | 918 08902
(Facility Name) | Address | Site Number

GRIFFITH | IND | 3127683400 | IND016360265
City | State | Zip | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: HAZARDOUS WASTE NOS | HAZARD CLASS: FLAMMABLE LIQUID | NA1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 37,725 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 005000 | 1 GALLONS (Circle One) 2 CU. YDS.

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 10-15-82

WASTE HAULER

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

(1) Tom Berry (Authorized Signature) DATE: 10/15/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 10/15/82

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 124K T-63 10.15.82 GRM

002673

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

0613913
1 7

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number ____ 8 ____ 13

MIDLAND DEXTER | I-7 E WATER | 312 623 4200 | 0971900001 G
(Company Name) | Address | Phone Number | 14 Generator Number 24

WAUKEGAN | ILL | 60085
City | State | Zip

ILD004531927
EPA Number

WASTE HAULER(S)

MR FRANK | 201 W 155th S HOLLAND ILL | 3125963317 | S.W.H. Registration Number 0079018 (25 31) | ILD069506160
Hauler Name | Hauler Address | Phone Number | EPA Number

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH | IND | 312 683400 | IND 163602 65
City | State | Zip | Phone Number | EPA Number

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
HAZARDOUS WASTE NOS	FLAMMABLE LIQUID	NA1993	F005

WEIGHT FOR D.O.T. USE 37260 (LBS) TONS (circle one)

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

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) DATE: 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) Robert Perkins (Authorized Signature) DATE: 10/19/82 (54 59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

____ (Authorized Signature) DATE: 10/19/82 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3

To 125 FT-63 G'M 10.19.82

002674

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

0717056
1 7

Authorization Number ____ 8 13

MIDLAND DIV DEXTER (Company Name) | 17 E WATER (Address) | 3126234200 (Phone Number) | 0971900001 (Generator Number) G 14 24

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | ILD004531927 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | S.W.H. Registration Number 0079026 25 31

S. HOLLAND (Hauler Name) | ILL (Hauler Address) | 3125963317 (Phone Number) | ILD069506160 (EPA Number)

S.W.H. Registration Number ____ 32 38

Phone Number ____ | EPA Number ____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | IND (State) | Zip | 3127683400 (Phone Number) | IND016360265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: HAZARDOUS WASTE, NOS HAZARD CLASS: FLAMMABLE LIQUID NA1943 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 37,980 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 004800 47 52 1 GALLONS (Circle One) 2 CU. YDS. 1 53

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 11-3-82

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: 11/03/82 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: 11/3/82 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 125 RT-63 GRM 11-3-82

002675

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

0613914

Authorization Number

MIDLAND DY DEXTER (Company Name) | 1-7 E WATER (Address) | 3126234200 (Phone Number) | 0971900001 (Generator Number)

WAUKEGAN (City) | ILL (State) | (Zip) | ILD004531927 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W. 155th (Hauler Address) | S.W.H. Registration Number 0079021

S. HOLLAND, ILL | 3125963317 (Phone Number) | ILD069506160 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | IND (State) | (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS + PAINT

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: HAZARDOUS WASTE, NOS

HAZARD CLASS: FLAMMABLE LIQUID

NA1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 38,725 LBS TONS (circle one)

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

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 10-22-82

WASTE HAULER

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

(1) Robert Perkins (Authorized Signature) DATE: 10/22/82

(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: 10/22/82

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

V. # 4

SITE COPY - PART 3

TO 125 K 7-63 GRM 10 22 82

002676

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

0613911 (1–7)

Authorization Number ____ (8–13)

MIDLAND DU DEXTER (Company Name) | 1-7 E. WATER (Address) | 3126234200 (Phone Number) | D971900001 G (14 Generator Number 24)

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | ILD004531927 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W. 155TH (Hauler Address) | S. HOLLAND ILL | 3125963317 (Phone Number) | S.W.H. Registration Number D079021 (25–31) | FLD069506160 (EPA Number)

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

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 COLFAX (Address) | 918 D8902 (39 Site Number 46)

GRIFFITH (City) | IND (State) | ____ (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: ORGANIC SOLVENT HAZARDOUS WASTE, LOS LIQUID | HAZARD CLASS: FLAMMABLE | NA1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 37950 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 004500 (47–52) | GALLONS (Circle One) 2 CU. YDS. (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) | DATE: 10/27/82

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) Robert Perkins (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: ____

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 TO124FT-636LM 10·27·82

002677

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

0717077 (1–7)

Authorization Number ____ (8–13)

MIDLAND DIV DEXTER | I-T-E WATER | 3126234200 | D971900001 G
(Company Name) | Address | Phone Number | Generator Number (14–24)

WAUKEGAN | ILL | 60085 | ILD 004531927
City | State | Zip | EPA Number

WASTE HAULER(S)

MR. FRANK | 201 W 155TH | S. HOLLAND, ILL | 3125463317 | S.W.H. Registration Number D079025 (25–31) | ILD069506160
Hauler Name | Hauler Address | Phone Number | EPA Number

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL | 420 COLFAX | 918 D8 902 (39–46)
(Facility Name) | Address | Site Number

GRIFFITH | IND | 31276834 00 | IND 016360265
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: ORGANIC SOLVENTS & PAINT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
HAZARDOUS WASTE NOS	FLAMMABLE LIQUID	NA1993	F005

WEIGHT FOR D.O.T. USE: 38,225 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 Mary Stuhr (Authorized Signature) DATE: 11-11-82

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) Robert Perkins (Authorized Signature) DATE: 11/11/82 (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: 11/11/82 (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. # 4

SITE COPY - PART 3

To 125 RT-63 6PM 11.11.82

002678

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

0613906

Authorization Number: out of state

MIDLAND DIV DEXTER (Company Name) | 17 E WATER (Address) | 3126234200 (Phone Number) | 0971900001 (Generator Number)

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | ILD004531927 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155th (Hauler Address) | S.W.H. Registration Number 0079029

S. HOLLAND (Hauler Address) | 3125963317 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | IND (State) | Zip | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: HAZARDOUS WASTE NOS | HAZARD CLASS: FLAMMABLE LIQUID | NA1993 (UN or NA Number) | FDD5 (EPA HW Number)

WEIGHT FOR D.O.T. USE 37970 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 005000 (1 GALLONS (Circle One) 2 CU. YDS.)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 12-2-82

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) [signature] (Authorized Signature) DATE: 12/02/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 12/2/82

COMMENTS OR SPECIAL INSTRUCTIONS: 1.20.

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV: # 4

SITE COPY - PART 3

TO 210 K T-50 GRM 12-2-82

002679

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

0613908
Out of State
Authorization Number DISPOSAL (8–13)

MIDLAND DIV DEFTER 1-7 EWATER | 3126234200 | 09719000001 G
(Company Name) | Address | Phone Number (14) | Generator Number (24)

WAUKEGAN | IL | 60085 | ILD004531927
City | State | Zip | EPA Number

WASTE HAULER(S)

MR FRANK | 201 W 155th Hollland IL 60473 | 3125963317 | S.W.H. Registration Number 0079009 (25–31) | ILD069506160
Hauler Name | Hauler Address | 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

America Chemical | 420 Colfax | 9180890 2 (39–46)
(Facility Name) | Address | Site Number

Griffith | IND | 31276834001 IND 016360265
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: ORGANIC SOLVENTS & PAINT WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
HAZARDOUS WASTE NOS	FLAMMABLE LIQUID	NA1993	F005

WEIGHT FOR D.O.T. USE 38000 (LBS) TONS (circle one)

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

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 12-9-1982

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) Tom Berry (Authorized Signature) DATE: 12/09/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

[signature] (Authorized Signature) DATE: 12/09/82 (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 205 K T-50 GRM 12.9.82

002680

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

0717051 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number ____ (8–13)

MIDLAND DIV DEXTER | I-7 E WATER | 3126234200 | 0971900001 (G)
(Company Name) | Address | Phone Number | Generator Number (14–24)

WAUKEGAN | ILL | 60085 | ILD 004531927
City | State | Zip | EPA Number

WASTE HAULER(S)

MR FRANK | 201 W. 155th
Hauler Name | Hauler Address

S.W.H. Registration Number 0079025 (25–31)

S. HOLLAND, ILL | 3125963317 | ILD 069506160
Hauler Address | Phone Number | EPA Number

Hauler Name | Hauler Address

S.W.H. Registration Number ____ (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL | 420 COLFAX | 9180890 2 (39–46)
(Facility Name) | Address | Site Number

GRIFFITH | IND | | 3127683400 | IND 016360265
City | State | Zip | Phone Number | EPA Number

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS + PAINT | WASTE PHASE: LIQUID (Liquid / Gaseous, Solid)

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

SHIPPING DESCRIPTION: ORGANIC PAINT HAZARDOUS WASTE, LIQUID | HAZARD CLASS: FLAMMABLE | UN1263 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 38,175 (LBS / TONS (circle one)) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED 004000 (47–52) (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 E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) | DATE: 12/14/82

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) C Bourcki (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: ____

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 118 K T-50 GKM 12-14-82

002681

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

0717054
1 7

Authorization Number OUT OF STATE
8 13

MIDLAND DU DEXTER (Company Name) | 1-7 E WATER (Address) | 3126234200 (Phone Number) | 0971900001 G (Generator Number) 14 24

WAUKEGAN (City) | ILL (State) | 60085 (Zip) | ILD 004531927 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W. 155th (Hauler Address) | S.W.H. Registration Number 0079009 25 31

S. HOLLAND, ILL | 3125463317 (Phone Number) | ILD 069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | IND (State) | Zip | 3127683400 (Phone Number) | IND016360265 (EPA Number)

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: HAZARDOUS WASTE, NOS | HAZARD CLASS: FLAMMABLE LIQUID | UN1263 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 38,120 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 [signature] (Authorized Signature) DATE: 12/16/82

WASTE HAULER

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

(1) Michael Martin (Authorized Signature) DATE: 12/16/82 54 59

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 12/16/82 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 T0210RT-50 GDM 12·16·82

002682

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0561199

Authorization Number 9194588

MODAGRAFICS CORP. (Company Name) | 5300 NEWPORT (Address) | 312/392/3980 (Phone Number) | 031273001 3 (Generator Number)

ROLLING MEADOWS (City) | ILLINOIS (State) | 60008 (Zip) | EPA Number

WASTE HAULER(S)

LAND-GREBE MOTOR (Hauler Name) | VALPARISO, INDIANA (Hauler Address) | S.W.H. Registration Number

219/721/0095 (Phone Number) | IND009842824 (EPA Number) ICC#2980

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. (Facility Name) | P.O. BOX 190 - COLFAX ST. (Address) | 91808902 (Site Number)

GRIFFIN (City) | INDIANA (State) | 46319 (Zip) | 219/924/4370 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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: FLAMABLE LIQUID

HAZARD CLASS: FLAMABLE

UN1993 (UN or NA Number) | F003 (EPA HW Number)

WEIGHT FOR D.O.T. USE 5,000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 440 (1 GALLONS (Circle One) 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One) DRUMS 8 (Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 11/12/82

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) (Authorized Signature) DATE: / /

(2) [signature] (Authorized Signature) DATE 11 15 82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

Bob Mauck (Authorized Signature) DATE 11 15 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 204 KT-50 GPM 11-15-82

002683

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NUMBER

Area Sanitary Service — SHIPPER NUMBER #127

NAME OF CARRIER (SCAC) — CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER		Monon Trailer Division P.O. Box 655 Monon, Ind. 47959	3/1/—
TRANSPORTER # 1	IMT 190011700	1-219-583-8990 Area Sanitary Service 503 S. Main Monticello, Ind. 47960	3/1/—
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service P.O. Box 190 Griffith, Ind.	3/1/—
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)
29	x	Foo5		1993		1595Gm		1,600		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

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

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

CERTIFICATION

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

GENERATOR'S SIGNATURE — DATE

This is to certify acceptance of the hazardous waste shipment.

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

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

TSDF SIGNATURE — DATE 3/1/82

5

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TSDF COPY To 204R T-50 6PM 3/12/82

002684

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NUMBER

Area Sanitary Service — #127

NAME OF CARRIER (SCAC) — SHIPPER NUMBER / CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND005176326	Monon Trailer Division P.O. Box 655 Monon, Ind. 47959 ~~219-253-6621~~	
TRANSPORTER # 1	INT190011700	Area Sanitary Service 503 S. Main Monticello, Ind. 47960 ~~219-583-3990~~	3/30/82
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service P.O. Box 190 Griffith, Ind. 46319 ~~219-924-4370~~	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
29	X		Toluene	1992		1555		1600		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

_____ Signature

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

_____ (Signature of Consignor)

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

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

CERTIFICATION

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

GENERATOR'S SIGNATURE — DATE

This is to certify acceptance of the hazardous waste shipment.

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

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

TSDF SIGNATURE — DATE 3/31/82

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TSDF COPY TO 124 RT-63 GRM 3·30·82

002685

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NUMBER

Area Sanitary Service — NAME OF CARRIER — (SCAC)

SHIPPER NUMBER #127 — CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND005176326	Monon Trailer Division P.O. Box 655 Monon, Ind. 47959 ~~219-253-6621~~	4/20/82
TRANSPORTER # 1	INT160011700	Area Sanitary Service 503 S. Main Monticello, Ind. 47960 ~~219-583-8990~~	4/20/82
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service P.O. Box 190 Griffith Ind. 46319 ~~219-924-4370~~	4/24/82
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)
29 T	X	~~D005~~ Waste Toluene		1993		15°C		1600		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

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

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

CERTIFICATION

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

GENERATOR'S SIGNATURE _____ DATE _____

This is to certify acceptance of the hazardous waste shipment.

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

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

TSDF SIGNATURE _____ DATE 4/21/82

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To 124K
T-63 GRM 4/20/82

TSDF COPY

002686

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NUMBER

Area Sanitary Service — NAME OF CARRIER — (SCAC)

#127 — SHIPPER NUMBER / CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	INDC05176326	Monon Trailer Division P.O. Box 655 Monon, Ind. 47959 219-253-5621	
TRANSPORTER # 1	INT190011700	Area Sanitary Service 503 S. Main Monticello, Ind. 47960 219-583-8390	7/23/82
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service P.O. Box 190 Griffith Ind. 46319 219-924-4370	7/23/82
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)
29	x	F005	Waste Toluene	1993		15956		1100		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

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

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

CERTIFICATION

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

GENERATOR'S SIGNATURE _____ DATE _____

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE [signature] 7/23/82

TRANSPORTER #2 SIGNATURE & DATE (If required) _____

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

TSDF SIGNATURE [signature] DATE 7/23/82

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To 126 E T-63 6 RM 7.23.82

TSDF COPY

002687

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NUMBER

Area Sanitary Service — NAME OF CARRIER (SCAC)

SHIPPER NUMBER #3 #127 — CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND 005176326	Morton Intl. Div. PO Box 655 Monticello IN 47960 219 253 6611	10-19-82
TRANSPORTER # 1	IHT 190011700	Area Sanitary Service 503 S. Main Monticello 219-583-8990	10-19-82
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016340265	American Chemical Service Gary IN 46315	10-19-82
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)
29	X	F005	Waste Solvents	1993			15956M	1665		

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

David Wininger 10/19/82
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.
Mike Sanborn 10/19/82
TRANSPORTER #1 SIGNATURE & DATE — TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal:
_____ 10/19/82
TSDF SIGNATURE DATE

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TSDF COPY To IBF T-63 61-M 10.19.82

002688

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 43332

002689

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: CHEMCENTRAL/Milwaukee
2. EPA IDENTIFICATION NO.: W1D000713669
3. COMMENTS/SPECIAL INSTRUCTIONS: Normal procedure for flammable liquid spill
4. P.O. BOX OR STREET ADDRESS: P.O. Box 66 2400 So. 170th Street
5. CITY, STATE, ZIP CODE: New Berlin, WI 53151
6. TELEPHONE NUMBER: (414) 784-2400

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)
Transport	2500	Line Flush Solvent	Flammable liquid nos	1993	1. Solid 3. Mixture 2. Liquid [2]	F003	20,000
					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 of the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): H.J. Hansen
17. DATE SHIPPED (M D Y): 2/19/82

TRANSPORTER SECTION

18. COMPANY NAME: CHEMCENTRAL/Milwaukee
19. EPA IDENTIFICATION NO.: W1D000713669
20. P.O. BOX OR STREET ADDRESS: P.O. Box 66, 2400 So. 170th St.
21. CITY, STATE, ZIP CODE: New Berlin, WI 53151
22. TELEPHONE NUMBER: (414) 784-2400
23. COMMENTS: Wisconsin License No. 11035

I hereby certify that the above named materials and indicated quantity(ies) has (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] P.P.
26. Date Accepted (M D Y): 2/19/82

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 1
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: ( )
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): 02/19/82

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 R T-50 GRM 2/19/82

HAZARDOUS WASTE MANIFEST

MEMORANDUM

This 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: 009

TO: T/S/D/F: AMERICAN CHEM SERVICE INC	FROM: Generator: CHEMCRAFT INC
E.P.A. ID Code No.: IND 016360265	E.P.A. ID Code No.: INDINT190010106
Address: PO BOX 190 SITE #91803902	Address: 54432 ADAMS ST
Destination: GRIFFITH IN 46319	Origin: ELKHART IN 46514
Phone: 219-924-4370	Phone: 219-264-3121

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or, Exemption No.)
2 DRUMS	FLAM LIQUID NOS. (PAINT THINNER)	FLAMMABLE		F005	13,500	YES
VV						

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) Date

FREIGHT CHARGES: PREPAID [X] COLLECT [ ]

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

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

EMERGENCY RESPONSE INFORMATION

CONTACT Name R ROMBERGER
Phone 219-264-3121
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

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

Generator Signature _____ Date _____

TRANSPORTER #1 ~~LANDGREBE MOTOR TRANSIT~~ E.P.A. ID No. ~~IND 009842824~~
Address ~~ST RD 130~~
City VALPARAISO State IN Zip 46383 Phone 219-462-4181

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

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

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

TREATMENT/STORAGE/DISPOSAL/FACILITY

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

T/S/D/F COPY

To 109F T-63
EKM 6.17.82
002690

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 N

010

TO: T/S/D/F	AMERICAN CHEM SERVICE INC
E.P.A. ID Code No.	IND 016360265
Address	PO BOX 130 SITE # 91306902
Destination	GRIFFITH IN 46319
Phone	219/924-4370
FROM: Generator	CHEMCRAFT INC
E.P.A. ID Code No.	INDINT 190010109
Address	54432 ADAMS ST
Origin	ELKHART IN 46514
Phone	219/264-3121

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.)
13 DRUMS	FLAM LIQUID NOS (PAINT THINNER)	FLAMMABLE		F005	5000	YZS

HAZARDOUS WASTE

HAZARDOUS WASTE

PLACARDS REQUIRED

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

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

(Signature of Consignor)

FREIGHT CHARGES PREPAID ☑ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D/F ____

E.P.A. ID Code No. ____

Address ____

Destination ____

EMERGENCY RESPONSE INFORMATION

CONTACT Name RAY ROMBERGER

Phone 219/264-3121

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

CERTIFICATION

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

Generator Signature ____ Date ____

TRANSPORTER #1 LAKECREEK MOTOR TRANSIT E.P.A. ID No. IND 009842824

Address ST RD 130

City VALPARAISO State IN Zip 46383 Phone 219/462-4181

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature ____ Date 6-15 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/F Signature ____ Date 6/15/82

T/S/D/F COPY TO 09 R T-63 CRM 6.21.82

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: T/S/D/F	American Chem. Service, Inc.	FROM: Generator	Chemcraft, Inc.
E.P.A. ID Code No.	Ind 016360265	E.P.A. ID Code No.	Ind 048996359
Address	P. O. Box 190	Address	1520 Adams St.
Destination	Griffith, In 46319	Origin	Elkhart, In 46514
Phone	219-924-4370	Phone	219-264-3121

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.)
20	Flam. Liquid Nos. (paint thinner)			F005		Yes

PLACARDS REQUIRED

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

$_____ Per _____

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

(Signature of Consignor)

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

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

EMERGENCY RESPONSE INFORMATION

CONTACT Name R. Bomberger
Phone 219-264-3121
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

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

Generator Signature _____ Date _____

TRANSPORTER #1 ~~Stand Trucking~~ E.P.A. ID No. ILT 000646810
Address ~~13642 S. Kenton Ave~~
City ~~Crestwood~~ State Ill Zip 60445 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 TRAILER SPOTTED 7/15/81 - TO 109R T-63 7/16/81 JFM.

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

T/S/D/F Signature _____ Date _____

T/S/D/F COPY

002692

HAZARDOUS WASTE

HAZARDOUS WASTE

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0542383

Authorization Number 9 9 6 5 3 6

Cheshire/A Xerox Company	404 Washington Blvd.	312-949-2000	0971150013
(Company Name)	Address	Phone Number	Generator Number

Mundelein	Illinois	60060	
City	State	Zip	EPA Number

WASTE HAULER(S)

Land Grebe Motor	State Rt 130 W		S.W.H. Registration Number
Hauler Name	Hauler Address		
	Valparaiso IN 46383	219-462-4181	0 0 9 8 4 2 8 2 4
		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	42 South Colfax Ave.		9 1 8 0 8 9 0 2
(Facility Name)	Address		Site Number
Griffith	Indiana	46319	3127683400 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: Used Lacquer Thinner WASTE PHASE: liquid (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN1993	F005
55 Gal. Drum	flammable	UN or NA Number	EPA HW Number

WEIGHT FOR D.O.T. USE 1760 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 220 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 4 Number) XXXXXXX XXXXXXX XXXXXXXXX

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Ray Germain (Authorized Signature) DATE: 10-1-82

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) David A. Sexton (Authorized Signature) DATE: 10/2/1

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

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

J Dunfee (Authorized Signature) DATE: 10/4/82

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 126R T-636RM 10.4.82

002693

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

0566704

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 9 9 7 6 3 5

CHRONOMATIC DIVISION
ILLINOIS TOOL WORKS INC. (Company Name) | 4126 N. NASHVILLE (Address) | 312-545-3533 (Phone Number) | 0 3 1 6 0 0 0 4 3 0 G (Generator Number)

CHICAGO (City) | ILLINOIS (State) | 60634 (Zip) | EPA Number

WASTE HAULER(S)

LANDGREBE TRUCKING (Hauler Name) | VALPARAISO IND 46353 (Hauler Address) | ICC 2980 S.W.H. Registration Number

8 42-3121 (Phone Number) | I N D 009842824 (EPA Number)

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

135521 (Phone Number) | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

MERICAN 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) | 312-768-3400 (Phone Number) | IN D 0 1 6 3 6 0 2 6 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

COMPLETED BY GENERATOR

WASTE NAME: WSTE STRIPPER T630 WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION: WASTE STRIPPER

HAZARD CLASS: TOXIC-CORROSIVE

UN 1 5 9 3 (UN or NA Number) | F 0 0 1 (EPA HW Number)

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

METHOD OF SHIPMENT (Circle One) (DRUMS) X 2 (Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Mary M Johnson (Authorized Signature) MARY M. JOHNSON DATE: 1-25-82

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) Landgrebe Mtr. (2) (Authorized Signature) DATE: 1/26/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

Frank James Price (Authorized Signature) DATE: 1/27/82

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 204 K T-50 GPM 1/27/82

002694

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0434268

Authorization Number 997765

J.I. Case Mfg. (Company Name) | 2300 Wisconsin (Address) | 3129696100 (Phone Number) | 0430300008 (Generator Number)

Downers Grove (City) | Ill. (State) | 60515 (Zip) | ILD005130000 (EPA Number)

WASTE HAULER(S)

Technical Petroleum (Hauler Name) | 6233 W Pulaski Chicago, Ill. 60646 (Hauler Address) | S.W.H. Registration Number 0625002

3124635200 (Phone Number) | ILD005441696 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax (Address) | 9180902 (Site Number)

Griffith (City) | Ind. (State) | 46319 (Zip) | 2199244390 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

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

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

SHIPPING DESCRIPTION: Solvents NOS | HAZARD CLASS: flammable liquids | UN or NA Number: UN1993 | EPA HW Number: F003

WEIGHT FOR D.O.T. USE: 2000 LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 220 (1 GALLONS (Circle One) / 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One) (DRUMS 4 Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) DATE: 1-13-82

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) Julian (Technical Petroleum) (Authorized Signature) DATE: 1/13/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 1/14/82

COMMENTS OR SPECIAL INSTRUCTIONS:

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

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 1/14/82 GRM
To 124R T-636KM 1/18/82

002695

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0434270

Authorization Number 997745

J L Clark Mfg (Company Name) 2300 Wisconsin (Address) 3129696100 (Phone Number) 0430300008 (Generator Number)

Downers Grove (City) Ill. (State) 60515 (Zip) ILD005130000 (EPA Number)

WASTE HAULER(S)

Technical Petroleum (Hauler Name) 6233 N. Pulaski (Hauler Address) Chicago, Ill 60646 S.W.H. Registration Number 0625002

3124635200 (Phone Number) ILD005441696 (EPA Number)

Hauler Name _____ Hauler Address _____ S.W.H. Registration Number _____

Phone Number _____ EPA Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) 420 S. Coefax (Address) 91808902 (Site Number)

Griffith (City) Ind. (State) 46319 (Zip) 2199244370 (Phone Number) IND016360265 (EPA Number)

Alternate (Facility Name) _____ Address _____ Site Number _____

City _____ State _____ Zip _____ Phone Number _____ EPA Number _____

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents WASTE PHASE: Liquids (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Solvents NOS HAZARD CLASS: flammable Liquids UN1993 (UN or NA Number) F003 (EPA HW Number)

WEIGHT FOR D.O.T. USE 2000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 220 (1) GALLONS (Circle One) (2) CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 4 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Jack Hynes (Authorized Signature) DATE: 4-23-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Technical D. Smith (4) (Authorized Signature) DATE: 4/23/82

(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:

[signature] (Authorized Signature) DATE: 4/23/82

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 Ondock 4.23.82 GRM
To 124 K T-63 GRM 4.26.82

002696

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0434267

Authorization Number 997765

J. L. Clark Mfg. (Company Name) 2300 Wisconsin (Address) 3129696100 (Phone Number) 0430300008 (Generator Number)

Downers Grove (City) Ill. (State) 60515 (Zip) ILD005130000 (EPA Number)

WASTE HAULER(S)

Technical Petroleum (Hauler Name) 4233 N. Pulaski Chicago Ill 60646 (Hauler Address) S.W.H. Registration Number 0625002

3124635200 (Phone Number) ILD005441696 (EPA Number)

Hauler Name _____ Hauler Address _____ S.W.H. Registration Number _____

Phone Number _____ EPA Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) 420 S. Colfax (Address) 9180890 2 (Site Number)

Griffith (City) Ind. (State) 46319 (Zip) 2199244370 (Phone Number) IND016360265 (EPA Number)

Alternate (Facility Name) _____ Address _____ Site Number _____

City _____ State _____ Zip _____ Phone Number _____ EPA Number _____

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Point Solvents WASTE PHASE: Liquids (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Solvents NOS. HAZARD CLASS. Flammable Liquids UN1993 (UN or NA Number) F003 (EPA HW Number)

WEIGHT FOR D.O.T. USE 3000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 330 GALLONS (Circle One) CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 6 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Jon Hynes (Authorized Signature) DATE: 6-15-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 6/15/82

(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

Frank Price (Authorized Signature) DATE: 6/15/82

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 6.15.82
To 126 TC T-63 GRM 6.18.82

002647

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

0657706 (1–7)

Authorization Number ____ (8–13)

J.S. Clark Mfg. Co. (Company Name) | 2300 Wisconsin (Address) | 3129696100 (Phone Number) | 04303000008 G (14–24 Generator Number)

Downers Grove (City) | Ill. (State) | 60515 (Zip) | ILD005130000 (EPA Number)

WASTE HAULER(S)

4233 N Pulaski

Technical Petroleum (Hauler Name) | Chicago, Ill. 60646 (Hauler Address) | S.W.H. Registration Number 0625002 (25–31)

3124635200 (Phone Number) | ILD005441696 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax (Address) | 91808902 (39–46 Site Number)

Griffith (City) | Ind. (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: Point 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
Solvents NOS	Flammable Liquid	UN 1993	F003

WEIGHT FOR D.O.T. USE: 2,500 (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) 275 (1) GALLONS (Circle One) (2) CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 5 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Jack Hynes (Authorized Signature) DATE: 9-13-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) ____ (Authorized Signature) DATE: 9 13 82 (54–59)

(2) ____ (Authorized Signature) DATE: ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Frank Price (Authorized Signature) DATE: 9/14/82 (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. # 4

SITE COPY - PART 3

To 126 K T-63 6PM 9.14.82

002698

IL5327610
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

0657708 (1–7)

Authorization Number ____ (8–13)

J.L. CLARK MFG. | 2300 WISCONSIN | 3129696100 | 0430300008 G (14–24)
(Company Name) | Address | Phone Number | Generator Number

DOWNERS GROVE | IL. | 60515 | IL D005130000
City | State | Zip | EPA Number

WASTE HAULER(S)

CHICAGO, ILL - 60646

TECHNICAL PETROLEUM - 6233N PULASKI RD. | S.W.H. Registration Number 0625001 (25–31)
Hauler Name | Hauler Address

3124635200 | IL D005441696
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 | 91808902 (39–46)
(Facility Name) | Address | Site Number

GRIFFITH | IND. | 463192199244370 | IND016360265
City | State | Zip | Phone Number | EPA Number

Alternate (Facility Name) | Address | (39–46) Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:		
SOLVENTS NOS	FALAMMABLE LIQUID	UN1993 (UN or NA Number)	F003 (EPA HW Number)

WEIGHT FOR D.O.T. USE 2000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 220 (47–52) GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 4 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Jack Hynes (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) David J. Domino (Authorized Signature) DATE: 11/29/82 (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:

Frank Price (Authorized Signature) DATE: 12/6/82 (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. # 4

SITE COPY - PART 3

On dock 12.6.82 To 124E T-63 CAM 12882

002649

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0181496
1 7

WASTE GENERATOR

Authorization Number 991665 (8–13)

Clear Lam Packaging (Company Name) — 1250 Greenleaf Ave (Address)

Elk Grove Village (City) — Il (State) — 60007 (Zip)

0134400040 G (14–24) Generator Number

IL 0048950216

ILT000646810

WASTE HAULER(S)

(1) STRAND TRUCKING (Hauler Name) — 13642 KENTON (Hauler Address) — S.W.H. Registration Number 0024002 (25–31)

(2) _____ (Hauler Name) _____ (Hauler Address) — S.W.H. Registration Number _____ (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) — 520 N COLFAX (Address) — 91808902 (39–46) Site Number

GRIFFITH (City) — IND (State) — _____ (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Solvent NOS

HAZARD CLASS: Flamable

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2-16-82 — Darrell J Wolfe (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2655 (47–52) — 1 GALLONS, 2 CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) 59 DRUMS — TANK TRUCK — OPEN TRUCK — OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Thomas Strand (Authorized Signature) — DATE 02/16/82 (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:

Michael E Bwg (Authorized Signature) — DATE 2/16/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

SITE COPY - PART 3

On dock 2/16/82 To 1[illegible]K T-63 GRN 2/23/82

002700

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0181497

439-8570

Authorization Number 991665

WASTE GENERATOR

Clear Lam Packaging (Company Name) 1250 Greenleaf Ave (Address)

Elk Grove Village (City) Il (State) 60007 (Zip)

0134400040 G (Generator Number)

IL 8048950216

WASTE HAULER(S)

ILT000640810

(1) Strand Trucking (Hauler Name) 18642 Kenton (Hauler Address) S.W.H. Registration Number 0024002

(2) _____ (Hauler Name) _____ (Hauler Address) S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) 520 N Colfax (Address) 91808902 (Site Number)

Griffith (City) IND. (State) _____ (Zip) IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Ink Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Solvent NOS

UN. 1993

HAZARD CLASS: Flamable

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-1-82 D Wolfe (Authorized Signature)

WASTE HAULER*

48 QUANTITY OF WASTE RECEIVED: 2640 (47–52) 1 GALLONS 2 CU. YDS. (Circle One) 53

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) L. Lubell (Authorized Signature) DATE: 4/1/82 (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:

Michael O Burger (Authorized Signature) DATE: 4/1/82 (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

On dock 4.1.82 GRM
To 112 RT-63 GRM 4.2.82

002701

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0070791

WASTE GENERATOR 3124395570 Authorization Number 991665

Clear Lam Packaging (Company Name) | 1250 Greenleaf Ave (Address) | 0134400040 G (Generator Number)

Elk Grove Village (City) | IL (State) | 60007 (Zip) | IL 10048950216

WASTE HAULER(S) 3123858440 ILT 000646810

(1) Strand Trucking (Hauler Name) | 13642 Kenton (Hauler Address) | S.W.H. Registration Number

(2) American Chem (Hauler Name) | Colfax Dr. Griffith, Ind. (Hauler Address) | S.W.H. Registration Number 0024001

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE 3127683400

American Chem. (Facility Name) | Colfax Ave (Address) | 91800902 (Site Number)

Griffith (City) | Ind. (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent. F003 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: Solvent NOS

HAZARD CLASS: Flammable 1063

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-18-82 Darrell J Wolfe (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 002475 (47–52) 1 GALLONS 2 CU. YDS. (Circle One) (53)

METHOD OF SHIPMENT (Circle One) 45 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: 5/17/82 (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: 5/19/82 (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

SITE COPY - PART 3

On dock 5·18·82 GRM
T0112E T-63. GRM 5·19·82

002702

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0070792 (1–7)

Authorization Number 991665 (8–13)

Clear Lam Packaging (Company Name) | 1250 Greenleaf (Address)
Elk Grove Village (City) | IL (State) | 60007 (Zip)

0134400040 G (14–24 Generator Number)
IL 0048950216

WASTE HAULER(S)

(1) Strand Trucking (Hauler Name) | 13642 Kinton (Hauler Address)
S.W.H. Registration Number ILT 0064810 (25–31)

(2) _____ (Hauler Name) | 355-8440 (Hauler Address) 312-355-3745
S.W.H. Registration Number 0024001 (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

IND 016360265

American Chemical (Facility Name) | 5207 W. Colfax (Address)
9180890 2 (39–46 Site Number)
Griffith (City) | Ind. (State) | 46319 (Zip)
312-968-3400

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: Solvent NOS
UN 1993
HAZARD CLASS: Flamable
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: 6-28-82
Darell Grubb (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 00[redacted]93 (47–52) (1 GALLONS / 2 CU. YDS.) (Circle One) (53)

METHOD OF SHIPMENT (Circle One) 49 DRUMS | TANK TRUCK | OPEN TRUCK | OTHER Van (Specify) 02,050LBS

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Jim Ballen (Authorized Signature) DATE: 6/28/82 (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:

Michael O. Bulge (Authorized Signature) DATE: 6/28/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

TO 112 RT-63 6PM 6-28-82

002703

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0070793

Authorization Number ~~991665~~

WASTE GENERATOR

Clear Lam Packaging (Company Name) — 1250 Greenleaf Ave (Address)
Elk Grove Village (City) — Il (State) — 60007 (Zip)

013 4400040 G (Generator Number)
IL 0048950216

WASTE HAULER(S)

(1) Straid Trucking (Hauler Name) — 18642 Kenton (Hauler Address) — S.W.H. Registration Number 0024001
385-8440 — ILT 000646810

(2) _____ (Hauler Name) — _____ (Hauler Address) — S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) — 520 N Colfax (Address) — 768-3400 — 918 089 02 (Site Number)
Griffith (City) — Ind. (State) — _____ (Zip) — IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Solvent NOS — F003

HAZARD CLASS: Flamable — UH 1993

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-3-82 — Darrell J Wolfe (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 002255 (47–52) — 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) — 41 DRUMS — TANK TRUCK — OPEN TRUCK — OTHER VAN (Specify) 18,450 LBS.

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Jim Batt (Authorized Signature) — DATE 8/3/82 (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:

Michael D Burg (Authorized Signature) — DATE: 8 3 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

On dock 8 3 82 To 122E T-63 GPM 8.4.82

002704

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0070794
1 7

Authorization Number ~~991665~~ 8 13

WASTE GENERATOR

Clear Lam Packaging (Company Name) 1250 Greenleaf (Address) 439-8570

Elk Grove Village (City) Il (State) 60007 (Zip)

0134400040 G
Generator Number IL0048950216 24

WASTE HAULER(S)

IL1000646810

(1) Strand Trucking (Hauler Name) 13642 Kelton (Hauler Address) S.W.H. Registration Number 0024002 25 31

312-385-8440

(2) _____ (Hauler Name) _____ (Hauler Address) S.W.H. Registration Number _____ 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) 520 N. Colfax (Address) 3127683400 9180890 2 39 Site Number 46

Griffith (City) Ind (State) _____ (Zip)

IND016360765

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Solvent NOS

UN # 1993

EPA HW. F003

HAZARD CLASS: Flamble

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9-16-82

Darrell J Wolfe (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3025 47 52

1 GALLONS (Circle One)
2 CU. YDS. _____ 53

METHOD OF SHIPMENT (Circle One) 55 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: 9/16/82 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:

Michael J Burg (Authorized Signature) DATE: 9/16/82 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

TO 122 K T-63 GRM 9.16.82

002705

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0070795

WASTE GENERATOR

Authorization Number 991665

Clean Lam Packaging (Company Name) | 1250 Greenleaf Ave (Address)

Elk Grove Village (City) | Il (State) | 60007 (Zip)

03144000404 (Generator Number)

IL0048950216

WASTE HAULER(S)

IL T0006468 10

(1) Strand Trucking (Hauler Name) | 13642 Kenton (Hauler Address) | 312-385-8440

S.W.H. Registration Number 0024004

(2) _____ (Hauler Name) | _____ (Hauler Address)

S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 530 N. Clifford (Address) | 312-768-3400

Griffith (City) | Ind. (State) | (Zip)

91808902 (Site Number)

SAH0074001

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: Solvent NOS

HAZARD CLASS: Flamable

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-22-82

Daniel J. Wolfe (Authorized Signature)

X F003

X 1993

WASTE HAULER* W 24.001 lbs

QUANTITY OF WASTE RECEIVED: 002640 (1 GALLONS, 2 CU. YDS.) (Circle One)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER VAH (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Stan Strand (Authorized Signature) DATE: 10/22/82

(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: 10/22/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

To 122 KT-636 KM 10-22-82

002706

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

00707
1

Authorization Number [redacted]
8 13

CLEARING INDUSTRIES | 1250 CENTRAL AVE
(Company Name) | Address

ELK GROVE VILLAGE | ILLINOIS | 60007 | 312-439-8570
City | State | Zip

ILD 984 000 446
14 Generator Number 24

WASTE HAULER(S) 312-385-3890

(1) STRAND TRUCKING | 13742 KENTON
Hauler Name | Hauler Address

CRESTWOOD, IL
312-385-8440

S.W.H. Registration Number 0024002
25 31

(2) _____ | _____
Hauler Name | Hauler Address

S.W.H. Registration Number _____
32 38

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE 312-7653400

AMERICAN CHEMICAL | 520 N COLMAX
(Facility Name) | Address

41508902
39 Site Number 46

GRIFFITH | IND | _____
City | State | Zip

IND 001636765

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: Solvent NOS UN 1993 F003

HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-1-82 | James Cuney
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 45 2475 (1) GALLONS (2) CU. YDS. (Circle One)
47 52 53

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] DATE: 12/1/82
(Authorized Signature) 54 59

(2) _____ DATE: ___/___/___
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Michael E Burge DATE 12/1/82
(Authorized Signature) 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

On dock 12.1.82 To 122 E T-63 QAM 12.2.82

002707

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: 4870

TO:	FROM:
T/S/D FACILITY AMERICAN CHEMICAL SERVICE	Generator CLASSIC ENTERPRISES
E.P.A. ID Code No. INDO-16360265	E.P.A. ID Code No. EXEMPT
Address 420 S. Colfax	Address 318 Racquet Drive
Destination Griffith, Indiana 46319	Origin Fort Wayne, Ind. 46825
Phone 219-924-4370	Phone 219-484-9061

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	WASTE MINERAL SPIRITS &	COMBUSTIBLE	1255	F003		
	INK SLUDGE					

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 10/4/82

TRANSPORTER #1 THOMAS SOLVENT COMPANY E.P.A. ID No. MIDO-3993902
Address 5605 Planeview Drive
City Fort Wayne, State IN Zip 46825 Phone 219-483-9636

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date 10/4/82

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 _____

T/S/D F COPY To 204 IL T-50 10/4/82 00274

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: 0103

TO:		FROM:	
T/S/D FACILITY	AMERICAN CHEMICAL	Generator	CLASSIC ENTERPRISES
E.P.A. ID Code No.	INDO-16260265	E.P.A. ID Code No.	EXEMPT
Address	420 S. Colfax	Address	318 Racquet Drive
Destination	Griffith Ind. 46319	Origin	Fort Wayne, Ind. 46825
Phone	219-924-4370	Phone	219-484-9061

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]	WASTE MINERAL SPIRITS &	COMBUSTIBLE	1255	F003	110 gal	
	INK SLUDGE					

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

HAZARDOUS WASTE

HAZARDOUS WASTE

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature [signature] 7-9-82 Date _____

TRANSPORTER #1 THOMAS SOLVENT COMPANY E.P.A. ID No. MIDO-3993902
Address 5605 Planeview Drive
City Fort Wayne State IN Zip 46825 Phone 219-483-9638

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 210RT-60 T/S/D F COPY
GRM 7.14.82

002709

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: 0105

TO:		FROM:	
T/S/D FACILITY	AMERICAN CHEMICAL	Generator	CLASSIC ENTERPRISES
E.P.A. ID Code No.	INDO-16360265	E.P.A. ID Code No.	EXEMPT
Address	420 S. Colfax	Address	318 Racquet Drive
Destination	Griffith Ind. 46319	Origin	Fort Wayne, Ind. 46825
Phone	219-924-4370	Phone	219-484-9061

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	WASTE MINERAL SPIRITS &	COMBUSTIBLE	1255	F003		
	INK SLUDGE					

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature [signature] Date 6-30-82

TRANSPORTER #1 THOMAS SOLVENT COMPANY E.P.A. ID No. MID 3993902
Address 5605 Planeview Drive
City Fort Wayne State IN Zip 46825 Phone 219-483-9639

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State ____ Zip ____ Phone ____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature [signature] Date 7-14-82

To 210 RT-50
EPM 7-14-82

T/S/D F COPY

002710

HAZARDOUS WASTE

HAZARDOUS WASTE

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0565116

Authorization Number 992325

ANTON CLEMETSEN (Company Name) 4350 N. KNOX (Address) PE-6-8700 (Phone Number) 0316000813 (Generator Number)

CHICAGO (City) ILL. (State) (Zip) (EPA Number)

WASTE HAULER(S)

LANDGREDE (Hauler Name) MOTOR TRANSPORT - VALPARAISO IND (Hauler Address) S.W.H. Registration Number LCC 2950

ST Rd 130 WEST 219 B 4624181 (Phone Number) IND009542524 (EPA Number)

(Hauler Name) (Hauler Address) S.W.H. Registration Number

(Phone Number) (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SER. (Facility Name) 420 S. COLFAX AVE. (Address) 91808902 (Site Number)

GRIFFITH (City) IND. (State) 46319 (Zip) 768-3400 (Phone Number) IND 016360265 (EPA Number)

(Alternate (Facility Name)) (Address) (Site Number)

(City) (State) (Zip) (Phone Number) (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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: FLAMEABLE LIQUID HAZARD CLASS: NOS 1993 1993 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 1638 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 220 GALS (1. GALLONS (Circle One) 2. CU. YDS.)

METHOD OF SHIPMENT (Circle One) (DRUMS 4 Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Robert Krzyzak (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) [signature] (Authorized Signature) DATE: 6/8/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

Frank Price (Authorized Signature) DATE: 6/9/82

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 6.9.82 TO 125 RT. 63 GRM 6.10.82

002711

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0333637 (1–7)

Authorization Number 9 9 7 1 5 3 (8–13)

Commercial Coatings Corp. (Company Name) | 9234 West Chestnut Street (Address)

Franklin Park (City) | Illinois (State) | 60131 (Zip)

0 3 1 0 9 6 0 0 2 7 G (14–24) Generator Number

FED.# ILD005142286

WASTE HAULER(S)

American Chemical Service (Hauler Name) | Griffith, Indiana (Hauler Address)

S.W.H. Registration Number 0 0 2 4 0 0 2 (25–31)

Strand Trucking (Hauler Name) | Crestwood, Illinois (Hauler Address)

S.W.H. Registration Number FED.# ILT000646810 (38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 So. Colfax Avenue (Address)

9 1 8 0 8 9 0 2 (39–46) Site Number

Griffith (City) | Indiana (State) | 46310 (Zip)

FED.# IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvent

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:
Waste Paint Solvent	Flammable Liquid

WEIGHT FOR D.O.T. USE 8100 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 0 9 9 0 (47–52)

0 GALLONS (Circle One)
2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) 18 (DRUMS) TANK TRUCK OPEN TRUCK (OTHER) (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-30-82

Harry Feiger (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 / 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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 3 30 / 82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

On dock 3.30.82
To 123KT-63 GRM 4.1.82

SITE COPY - PART 3

00272

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

0659337
Authorization Number ~~997153~~

Commercial Coatings Corp. | 9234 W.Chestnut | 3 1 2 455 7715 | 0 3 1 0 9 6 0 0 2 7 G
(Company Name) | Address | Phone Number | Generator Number

Franklin Park | Illinois | 60131 | I L D 0 0 5 1 4 2 2 8 6
City | State | Zip | EPA Number

WASTE HAULER(S)

American Chemical Serv. Griffith, Ind. | S.W.H. Registration Number 0 0 2 4 0 0 1
Hauler Name | Hauler Address

2 1 9 244 4370 | I L T 000646810
Phone Number | EPA Number

Strand Trucking | Crestwood, Ill. | S.W.H. Registration Number
Hauler Name | Hauler Address

312 385 8440
Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. | 420 So. Colfax Ave. | 9 1 8 0 8 9 0 2
(Facility Name) | Address | Site Number

Griffith | Indiana | 46310 | 219 244 4370 | I N D 0 1 6 3 6 0 2
City | State | Zip | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvent | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Paint Solvent | HAZARD CLASS: Flammable Liquid | UN 1993 (UN or NA Number) | F 0 0 3 (EPA HW Number)

WEIGHT FOR D.O.T. USE: 4,000 ~~LBS~~ TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 0 8 2 5 | 0 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 15 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 Harry Feiger (Authorized Signature) DATE: 7-9-82

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) L. Lindell (Authorized Signature) DATE: 07/09/82

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

M. Dan Duggan (Authorized Signature) DATE: 7/9/82

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 KT-63 GRM 7.9.82

002713

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

0659338

Authorization Number

(Company Name)	Address	Phone Number	Generator Number
Commercial Coatings Corp.	9234 Chestnut	312-455-7715	0 3 1 0 9 6 0 0 2 7 G

City	State	Zip	EPA Number
Franklin Park	Illinois	60131	I L D 0 0 5 1 4 2 2 8 6

WASTE HAULER(S)

Hauler Name	Hauler Address	Phone Number	S.W.H. Registration Number / EPA Number
American Chemical Serv.	Griffith, Ind.	219 244 4370	0 0 2 4 0 0 1 / I L T 000646810
Strand Trucking	Crestwood, Ill.	312-385-8440	

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number
American Chemical Serv.	420 So. Colfax Ave.	9 1 8 0 8 9 0 2

City	State	Zip	Phone Number	EPA Number
Griffith	Indiana	46310	219-244-4370	I N D 0 1 6 3 6 0265

Alternate (Facility Name)	Address	Site Number

City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvent WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Paint Solvent Flammable Liquid HAZARD CLASS: UN 1993 (UN or NA Number) F003 (EPA HW Number)

WEIGHT FOR D.O.T. USE 7,000 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 0 9 3 5 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 17 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) Van

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Harry Ferger (Authorized Signature) DATE: 10-13-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) R. Lurkwell (Authorized Signature) DATE: 10/13/82

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael O'Brien (Authorized Signature) DATE: 10/13/82

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

TO 124 KT-63 GKM 10.13.82

002714

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0520194 (1–7)

Authorization Number 998718 (8–13)

CONTAINER CORP. OF AMERICA (Company Name)	400 EAST NORTH AVE (Address)	3122606607 (Phone Number)	0430200002 G (14 Generator Number 24)
CAROL STREAM (City)	ILL. (State)	60187 (Zip)	ILD005230420 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name)	201 W. 151ST ST. S. HOLAND ILL (Hauler Address)	S.W.H. Registration Number 007900 (25–31)
	3125963377 (Phone Number)	ILD069506160 (EPA Number)
(Hauler Name)	(Hauler Address)	S.W.H. Registration Number (32–38)
	(Phone Number)	(EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name)	420 S. COLFAX (Address)	91808902 (39 Site Number 46)
GRIFFITH (City)	IND. (State)	46319 (Zip)
3127683400 (Phone Number)	IND016360265 (EPA Number)	
(Alternate (Facility Name))	(Address)	(39 Site Number 46)
(City)	(State)	(Zip)
(Phone Number)	(EPA Number)	

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT SOLUTION WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:		
METHYL ETHYL KETONE	FLAMMABLE	NA1993 (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 002200 (47–52) GALLONS (Circle One) CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 1-15-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE 01 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: 1 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 204R T-50 6RM 1/15/82

002715

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0520195

Authorization Number 998718

CONTAINER CORP. OF AMERICA (Company Name) | 400 EAST NORTH AVENUE (Address) | 3122606607 (Phone Number) | 0430200002 G (Generator Number)

CAROL STREAM (City) | IL (State) | 60187 (Zip) | ILD005230420 (EPA Number)

WASTE HAULER(S)

LAND GRABE (Hauler Name) | State Rd 130 Valparaiso, Ind (Hauler Address) | S.W.H. Registration Number 1CC2980

3128423121 (Phone Number) | IND009842842 (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) | 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 SOLVENT BLEND WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: METHYL ETHYL KETONE SOL. | HAZARD CLASS: FLAMMABLE | NA 1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 10,000 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 1200 (1) GALLONS (Circle One) (2) CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 22 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) 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: 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) [signature] (Authorized Signature) DATE: 2/16/82

(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

Bob Mauck (Authorized Signature) DATE: 2/17/82

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

Ondock 2/17/82
To 210 R T-50 GRM 2/20/82

002716

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0520199 (1–7)

Authorization Number 998718 (8–13)

TO BE COMPLETED BY WASTE GENERATOR

Container Corp. of America (Company Name)	400 E. North Ave. (Address)	3122606613 (Phone Number)	0430200002 (Generator Number, 14–24)
Carol Stream (City)	Ill (State)	60187 (Zip)	ILD005230420 (EPA Number)

WASTE HAULER(S)

Mr. Frank (Hauler Name)	201 W. 151st. S. Holland, Ill (Hauler Address)	S.W.H. Registration Number 0079001 (25–31)
	3125963377 (Phone Number)	ILD069506160 (EPA Number)
(Hauler Name)	(Hauler Address)	S.W.H. Registration Number (32–38)
	(Phone Number)	(EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name)	420 S. Colfax (Address)	91808902 (Site Number, 39–46)
Griffith (City)	Ind. (State)	46319 (Zip) 3127683400 (Phone Number) IND001636265 (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 Solvent Blend WASTE PHASE: Liquid (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
Methyl Ethyl Ketone Sol.	Flammable	NA 1993	F005

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002500 (47–52) (GALLONS) CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 4-16-82

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: 4/16/82 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

_____ (Authorized Signature) DATE: 4/16/82 (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 E T-50 CRM 4.16.82

002717

IL 532-610
LPC 62 8/83

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0628291

Authorization Number 998718

(Company Name)	Address	Phone Number	Generator Number
Container Corp America	400 E North Avenue	3122606613	0430200002

City	State	Zip	EPA Number
Carol Stream	IL	60187	ILD005230420

WASTE HAULER(S)

Hauler Name	Hauler Address	S.W.H. Registration Number	Phone Number	EPA Number
Land Grabe	State Rd 130 Valparaiso, Ind	1CC2980	3128423121	IND009842842

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	91808902	Griffith	IND	46319	3127683400	IND016360265

Alternate (Facility Name)	Address	Site Number	City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent Blend WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Methyl Ethyl Keytone Sol

HAZARD CLASS: Flammable

UN or NA Number: NA1993

EPA HW Number: F005

WEIGHT FOR D.O.T. USE 4000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 550 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 10 Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 5/18/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 5/10/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 5/11/82

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. # 4

SITE COPY - PART 3 To 204 RT-50 GRM 5.11.82

002718

IL 532-610
LPC 62 8/8

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0628293 (1–7)

Authorization Number ~~[illegible]~~ (8–13)

Container Corp. of America | 401 E. North | 3122606500 | 04302000026 (14–24)
(Company Name) | Address | Phone Number | Generator Number

Carol Stream | Ill. | 60187 | ~~[illegible]~~ ILD005230420
City | State | Zip | EPA Number

WASTE HAULER(S)

Land Grabe | State Rd 130 Valparaiso, Ind | 3128423121 | S.W.H. Registration Number ICC2980 (25–31) | IND009842842
Hauler Name | Hauler Address | 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 | 91808902 (39–46)
(Facility Name) | Address | Site Number

Griffith | Ind | 46319 | 3127683400 | IND016360265
City | State | Zip | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number (39–46)
City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent Blend | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Methyl Ethyl Ketone Solution | HAZARD CLASS: Flammable | NA 1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE: 10,010 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 1430 (47–52) (1) GALLONS (Circle One) (2) CU. YDS. (53)

METHOD OF SHIPMENT (Circle One): / (DRUMS 26 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) 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 x Richard Vaden (Authorized Signature) DATE: 7-15-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Lmt Eckhardt (Authorized Signature) DATE: 7/15/82 (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:

[signature] (Authorized Signature) DATE: 7/16/82 (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 RT-50 ERM 7.16.82

002719

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

0628295
1 7

Authorization Number ____ 8 13

TO BE COMPLETED BY WASTE GENERATOR

Container Corp of America | 400 E. North | 312 260-6500 | 0430200002 (14–24)
(Company Name) | Address | Phone Number | Generator Number

Carol Stream | Il | 60187 | ILD005230420
City | State | Zip | EPA Number

WASTE HAULER(S)

201 W. 155 St.
Mr. Frank | So. Holland Il
Hauler Name | Hauler Address

S.W.H. Registration Number 0029029 (25–31)

3125963377 | ILD069506160
Phone Number | EPA Number

Hauler Name | Hauler Address

S.W.H. Registration Number ____ (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service | 420 S. Colfax | 91808902 (39–46)
(Facility Name) | Address | Site Number

Griffith | Ind. | 46319 | 3127683400 | IND016360265
City | State | Zip | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number (39–46)

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent Blend | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Methyl Ethyl Ketone Solution | HAZARD CLASS: Flammable | NA1993 (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: 002800 (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 R Valla (Authorized Signature) DATE: 9-9-82

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) Ronald Bridgewater (Authorized Signature) DATE: 9 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 WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 9 9 82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: 112

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 210K T-50 GAL 9.9.82

002720

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

Authorization Number 0650704 (1–7) 178748 (8–13)

CONTAINER CORP. OF AMERICA (Company Name) | 400 E North (Address) | 312 260 0500 (Phone Number) | 0430200090 (14–24 Generator Number)

CAROL STREAM (City) | Ill. (State) | 60187 (Zip) | ILD005230420 (EPA Number)

WASTE HAULER(S)

LAND GRABE (Hauler Name) | STATE RD 130 (Hauler Address) | VALPARESO. IND (Phone Number 3128423121) | S.W.H. Registration Number ILL2980 (25–31) | EPA Number IND004842842

[redacted] (Hauler Name) | (Hauler Address) | (Phone Number) | S.W.H. Registration Number (32–38) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX (Address) | 91808902 (39–46 Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | 312 768 3400 (Phone Number) | IND 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39–46 Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent Solution | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENT SOLUTION | HAZARD CLASS: FLAMMABLE | NA 1993 (ID or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 5000 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 550 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 10 Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify) 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: 9/9/82

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) [signature] (Authorized Signature) DATE: 9/13/82 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 9/15/82 (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

On dock 9.15.82 To 204 RT 50 Gail 9.15.82

002721

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

0650700 (1–7)

Authorization Number [redacted] (8–13)

Container Corp of America (Company Name) | 400 E North Ave (Address) | 3122606615 (Phone Number) | 0430200002 G (14–24 Generator Number)

Carol Stream (City) | IL (State) | 60187 (Zip) | ILD005230420 (EPA Number)

WASTE HAULER(S)

Mr Franks Inc (Hauler Name) | 201 W. 151st S. Holland Ill (Hauler Address) | 3123963377 (Phone Number) | Corrected 0079027 (S.W.H. Registration Number 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 Chem Service (Facility Name) | 420 S. Colfax (Address) | 91808902 (39–46 Site Number)

Griffith (City) | Ind. (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | 39 Site Number 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent Solution WASTE PHASE: Liquid (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
MEK Solution	Flammable	NA1993	F005

WEIGHT FOR D.O.T. USE 24,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000 (47–52) 1 (GALLONS) 2 CU. YDS. (Circle One) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION R. Valla (Authorized Signature) DATE: 9-28-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Donald W Burk (Authorized Signature) DATE: 09 28 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 28 82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. #4

SITE COPY - PART 3

To 118K T-63 CRM 9.28.82

002722

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

0628296
1 7

Authorization Number ____ 8 13

1861

Container Corp of America (Company Name) | 4445 North Ave (Address) | 3122606615 (Phone Number) | 04302000022 (Generator Number 14 24)

Carol Stream (City) | Ill (State) | 60187 (Zip) | ILD005230420 (EPA Number)

WASTE HAULER(S)

Land Crafters (Hauler Name) | State Rd 130 Valparaiso Ind 211 (Hauler Address) | S.W.H. Registration Number ILL2980 25 31

3128423121 (Phone Number) | IND009842842 (EPA Number)

____ (Hauler Name) | ____ (Hauler Address) | S.W.H. Registration Number ____ 32 38

____ (Phone Number) | ____ (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Service (Facility Name) | 420 S Colfax (Address) | 7180890 2 39 46 (Site Number)

Griffith (City) | Ind (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

____ (Alternate (Facility Name)) | ____ (Address) | ____ 39 40 (Site Number)

____ (City) | ____ (State) | ____ (Zip) | ____ (Phone Number) | ____ (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Acetone Solution | WASTE PHASE: Liquid (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
Acetone Solution	Flammable	UN1090	F005

WEIGHT FOR D.O.T. USE 9,240 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 1320 47 52 (1 GALLONS (Circle One) 2 CU. YDS.) 53

METHOD OF SHIPMENT (Circle One) (DRUMS 24 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) 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 Richard Vallin (Authorized Signature) DATE: 10-22-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) LTT Philip L Lyons (Authorized Signature) DATE: 10 22 82 54 59

(2) ____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

R Wingler (Authorized Signature) DATE: 10 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. # 4

SITE COPY - PART 3

On dock 10.25.82 TO204RT-60 6KM 10.1.82

002723

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

0650701 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number ____ (8–13)

CONTAINER CORP. OF AMERICA (Company Name)	408 E. NORTH (Address)	3122606500 (Phone Number)	04302000026 (Generator Number)	
CAROL STREAM (City)	ILL. (State)	60187 (Zip)	ILD005230420 (EPA Number)	

WASTE HAULER(S)

MR. FRANKS (Hauler Name)	201 W. 151 ST. SO. HOLLAND ILL (Hauler Address)	S.W.H. Registration Number 0079/027 (25–31)	
		3125963377 (Phone Number)	ILD069506160 (EPA Number)
____ (Hauler Name)	____ (Hauler Address)	S.W.H. Registration Number ____ (32–38)	
		____ (Phone Number)	____ (EPA Number)

DESTINATION — DISPOSAL, STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SER. (Facility Name)	420 S. COLFAX (Address)		91808902 (39–46 Site Number)	
GRIFFITH (City)	IND (State)	46319 (Zip)	3127683400 (Phone Number)	IND016360265 (EPA Number)
____ (Alternate (Facility Name))	____ (Address)		____ (39–46 Site Number)	
____ (City)	____ (State)	____ (Zip)	____ (Phone Number)	____ (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT SOL. WASTE PHASE: LIQ. (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:		
MEK SOLUTION	FLAMMABLE	NA 1993 (UN or NA Number)	F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 21600 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 2700 (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 X [signature] (Authorized Signature) DATE: 11-10-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Ronald Bringewatt (Authorized Signature) DATE: 11/10/82 (54–59)

(2) ____ (Authorized Signature) DATE: ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 11/10/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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 ET-63 GEM 11.10.82

002724

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

0724132 (1–7)

Authorization Number ____ (8–13)

Container Corp. of America | 401 E. North | 3122606500 | 04310200002 G (14–24 Generator Number)
(Company Name) | Address | Phone Number

Carol Stream | Ill. | 60187 | ILD005230420
City | State | Zip | EPA Number

WASTE HAULER(S)

Land Grease | State Rd. 130 Valparaiso, Ind. | 3128423121 | S.W.H. Registration Number Ill 29.80 (25–31) | IND009842842 EPA Number
Hauler Name | Hauler Address | Phone Number

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38) | Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Ser. | 420 S. Colfax | 9180890 2 (39–46 Site Number)
(Facility Name) | Address

Griffith | Ind. | 46319 | 312768-3400 | 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: Waste Solvent Blend | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:		
Methyl Ethyl Ketone Solution	Flammable	NA 1993 (UN or NA Number)	F005 (EPA HW Number)

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: 575 (47–52) GALLONS (Circle One) / 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 11 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) Trailer

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) DATE: 11-23-82

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) LMT Philip Lyons (Authorized Signature) DATE: 11/23/82 (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:

Frank Pilee (Authorized Signature) DATE: 11/24/82 (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

SITE COPY - PART 3

On dock 11.24.82 To 204KT-50 EAM 12.9.82

002725

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

0724134
1 7

Authorization Number ____ 8 13

Container Corp. of America (Company Name) | 400 E. North (Address) | 3122606500 (Phone Number) | 0430200002 G (14 Generator Number 24)

Carol Stream (City) | Ill. (State) | 60187 (Zip) | IL D000523042O (EPA Number)

WASTE HAULER(S)

Mr Franks (Hauler Name) | 201 W. 151 St. So. Holland Ill (Hauler Address) | S.W.H. Registration Number 0079003 (25 31)

312 5963377 (Phone Number) | ILD069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32 38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 S. Colfax (Address) | 91808902 (39 Site Number 46)

Griffith (City) | IND (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | 39 Site Number 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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: MEK Solution HAZARD CLASS: Flammable NA 1993 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 22400 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 2800 (47 52) (1 GALLONS (Circle One) 2 CU. YDS.) 53

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) DATE: 12-15-82

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) C Borucki (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: 12/15/82 (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 211KT-50 GRM 12.15.82

002726

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0072753

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
COOK Ind. Coatings	DRURY BROS.	AMERICAN CHEM SERV INC
Site Address	**Transporters Address**	**Facility Address**
3301 BOURKE DETROIT Mich 48238	11950 E Newburg Rd Durand, Mich 48429	420 E. Colfax GRIFFITH, Ind 46360
Phone Number	**Phone Number**	**Phone Number**
(313) 861-1000	(517) 288 2611	(219) 924 4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MIDO07138746	MIDO56988892	IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	WASTE SOLVENT, NOS	Flam.	UN1993	17		TR		4			005500		F003
2.													
3.													
4.													
5.													
6.													

COMMENTS Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① William Hall — Date Shipped MO. DAY YEAR: 01 20 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, 29.1-3. — Transporter Signature ② Fred Ortiz — Date(s) Received: 01 20 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 T Dunlap — ☒ Accepted ☐ Rejected — Date Received: 1 20 82

Facility Site EPA I.D. Number: IND016360265

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

To 206 K T-50 GRM 1/20/82

TSDF COPY

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0396742

Authorization Number 998158
16008293350 3
0316000398 G
Generator Number

CONVERTERS, INK (Company Name) 4910 S. MONITOR (Address)

City State Zip

WASTE HAULER(S)

MR. FRANK INC (Hauler Name) 201 W. 45th St. (Hauler Address) S.W.H. Registration Number 0079-003
SOUTH HOLLAND, IL. 312-596-3377

Hauler Name Hauler Address S.W.H. Registration Number ILD 069306160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE 3127683400

AMER. CHEM SERV. (Facility Name) 420 S. COLFAX (Address) 91808902 (Site Number)
GRIFFITH (City) IND (State) 46319 (Zip) IND # 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: F003

SHIPPING DESCRIPTION: INK SOLVENTS
HAZARD CLASS: FLAMMABLE NA1993

WEIGHT FOR D.O.T. 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: 6-2-82 Russell Clayton (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) H. Robertson (Authorized Signature) DATE: 06 02 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 6 2 82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

To 210 K T-50 GRM 6-2-82

SITE COPY - PART 3

002728

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0396733

Authorization Number ~~998153~~ 6008293350 8 13

CONVERTERS INK (Company Name) 4940 S. MONITOR (Address)

0316000398 G (Generator Number) 14 24

City State Zip

WASTE HAULER(S)

MR FRANK INC (Hauler Name) 201 W. 155th St (Hauler Address) S.W.H. Registration Number 0079004 25 31

South Holland, Ill 312 763 3377 ILD0 69506160

Hauler Name Hauler Address S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE 312-763-3400

AMER CHEM SERV (Facility Name) 420 S. COLFAX (Address) 91808902 (Site Number) 39 46

GRIFFITH (City) IND (State) 46319 (Zip) IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: F003

SHIPPING DESCRIPTION: INK SOLVENTS HAZARD CLASS: FLAMMABLE NA 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: 003500 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: 9-15-82 Russell Clayton (Authorized Signature) 9/15/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Donald H Bell (Authorized Signature) DATE: 09 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: 9 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 210 KT - 50 GRM 9.15.82 SITE COPY - PART 3

002729

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0396734
1 7

Authorization Number 8 — 13: 60082933508

CONVERTERS INK (Company Name) | 4910 S. MONITOR (Address)
CHICAGO / ILL (City) | (State) | 60638 (Zip)

0316000398 (14 — Generator Number — G 24)

WASTE HAULER(S) 31

MR. FRANK INC. (Hauler Name) | 201 WEST 155TH ST. (Hauler Address)
S.W.H. Registration Number 25 — 31: 0079004
ILD 066506160

SOUTH HOLLAND, ILL. (Hauler Name) | 312-596-3377 (Hauler Address)
S.W.H. Registration Number 32 — 38:

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE 312-768-3400

AMERICAN CHEM. SERV. (Facility Name) | 420 S. COLFAX (Address)
9180890 2 (39 — Site Number — 46)
GRIFFITH, (City) | IND. (State) | 46319 (Zip)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
INK SOLVENTS	FLAMMABLE
	NA 1993

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000 (47 — 52)

1 GALLONS (Circle One) / 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-7-82 — Alfredo de los Monteros (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 12 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: 12 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 211RT-50 GAL M 12.7.82

SITE COPY - PART 3

002730

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0402657

Authorization Number 997022

FID # ILD097182927

CRONAME INC., 1975 CORNELL 312 344-9500 OE 11860018 G
(Company Name) Address Phone Number Generator Number

MELROSE PARK, ILL 60160
City State Zip EPA Number

WASTE HAULER(S)

AMERICAN CHEM. SERV 420 S. COLFAX S.W.H. Registration Number 0024002
Hauler Name Hauler Address

317/768-3400 ILT00646810
Phone Number EPA Number

GRIFFITH, IND. 46319 S.W.H. Registration Number ~~91808902~~
Hauler Name Hauler Address

~~ILT00646810~~
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERV. 420 S. COLFAX AVE 91808902
(Facility Name) Address Site Number

GRIFFITH, IND 46319 317/768-3400 ~~ILT00646810~~
City State Zip Phone Number EPA Number

IND016360265

Alternate (Facility Name) Address Site Number

City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE DIRTY THINNER #1 HAZARD CLASS: UN1993 UN or NA Number F005 EPA HW Number

WEIGHT FOR D.O.T. USE 4840 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. 1

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) DATE: 5-6-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [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 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

Ondock 5-6-82 GRM TO 125 RT-63 GRM 5-6-82

002731

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0588944

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number ~~IL-PE-22~~ FID# ILD097118927

ORNAMIE, INC. (Company Name) | 197 N CORNELL (Address) | 312/344-9500 (Phone Number) | CE 1 1 8 6 0 0 1 8 G (Generator Number)

MELROSE PARK (City) | ILL (State) | 60160 (Zip) | EPA Number

WASTE HAULER(S)

AMERICAN CHEM. SERV. (Hauler Name) | 420 S. COLFAX (Hauler Address) | 312/768-3400 (Phone Number) | S.W.H. Registration Number 0024002 | ILT0064681O (EPA Number)

Hauler Name | GRIFFITH IND 46319 (Hauler Address) | S.W.H. Registration Number | Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERVICE (Facility Name) | 420 S. COLFAX AVE (Address) | 9180902 (Site Number)

GRIFFITH (City) | IND 46319 (State, Zip) | 317/768-3400 | INDO16360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE DIRTY THINNER | HAZARD CLASS: #1 | UN 1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 4500 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 000550 (GALLONS) CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) (DRUMS) 10 (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 John M. Richmond (Authorized Signature) DATE: 12-10-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Jim Ball (Authorized Signature) DATE 12/10/82

(2) (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

Michael O'Berry (Authorized Signature) DATE 12/10/82

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2

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

On dock 12.10.82 GRM

T-125 KT-63 GRM 12.16.82

002732

STRAIGHT BILL OF LADING/HAZARDOUS WASTE MANIFEST

COPY

B TO BE RETAINED BY CONSIGNEE

ILEPA manifest # 0363668

HAZARDOUS WASTE MANIFEST AND SHIPPERS NO. 00468

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

CROWN CORK & SEAL COMPANY, INC.

Per J O'Donnell (Signature of consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading,

On 12/1/82 FROM CROWN CORK & SEAL COMPANY, INC.

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Delivering Carrier Kankakee Industrial Disposal EPA ID. No. 0066013

Carrier Address 1360 Locust St Kankakee IL

Received and Accepted for Transport By (Signature) John H. Marks, Inc. Date 12/1/82

ATTENTION CARRIER: Obtain consignee's signature below - Give Copies A & B to consignee. Retain Copy C for your records.

Consigned To American Chemical Service Inc EPA ID. No. 91808902

Address Railroad & Coal Fax

City Griffith State IN Route

Received and Accepted for Treatment, Storage or Disposal By (Signature) [signature] Title Operator Date 12/1/82

ATTENTION CONSIGNEE: Return original signed Copy A of this document to shipper at address below. Retain Copy B for your records.

PACKAGES

NUMBER	KIND
	55 Gallon Drums
2850	Gallons Bulk
22800	Pounds Bulk

DESCRIPTION OF MATERIAL AND HAZARD CLASSIFICATIONS

Mixed Liquid Chemical Waste which may contain one or more of the following Hazardous Materials.

EPA ID. NO.	MATERIAL	HAZARD CLASS
F005	Spent Non-Halogenated Solvents	Flammable Liquid
F002	Spent Halogenated Solvents	Flammable Liquid
F017	Paint and Coating Residues	Flammable Liquid
	24 M 457	
	PO# 24-491946	

PLACARDS REQUIRED

CROWN CORK & SEAL CO. INC.

EPA ID. No.

Address 1035 E North St City Bradley State IL Phone (815) 933-9351

Shipper, Per (Signature) J O'Donnell Date 12/1/82

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

Form 5009

To 125 KT-63 GRW 12-1-82

B - CONSIGNEE

002733

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

0702184
1 7

Authorization Number 0 0 0 0 0 0
8 13

CROWN CORK & SEAL CO.INC. (Company Name) | 3501 W. 31ST ST. (Address) | 3122548400 (Phone Number) | 0316000194 (Generator Number) G
14 24

CHICAGO (City) | ILLINOIS (State) | 60623 (Zip) | ILD001833326 (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 0079026
25 31

3125963377 (Phone Number) | ILD069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number
32 38

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM.SERV. (Facility Name) | 420 S. COLFAX (Address) | 91808902 (Site Number)
39 46

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number
39 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TANK TRUCK

HAZARD CLASS: [redacted] FLAMMABLE

NA1993 (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 (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 B. J. Gaeling (Authorized Signature) DATE: 12-10-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 12/10/82
54 59

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 12/10/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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 205 RT-50 GRM 12/10/82

002734

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

0702185
1 7

Authorization Number 0 0 0 0 0 0
8 13

CROWN CORK & SEAL CO.INC. (Company Name) | 3501 W. 31ST ST. (Address) | 3122548400 (Phone Number) | 0 31 60 00 19 4 G (Generator Number, 14–24)

CHICAGO (City) | ILLINOIS (State) | 60623 (Zip) | ILD001833326 (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 0-07900 3 (25–31)

3125963377 (Phone Number) | ILD069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM.SERV. (Facility Name) | 420 S. COLFAX (Address) | 9 18 0 8 9 0 2 (39–46 Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39–46 Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TANK TRUCK | HAZARD CLASS: FLAMMABLE | NA1993 (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) | (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 B J Gallagher (Authorized Signature) | DATE: 11-1982

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) _____ (Authorized Signature) | DATE: 11/19/82 (54–59)

(2) _____ (Authorized Signature) | DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) | DATE: 11/1982 (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 R.T-63 6/24/4 11.19.82

002735

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

0635968 (1–7)

Authorization Number 000000 (8–13)

CROWN CORK & SEAL CO INC. | 3501 W. 31ST ST | 3122548400 | 0316000194 (14–24 G)
(Company Name) | Address | Phone Number | Generator Number

CHICAGO | IL | 60623 | ILD001833326
City | State | Zip | EPA Number

WASTE HAULER(S)

MR. FRANK, INC | 201 W 155TH ST. SO. HOLLAND, IL 60473 | S.W.H. Registration Number 007901 (25–31)
Hauler Name | Hauler Address

3125963377 | ILD067506160
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 CHEMSERV | 420 S. COLFAX | 91808902 (39–46 Site Number)
(Facility Name) | Address

GRIFFITH | INDIANA | 46319 | 3127683400 | IND016360265
City | State | Zip | Phone Number | EPA Number

Alternate (Facility Name) | Address | (39–46 Site Number)

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TANK TRUCK | HAZARD CLASS: FLAMMABLE | NA1993 (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: 002,500 (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 B.J. Gallagher (Authorized Signature) DATE: 10/22/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Mike Taylor (Authorized Signature) DATE: 10/22/82 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 10/22/82 (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. 8 4

SITE COPY - PART 3

TO 210 FT-50 GRM 10.22.82

002736

STRAIGHT BILL OF LADING/HAZARDOUS WASTE MANIFEST

COPY B — TO BE RETAINED BY CONSIGNEE

HAZARDOUS WASTE MANIFEST AND SHIPPERS NO. 00448

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

CROWN CORK & SEAL COMPANY, INC.

Per _____ (Signature of consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading,

On 10-28-82 FROM CROWN CORK & SEAL COMPANY, INC.

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Delivering Carrier: MR. FRANKS INC. EPA ID. No. ILD 069-506-160

Carrier Address: 201 W. 155th ST. SOUTH HOLLAND, ILL 60473

Received and Accepted for Transport By (Signature) Robert Perkins Date 10-28-82

ATTENTION CARRIER: Obtain consignee's signature below - Give Copies A & B to consignee. Retain Copy C for your records.

Consigned To: AMERICAN CHEMICAL SERVICES EPA ID. No. IND 016-360-265

Address: 420 COLFAX S.

City: GRIFFITH State: IND. Route:

Received and Accepted for Treatment, Storage or Disposal By (Signature) [signature] Title [illegible] Date 10/29/82

ATTENTION CONSIGNEE: Return original signed Copy A of this document to shipper at address below. Retain Copy B for your records.

PACKAGES NUMBER	PACKAGES KIND	DESCRIPTION OF MATERIAL AND HAZARD CLASSIFICATIONS		
		Mixed Liquid Chemical Waste which may contain one or more of the following Hazardous Materials.		
		EPA ID. NO.	MATERIAL	HAZARD CLASS
	55 Gallon Drums	F005	Spent Non-Halogenated Solvents	Flammable Liquid
5050	Gallons Bulk	F002	Spent Halogenated Solvents	Flammable Liquid
		F017	Paint and Coating Residues	Flammable Liquid
	Pounds Bulk			

PLACARDS REQUIRED FLAMMABLE

CROWN CORK & SEAL CO. INC.

EPA ID. No. MND 050-742-014

Address: 4th ST. & PARK AVE City: FAIRBAULT State: MN Phone (507) 334-3981

Shipper, Per (Signature) [signature] Date 10-28-82

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

Form 5009

B - CONSIGNEE

To 124F T-63 GRM 10.29.82

002737

STRAIGHT BILL OF LADING/HAZARDOUS WASTE MANIFEST

COPY

B TO BE RETAINED BY CONSIGNEE

HAZARDOUS WASTE MANIFEST AND SHIPPERS NO. 00438

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

CROWN CORK & SEAL COMPANY, INC.

Per _____ (Signature of consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading,

On 1-13-81 FROM CROWN CORK & SEAL COMPANY, INC.

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Delivering Carrier MR. FRANKS, INC. TRAILER # 227 EPA ID. No. ILD 069-506-160

Carrier Address 201 W. 155th ST. SOUTH HOLLAND, ILL 60473

Received and Accepted for Transport By (Signature) [signature] Date 1-13-82

ATTENTION CARRIER: Obtain consignee's signature below - Give Copies A & B to consignee. Retain Copy C for your records.

Consigned To AMERICAN CHEMICAL SERVICES EPA ID. No. IND-016-360-265

Address 420 S. COLFAX

City GRIFFITH State IND. Route

Received and Accepted for Treatment, Storage or Disposal By (Signature) [signature] Title [signature] Date 1/14/82

ATTENTION CONSIGNEE: Return original signed Copy A of this document to shipper at address below. Retain Copy B for your records.

DESCRIPTION OF MATERIAL AND HAZARD CLASSIFICATIONS

Mixed Liquid Chemical Waste which may contain one or more of the following Hazardous Materials.

PACKAGES NUMBER	PACKAGES KIND	EPA ID. NO.	MATERIAL	HAZARD CLASS
	55 Gallon Drums	F005	Spent Non-Halogenated Solvents	Flammable Liquid
4726	Gallons Bulk	F002	Spent Halogenated Solvents	Flammable Liquid
	Pounds Bulk	F017	Paint and Coating Residues	Flammable Liquid

PLACARDS REQUIRED FLAMMABLE

CROWN CORK & SEAL CO. INC. (10)

EPA ID. No. MND-050-742-011

Address 4th STREET & PARK AVE. City FARIBAULT, State MN Phone (507) 334-3981

Shipper, Per (Signature) [signature] Date 1-13-82

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

Form 5009

To 211K T-50.61M
1/14/82

B - CONSIGNEE

002738

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0363668

TO BE COMPLETED BY WASTE GENERATOR

CC+S BL# 00468

Authorization Number ~~99 7572~~

ILD0 577 39427

CROWN CORK + SEAL (Company Name) — 1035 EAST NORTH ST (Address)

Kankakee (City) — IL (State) — 60915 (Zip)

0910200004 G (Generator Number)

WASTE HAULER(S)

Kankakee Industrial Disposal (Hauler Name) — 1360 Lucust St Kankakee IL (Hauler Address)

S.W.H. Registration Number 0066013

ILD0 54155080

Hauler Name — Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

IND0 16360265

American Chemical Service (Facility Name) — Railroad + Loaf fax (Address)

91808902 (Site Number)

Griffith (City) — IN (State) — 63139 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Line Wash — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

SOLVENT H.O.S. — 12/1/82

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: — HAZARD CLASS: Flammable Liquid

WEIGHT FOR D.O.T. USE 22800 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002850

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-1-82 — J O'Donnell (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) John Wayfield, Inc. (Authorized Signature) — DATE: 12/01/82

(2) (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) — DATE: 12/1/82

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 125 K T-63 GRM 12-1-82

SITE COPY - PART 3

002739

STRAIGHT BILL OF LADING/HAZARDOUS WASTE MANIFEST

COPY B — TO BE RETAINED BY CONSIGNEE

HAZARDOUS WASTE MANIFEST AND SHIPPERS NO. 00119

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

CROWN CORK & SEAL COMPANY, INC.

Per _____ (Signature of consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading.

On 2-3-82 FROM **CROWN CORK & SEAL COMPANY, INC.**

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is *mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or* any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Delivering Carrier MR. FRANK, INC EPA ID. No. ILD 064506160

Carrier Address 201 W 155th ST So. Holland IL 60473

Received and Accepted for Transport By (Signature) Mike Pfeifer Date 2-3-82

ATTENTION CARRIER: Obtain consignee's signature below - Give Copies A & B to consignee. Retain Copy C for your records.

Consigned To AMERICAN CHEMICAL SERV. EPA ID. No. IND 016 360 265

Address 420 S Colfax

City GRIFFITH State IND 46319 Route

Received and Accepted for Treatment, Storage or Disposal By (Signature) Bob Mauch Title Date 2-3-82

ATTENTION CONSIGNEE: Return original signed Copy A of this document to shipper at address below. Retain Copy B for your records.

PACKAGES NUMBER	PACKAGES KIND	EPA ID. NO.	MATERIAL	HAZARD CLASS
		DESCRIPTION OF MATERIAL AND HAZARD CLASSIFICATIONS		
		Mixed Liquid Chemical Waste which may contain one or more of the following Hazardous Materials.		
	55 Gallon Drums	F005	Spent Non-Halogenated Solvents	Flammable Liquid
	Gallons Bulk	F002	Spent Halogenated Solvents	Flammable Liquid
	Pounds Bulk	F017	Paint and Coating Residues	Flammable Liquid

PLACARDS REQUIRED

CROWN CORK & SEAL CO. INC. EPA ID. No. ILD 001833326

Address 3501 W 31st ST City CHICAGO State IL Phone (312) 254-8400

Shipper, Per (Signature) BJ Cunningham Date 2-3-82

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

Form 5009

B - CONSIGNEE

002740

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0010997

WASTE GENERATOR

Authorization Number 998455

Crown Coke & Steel Co (Company Name) | 3501 W 31st St (Address) | ILD 000183326

Chicago I (City) | Ill (State) | 60623 (Zip) | 031600019 4 (Generator Number)

WASTE HAULER(S)

(1) Mr Frank Inc (Hauler Name) | 201 W 155th St So. Holland, IL 60473 (Hauler Address) | S.W.H. Registration Number 0079001 | ILD 064506160

(2) (Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv (Facility Name) | 440 S. Colfax (Address) | 1 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | IND (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Tank Truck | HAZARD CLASS: Flammable

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2-3-82 | B. J. Gallagher (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2500 | (1) GALLONS (2) CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Mike Reyes (Authorized Signature) | DATE: 2 / 3 / 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:

Bob McCurdy (Authorized Signature) | DATE 02 03 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 123K T-63 6RM 2/3/82

002741

0010996

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

WASTE GENERATOR

Authorization Number 998455

CROWN CORK & SEAL CO. INC — 3501 W. 31st ST — ILD 001833326

(Company Name) — Address

CHICAGO — ILL — 60623 — 0316000194 G

City — State — Zip — Generator Number

WASTE HAULER(S)

(1) MR. FRANK, INC — 201 W 155th ST — S.W.H. Registration Number 0079001

Hauler Name — Hauler Address

SO. HOLLAND, IL 60473 ILD 069506160

(2) _____ — _____ — S.W.H. Registration Number _____

Hauler Name — Hauler Address

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERV — 420 S. COLFAX — 91808902

(Facility Name) — Address — Site Number

GRIFFITH — INDIANA — 46319 — IND 016360265

City — State — Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TANK TRUCK

HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-22-81 — B. J. Gallagher (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 002200 — 1 GALLONS (Circle One) / 2 CU. YDS. — 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 Pfeifer (Authorized Signature) — DATE: 12/22/81

(2) _____ (Authorized Signature) — DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

J Dunfee (Authorized Signature) — DATE: 12/22/81

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

To 210 K T-50 GRM 12/22/81

002742

STRAIGHT BILL OF LADING/HAZARDOUS WASTE MANIFEST

COPY B — TO BE RETAINED BY CONSIGNEE

HAZARDOUS WASTE MANIFEST AND SHIPPERS NO. 00440

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

CROWN CORK & SEAL COMPANY, INC.

Per _____ (Signature of consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

RECEIVED subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading.

On 3-16-82 FROM CROWN CORK & SEAL COMPANY, INC.

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Delivering Carrier MR. FRANKS, INC. TRAILER # 227 EPA ID. No. ILD 069-506-160

Carrier Address 201 W. 155th ST. SOUTH HOLLAND, ILL 60473

Received and Accepted for Transport By (Signature) [signature] Date 3-16-82

ATTENTION CARRIER: Obtain consignee's signature below -- Give Copies A & B to consignee. Retain Copy C for your records.

Consigned To AMERICAN CHEMICAL SERVICES EPA ID. No. IND-016-360-265

Address 420 S. COLFAX

City GRIFFITH State IND. Route

Received and Accepted for Treatment, Storage or Disposal By (Signature) [signature] Title [illegible] Date 3/18

ATTENTION CONSIGNEE: Return original signed Copy A of this document to shipper at address below. Retain Copy B for your records.

PACKAGES NUMBER	PACKAGES KIND	DESCRIPTION OF MATERIAL AND HAZARD CLASSIFICATIONS		
		Mixed Liquid Chemical Waste which may contain one or more of the following Hazardous Materials.		
		EPA I.D. NO.	MATERIAL	HAZARD CLASS
	55 Gallon Drums	F005	Spent Non-Halogenated Solvents	Flammable Liquid
		F002	Spent Halogenated Solvents	Flammable Liquid
4609	Gallons Bulk	F017	Paint and Coating Residues	Flammable Liquid
	Pounds Bulk			

PLACARDS REQUIRED FLAMMABLE

CROWN CORK & SEAL CO. INC.

EPA ID. No. MND-050-742-014

Address 4th ST. & PARK AVE City FARIBAULT State MN Phone (507 334-3981

Shipper, Per (Signature) [signature] Date 3-16-82

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

Form 5009

B - CONSIGNEE

To 210K T-50 GRM 3/18/82

002743

STRAIGHT BILL OF LADING/HAZARDOUS WASTE MANIFEST

COPY

D — SHIPPING FILE COPY

HAZARDOUS WASTE MANIFEST AND SHIPPERS NO. 00120

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

CROWN CORK & SEAL COMPANY, INC.

Per _____ (Signature of consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading,

On 3-19-82 FROM **CROWN CORK & SEAL COMPANY, INC.**

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Delivering Carrier Mr. Frank Inc EPA ID. No. [illegible]

Carrier Address 201 W 135th St So. Holland Il 60473

Received and Accepted for Transport By (Signature) Date 3-19-82

ATTENTION CARRIER: Obtain consignee's signature below - Give Copies A & B to consignee. Retain Copy C for your records.

Consigned To American Chemical Serv EPA ID. No. [illegible]

Address 420 S. Colfax

City Griffith State Ind 46319 Route

Received and Accepted for Treatment, Storage or Disposal By (Signature) Michael O'Brien Title Spvr. Date 3/19

ATTENTION CONSIGNEE: Return original signed Copy A of this document to shipper at address below. Retain Copy B for your records.

PACKAGES

NUMBER	KIND
	55 Gallon Drums
3,000	Gallons Bulk
	Pounds Bulk

DESCRIPTION OF MATERIAL AND HAZARD CLASSIFICATIONS

Mixed Liquid Chemical Waste which may contain one or more of the following Hazardous Materials.

EPA ID. NO.	MATERIAL	HAZARD CLASS
F005	Spent Non-Halogenated Solvents	Flammable Liquid
F002	Spent Halogenated Solvents	Flammable Liquid
F017	Paint and Coating Residues	Flammable Liquid

PLACARDS REQUIRED

CROWN CORK & SEAL CO. INC.

EPA ID. No. [illegible]

Address 3501 W 31st St City Chicago State Ill Phone (312) 251-[illegible]

Shipper, Per (Signature) B. J. [illegible] Date 3-3-82

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

Form 5009

D - SHIPPING DEPARTMENT

002744

TO BE MPLETED BY
WASTE ENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0010998

WASTE GENERATOR

Authorization Number 9 9 8 4 5 5

CROWN CORK & SEAL CO, INC — (Company Name)
3501 W. 31ST ST — Address
ILD 0018 33326
CHICAGO — City
ILL — State
60623 — Zip
0316000194 — Generator Number

WASTE HAULER(S)

(1) MR FRANK, INC — Hauler Name
201 W 155TH ST — Hauler Address
SO. HOLLAND IL 60473
S.W.H. Registration Number 0079007
ILD 069504160

(2) _____ — Hauler Name
_____ — Hauler Address
S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SOLV — (Facility Name)
420 S. COLFAX — Address
GRIFFITH — City
INDIANA — State
46319 — Zip
9180890 02 — Site Number
IND 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TANK TRUCK
HAZARD CLASS: FLAMMABLE (UN 1993)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-19-82
B. J. Gallagher (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 003000 (1 GALLONS / 2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 3 / 19 / 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: 3 / 19 / 82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

SITE COPY - PART 3

TO 210 FT-50 61EM 3/19/82

002745

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0702188

Authorization Number 000000

.INC. 3501 W. 31ST ST. (Address) 3122548400 (Phone Number) 0316000194 (Generator Number)

ILLINOIS (State) 60623 (Zip) ILD001833326 (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 0079009

3125963377 (Phone Number) ILD069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM.SERV. (Facility Name) 420 S. COLFAX (Address) 918089 02 (Site Number)

GRIFFITH (City) INDIANA (State) 46319 (Zip) 3127683400 (Phone Number) IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TANK TRUCK

HAZARD CLASS: FLAMMABLE

NA1993 (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: 002400 (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 B. J. Gallagher (Authorized Signature) DATE: 4-25-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) G. Robertson (Authorized Signature) DATE: 4/25/83 (54–59)

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 4/25/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3 To 210 FT-50 GRM 4.25.83

002746

STRAIGHT BILL OF LADING/HAZARDOUS WASTE MANIFEST

COPY

B B — TO BE RETAINED BY CONSIGNEE

HAZARDOUS WASTE MANIFEST AND SHIPPERS NO. 00441

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

CROWN CORK & SEAL COMPANY, INC.

Per _____ (Signature of consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading,

On 4-20-82 FROM **CROWN CORK & SEAL COMPANY, INC.**

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Delivering Carrier MR. FRANKS, INC. TRAILER #227 EPA ID. No. ILD 069-506-160

Carrier Address 201 W.155th ST. SOUTH HOLLAND, ILL. 60473

Received and Accepted for Transport By (Signature) [signature] Date 4/20/82

ATTENTION CARRIER: Obtain consignee's signature below - Give Copies A & B to consignee. Retain Copy C for your records.

Consigned To AMERICAN CHEMICAL SERVICES EPA ID. No. IND-016-360-265

Address 420 S. COLFAX

City GRIFFITH State IND. Route

Received and Accepted for ~~Treatment~~ Storage or Disposal By (Signature) [signature] Title [signature] Date 4/21/82

ATTENTION CONSIGNEE: Return original signed Copy A of this document to shipper at address below. Retain Copy B for your records.

DESCRIPTION OF MATERIAL AND HAZARD CLASSIFICATIONS

Mixed Liquid Chemical Waste which may contain one or more of the following Hazardous Materials.

PACKAGES NUMBER	PACKAGES KIND	EPA ID. NO.	MATERIAL	HAZARD CLASS
	55 Gallon Drums	F005	Spent Non-Halogenated Solvents	Flammable Liquid
4806	Gallons Bulk	F002	Spent Halogenated Solvents	Flammable Liquid
	Pounds Bulk	F017	Paint and Coating Residues	Flammable Liquid

PLACARDS REQUIRED FLAMMABLE

CROWN CORK & SEAL CO. INC. EPA ID. No. MND-050-742-014

Address 4th ST. & PARK AVE. City FARIBAULT State MN Phone (507 334-3981

Shipper, Per (Signature) [signature] 10:10 Date 4-20-82

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

Form 5009

To 126 FT-63 GRM
4.21.82

B - CONSIGNEE

002747

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

0635963

Authorization Number 998455

TO BE COMPLETED BY WASTE GENERATOR

Crown Cork & Seal Co. Inc	3501 W 31st St	3122548400	0316000194 G	
(Company Name)	Address	Phone Number	Generator Number	
Chicago	IL	60623	ILD000183326	
City	State	Zip	EPA Number	

WASTE HAULER(S)

Mr. Frank, Inc	201 W 155th St	S.W.H. Registration Number	0079001
Hauler Name	Hauler Address		
	So. Holland, IL 60473	3125963377	ILD069506160
		Phone Number	EPA Number
Hauler Name	Hauler Address	S.W.H. Registration Number	
		Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv	420 S. Colfax		91808702
(Facility Name)	Address		Site Number
Griffith	IND	46319	3127683400 IND016360265
City	State	Zip	Phone Number EPA Number
Alternate (Facility Name)	Address		Site Number
City	State	Zip	Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS.		
Tank Truck	Flammable	UN1993 (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: 002,500 (1 GALLONS (Circle One) / 2 CU. YDS.) 1

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION B. J. Gallagher (Authorized Signature) DATE: 5-7-82

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) Mike Leiser (Authorized Signature) DATE: 5/7/82

(2) ____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 5/7/82

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 210 K T-50 GRM 5.7.82

002148

STRAIGHT BILL OF LADING/HAZARDOUS WASTE MANIFEST

COPY

B TO BE RETAINED BY CONSIGNEE

HAZARDOUS WASTE MANIFEST AND SHIPPERS NO. 00442

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

CROWN CORK & SEAL COMPANY, INC.

Per _____ (Signature of consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading,

On 5-19-82 FROM CROWN CORK & SEAL COMPANY, INC.

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Delivering Carrier MR. FRANKS, INC. TRAILER # 227 EPA ID. No. ILD 069-506-160

Carrier Address 201 W. 155th ST. SOUTH HOLLAND, ILL. 60473

Received and Accepted for Transport By (Signature) Robert Perkins Date 5-19-82

ATTENTION CARRIER: Obtain consignee's signature below - Give Copies A & B to consignee. Retain Copy C for your records.

Consigned To AMERICAN CHEMICAL SERVICES EPA ID. No. IND-016-360-265

Address 420 S. COLFAX

City GRIFFITH State IND. Route

Received and Accepted for Treatment, Storage or Disposal By (Signature) [signature] Title Unloader Date 5/20/8.

ATTENTION CONSIGNEE: Return original signed Copy A of this document to shipper at address below. Retain Copy B for your records.

PACKAGES

NUMBER	KIND
	55 Gallon Drums
5000	Gallons Bulk
	Pounds Bulk

DESCRIPTION OF MATERIAL AND HAZARD CLASSIFICATIONS

Mixed Liquid Chemical Waste which may contain one or more of the following Hazardous Materials.

EPA ID. NO.	MATERIAL	HAZARD CLASS
F005	Spent Non-Halogenated Solvents	Flammable Liquid
F002	Spent Halogenated Solvents	Flammable Liquid
F017	Paint and Coating Residues	Flammable Liquid

PLACARDS REQUIRED FLAMMABLE

CROWN CORK & SEAL CO. INC.

EPA ID. No. MND-050-742-014

Address 4th ST. & PARK AVE. City FARIBAULT State MN Phone (507 334-3981

Per (Signature) [signature] Date 5-19-82

...y that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation ...plicable regulations of the Department of Transportation and EPA.

TO 124 K T-63
GRM 5.20.82

B - CONSIGNEE

002749

STRAIGHT BILL OF LADING/HAZARDOUS WASTE MANIFEST

COPY B TO BE RETAINED BY CONSIGNEE

HAZARDOUS WASTE MANIFEST AND SHIPPERS NO. 00443

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

CROWN CORK & SEAL COMPANY, INC.

Per _____ (Signature of consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading,

On 6-16-82 FROM CROWN CORK & SEAL COMPANY, INC.

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Delivering Carrier MR. FRANKS, INC. TRAILER # 227 EPA ID. No. ILD 069-506-160

Carrier Address 201 W. 155th ST. SOUTH HOLLAND, ILL. 60473

Received and Accepted for Transport By (Signature) Robert Perkins Date 6-16-82

ATTENTION CARRIER: Obtain consignee's signature below - Give Copies A & B to consignee. Retain Copy C for your records.

Consigned To AMERICAN CHEMICAL SERVICES EPA ID. No. IND 016-360-265

Address 420 COLFAX S.

City GRIFFITH State IND. Route

Received and Accepted for Treatment, Storage or Disposal By (Signature) F Dunfee Title Unloader Date 6/17/82

ATTENTION CONSIGNEE: Return original signed Copy A of this document to shipper at address below. Retain Copy B for your records.

PACKAGES

NUMBER	KIND
	55 Gallon Drums
4800	Gallons Bulk
	Pounds Bulk

DESCRIPTION OF MATERIAL AND HAZARD CLASSIFICATIONS

Mixed Liquid Chemical Waste which may contain one or more of the following Hazardous Materials.

EPA ID. NO.	MATERIAL	HAZARD CLASS
F005	Spent Non-Halogenated Solvents	Flammable Liquid
F002	Spent Halogenated Solvents	Flammable Liquid
F017	Paint and Coating Residues	Flammable Liquid

F Dunfee

PLACARDS REQUIRED FLAMMABLE

CROWN CORK & SEAL CO. INC.

EPA ID. No. MND 050-742-014

Address 4th ST. & PARK AVE. City FARIBAULT State MN Phone (507 334-3981

Shipper, Per (Signature) Charles S Green Date 6-16-82

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

Form 5009

TO 123 R T-63
GPM 6.17.82

B - CONSIGNEE

002750

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

0635964
1 7

Authorization Number 998455
8 13

Crown Cork & Seal Co. Inc. (Company Name) | 3501 W. 31st St. (Address) | 3122548400 (Phone Number) | 0316000194 G (Generator Number) 14 24

Chicago (City) | IL. (State) | 60623 (Zip) | ILD001833326 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address) | S.W.H. Registration Number 0079001 25 31

So. Holland, IL. 60473 | 3125963377 (Phone Number) | ILD069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number 32 38

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax (Address) | 91808902 (Site Number) 39 46

Griffith (City) | IND (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number 39 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Tank Truck HAZARD CLASS: Flammable NA 1993 (UN or NA Number) F003 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 002,500 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: 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) Mike [signature] (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 WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 6/22/82 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 210 K7-50 GRM 6-22-82

002751

STRAIGHT BILL OF LADING/HAZARDOUS WASTE MANIFEST

COPY

B D — TO BE RETAINED BY CONSIGNEE

HAZARDOUS WASTE MANIFEST AND SHIPPERS NO. 00444

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

CROWN CORK & SEAL COMPANY, INC.

Per _____ (Signature of consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading,

On 7-19-82 FROM CROWN CORK & SEAL COMPANY, INC.

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Delivering Carrier MR. FRANKS, INC. TRAILER # EPA ID. No. ILD 069-3506-160

Carrier Address 201 W. 155th ST., SOUTH HOLLAND, ILL. 60473

Received and Accepted for Transport By (Signature) [signature] Date 7-19-82

ATTENTION CARRIER: Obtain consignee's signature below - Give Copies A & B to consignee. Retain Copy C for your records.

Consigned To AMERICAN CHEMICAL SERVICES EPA ID. No. IND 016-360-265

Address 420 COLFAX S.

City GRIFFITH State IND. Route

Received and Accepted for Treatment, Storage or Disposal By (Signature) [signature] Title Unloader Date 7/20/82

ATTENTION CONSIGNEE: Return original signed Copy A of this document to shipper at address below. Retain Copy B for your records.

DESCRIPTION OF MATERIAL AND HAZARD CLASSIFICATIONS

Mixed Liquid Chemical Waste which may contain one or more of the following Hazardous Materials.

PACKAGES

NUMBER	KIND
	55 Gallon Drums
4950	Gallons Bulk
	Pounds Bulk

EPA ID. NO.	MATERIAL	HAZARD CLASS
F005	Spent Non-Halogenated Solvents	Flammable Liquid
F002	Spent Halogenated Solvents	Flammable Liquid
F017	Paint and Coating Residues	Flammable Liquid

PLACARDS REQUIRED FLAMMABLE

CROWN CORK & SEAL CO. INC.

EPA ID. No. MND 050-742-014

Address 4th ST. & PARK AVE. City FARIBAULT State MN Phone (507 334-3981

Shipper, Per (Signature) [signature] Date 7-19-82

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

Form 5009

B - CONSIGNEE

To 125 KT-63
GRW 7.20.82

002752

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0635965

Authorization Number 9 ~~78155~~

(Company Name)	Address	Phone Number	Generator Number
Crown Cork & Seal Co. Inc.	3501 W. 31st St.	3122548400	0316000194 G

City	State	Zip	EPA Number
Chicago	Illinois	60623	ILD001833326

WASTE HAULER(S)

Hauler Name	Hauler Address	S.W.H. Registration Number	Phone Number	EPA Number
Mr. Frank Inc.	201 W. 155th St. So. Holland Il. 60473	0079001	3125963377	ILD069506160

Hauler Name	Hauler Address	S.W.H. Registration Number	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number	City	State	Zip	Phone Number	EPA Number
American Chemical Service	420 S. Colfax	91808902	Griffith	Ind.	46319	312768 3400	IND016360265

Alternate (Facility Name)	Address	Site Number	City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS	UN or NA Number	EPA HW Number
Tank Truck	Flammable	NA1993	F003

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 002,500 (1 GALLONS (Circle One) 2 CU. YDS.) 1

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 7-28-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 7/28/82

(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) [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. #4

SITE COPY - PART 3

TO 211 E.T. - SO GRM 7-28-82

002753

STRAIGHT BILL OF LADING/HAZARDOUS WASTE MANIFEST

COPY **B** — TO BE RETAINED BY CONSIGNEE

HAZARDOUS WASTE MANIFEST AND SHIPPERS NO. 00445

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

CROWN CORK & SEAL COMPANY, INC.

Per _____ (Signature of consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading.

On 8-19-82 FROM **CROWN CORK & SEAL COMPANY, INC.**

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Delivering Carrier MR. FRANKS, INC. EPA ID. No. ILD 069-506-160

Carrier Address 201 W. 155th ST., SOUTH HOLLAND, ILL. 60473

Received and Accepted for Transport By (Signature) Robert Perkins Date 8-19-82

ATTENTION CARRIER: Obtain consignee's signature below - Give Copies A & B to consignee. Retain Copy C for your records.

Consigned To AMERICAN CHEMICAL SERVICES EPA ID. No. IND 016-360-265

Address 420 COLFAX S.

City GRIFFITH State IND. Route

Received and Accepted for Treatment, Storage or Disposal By (Signature) [signature] Title FOREMAN Date 8/20/82

ATTENTION CONSIGNEE: Return original signed Copy A of this document to shipper at address below. Retain Copy B for your records.

PACKAGES NUMBER	PACKAGES KIND	DESCRIPTION OF MATERIAL AND HAZARD CLASSIFICATIONS		
		Mixed Liquid Chemical Waste which may contain one or more of the following Hazardous Materials.		
		EPA ID. NO.	MATERIAL	HAZARD CLASS
	55 Gallon Drums	F005	Spent Non-Halogenated Solvents	Flammable Liquid
		F002	Spent Halogenated Solvents	Flammable Liquid
4704	Gallons Bulk	F017	Paint and Coating Residues	Flammable Liquid
	Pounds Bulk			

PLACARDS REQUIRED FLAMMABLE

CROWN CORK & SEAL CO. INC.

EPA ID. No. MND 050-742-014

Address 4th ST. & PARK AVE. City FARIBAULT State MN Phone (507 334-3981

Shipper, Per (Signature) [signature] Date 8-19-82

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

Form 5009

To 126 Tr T-63 6PM 8-20-82

B - CONSIGNEE

002754

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

0635966 (1–7)

Authorization Number ~~998455~~ (8–13)

CROWN COAK / SEAL CO, INC. | 3501 W 31ST ST | 3122548400 | 0316000194 G
(Company Name) | Address | Phone Number | Generator Number (14–24)

CHICAGO | IL | 60623 | ILD001833326
City | State | Zip | EPA Number

WASTE HAULER(S)

MR. FRANK INC. | 201 W. 155TH ST, So. Holland IL 60473 | 3125963377 | S.W.H. Registration Number 0079001 (25–31) | ILD069506160
Hauler Name | Hauler Address | Phone Number | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38) | Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERV. | 420 S. COLFAX | 9180890 2 (39–46)
(Facility Name) | Address | Site Number

GRIFFITH | IND | 46319 | 3127683400 | IND016360265
City | State | Zip | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number (39–46)

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:		
TANK TRUCK	FLAMMABLE	NA1993 (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: 002200 (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 B.J. Gallagher (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) Mike Ziegler (Authorized Signature) DATE: 8/25/82 (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 Dunfee (Authorized Signature) DATE: 8/25/82 (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. # 4

SITE COPY - PART 3

To 211K 7-50 6PM 8-25-82

002755

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

0635967

Authorization Number 000000

(Company Name)	Address	Phone Number	Generator Number
CROWN CORK & SEAL CO, INC	3501 W 31ST ST	3122548400	ILD001833326

City	State	Zip	EPA Number
CHICAGO	IL	60623	

WASTE HAULER(S)

Hauler Name	Hauler Address	Phone Number	EPA Number
MR FRANK INC	201 W 155TH ST So HOLLAND IL 60473	3125963377	ILD069506160

S.W.H. Registration Number 0079001

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number	City	State	Zip	Phone Number	EPA Number
AMERICAN CHEM SERV	420 S. COLFAX	91808902	GRIFFITH	INDIANA	46319	3127683400	IND016360265

Alternate (Facility Name)	Address	Site Number	City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TANK TRUCK HAZARD CLASS: FLAMMABLE NA1993 (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: 002,000 (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 B. J Gallagher (Authorized Signature) DATE: 9-16-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Mike Reifer (Authorized Signature) DATE: 9/16/82 (54–59)

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 9/16/82 (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 KT-63 GRM 9.16.82

002756

STRAIGHT BILL OF LADING/HAZARDOUS WASTE MANIFEST

COPY

B B — TO BE RETAINED BY CONSIGNEE

HAZARDOUS WASTE MANIFEST AND SHIPPERS NO. 00446

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

CROWN CORK & SEAL COMPANY, INC.

Per _____ (Signature of consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading,

On 9-14-82 FROM **CROWN CORK & SEAL COMPANY, INC.**

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Delivering Carrier MR. FRANKS INC. EPA ID. No. ILD 069-506-160

Carrier Address 201 W. 155th ST. SOUTH HOLLAND, ILL. 60473

Received and Accepted for Transport By (Signature) Robert Perkins (DRIVER) Date 9-14-82

ATTENTION CARRIER: Obtain consignee's signature below - Give Copies A & B to consignee. Retain Copy C for your records.

Consigned To AMERICAN CHEMICAL SERVICES EPA ID. No. IND 016-360-265

Address 420 COLFAX S.

City GRIFFITH State IND. Route

Received and Accepted for Treatment, Storage or Disposal By (Signature) T. Dunlop Title Unloader Date 9/15/82

ATTENTION CONSIGNEE: Return original signed Copy A of this document to shipper at address below. Retain Copy B for your records.

DESCRIPTION OF MATERIAL AND HAZARD CLASSIFICATIONS

Mixed Liquid Chemical Waste which may contain one or more of the following Hazardous Materials.

PACKAGES NUMBER	PACKAGES KIND	EPA I.D. NO.	MATERIAL	HAZARD CLASS
	55 Gallon Drums	F005	Spent Non-Halogenated Solvents	Flammable Liquid
4776	Gallons Bulk	F002	Spent Halogenated Solvents	Flammable Liquid
	Pounds Bulk	F017	Paint and Coating Residues	Flammable Liquid
			NA 1993	

PLACARDS REQUIRED FLAMMABLE

CROWN CORK & SEAL CO. INC.

EPA ID. No. MND 050-742-014

Address 4th ST. & PARK AVE. City FARIBAULT State MINN. Phone (507 334-3981

Shipper, Per (Signature) Charles L. Hanson Date 9-14-82

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

Form 5009

B - CONSIGNEE

To 117 KT-6360M 9.15.82

002707

STRAIGHT BILL OF LADING/HAZARDOUS WASTE MANIFEST

COPY

B

TO BE RETAINED BY CONSIGNEE

HAZARDOUS WASTE MANIFEST AND SHIPPERS NO. 00447

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

CROWN CORK & SEAL COMPANY, INC.

Per _____ (Signature of consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading,

On 10-4-82 FROM **CROWN CORK & SEAL COMPANY, INC.**

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Delivering Carrier MR FRANKS INC. EPA ID. No. ILD 069-506-160

Carrier Address 201 W. 155th ST. SOUTH HOLLAND, ILL. 60473

Received and Accepted for Transport By (Signature) Robert G. Perkins Date 10-4-82

ATTENTION CARRIER: Obtain consignee's signature below - Give Copies A & B to consignee. Retain Copy C for your records.

Consigned To AMERICAN CHEMICAL SERVICES EPA ID. No. IND. 016-360-265

Address 420 COLFAX S.

City GRIFFITH State IND. Route

Received and Accepted for Treatment, Storage or Disposal By (Signature) J Rentfee Title Unloader Date 10-5-82

ATTENTION CONSIGNEE: Return original signed Copy A of this document to shipper at address below. Retain Copy B for your records.

PACKAGES NUMBER	PACKAGES KIND	DESCRIPTION OF MATERIAL AND HAZARD CLASSIFICATIONS: Mixed Liquid Chemical Waste which may contain one or more of the following Hazardous Materials.		
		EPA ID. NO.	MATERIAL	HAZARD CLASS
	55 Gallon Drums	F005	Spent Non-Halogenated Solvents	Flammable Liquid
4800	Gallons Bulk	F002	Spent Halogenated Solvents	Flammable Liquid
	Pounds Bulk	F017	Paint and Coating Residues	Flammable Liquid

PLACARDS REQUIRED FLAMMABLE

CROWN CORK & SEAL CO. INC.

EPA ID. No. MND 050-742-011

Address 4th STREET & PARK AVE. City FARIBAULT State MINN. Phone (507) 334-3981

Shipper, Per (Signature) Robert G. Perkins Date 10-4-82

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

B - CONSIGNEE

125
TO 218 RT-~~50~~ 63 6RM
10.5.82.

002758

STRAIGHT BILL OF LADING/HAZARDOUS WASTE MANIFEST

COPY A — ORIGINAL-NOT NEGOTIABLE — TO BE SIGNED AND RETURNED TO SHIPPER

HAZARDOUS WASTE MANIFEST AND SHIPPERS NO. 00449

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

CROWN CORK & SEAL COMPANY, INC.

Per _____ (Signature of consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading,

On 12-20-82 FROM **CROWN CORK & SEAL COMPANY, INC.**

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Delivering Carrier MR. FRANKS INC. EPA ID. No. ILD 069-506-160

Carrier Address 201 W. 155th ST. SOUTH HOLLAND, ILL. 60473

Received and Accepted for Transport By (Signature) [signature] Date 12-20-82

ATTENTION CARRIER: Obtain consignee's signature below - Give Copies A & B to consignee. Retain Copy C for your records.

Consigned To AMERICAN CHEMICAL SERVICES EPA ID. No. IND. 016-360-265

Address 420 COLEAX S.

City GRIFFIN State IND. Route

Received and Accepted for Treatment, Storage or Disposal By (Signature) [signature] Title Date 12/21/82

ATTENTION CONSIGNEE: Return original signed Copy A of this document to shipper at address below. Retain Copy B for your records.

PACKAGES NUMBER	PACKAGES KIND	DESCRIPTION OF MATERIAL AND HAZARD CLASSIFICATIONS		
		Mixed Liquid Chemical Waste which may contain one or more of the following Hazardous Materials.		
		EPA I.D. NO.	MATERIAL	HAZARD CLASS
	55 Gallon Drums	F005	Spent Non-Halogenated Solvents	Flammable Liquid
		F002	Spent Halogenated Solvents	Flammable Liquid
5050	Gallons Bulk	F017	Paint and Coating Residues	Flammable Liquid
	Pounds Bulk			

PLACARDS REQUIRED FLAMMABLE

CROWN CORK & SEAL CO. INC.

EPA ID. No. IND 050-742-014

Address 4th ST. & PARK AVE. City FAIRMONT State MINN. Phone (507) 334-3981

Shipper, Per (Signature) [signature] Date 12-20-82

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

Form 5009

A - ORIGINAL

To 125 F T-63 GRM 12.20.82

002759

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0307494

TO BE COMPLETED BY WASTE GENERATOR

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997564
FED EPA ILD-005473277

312/826-0200

CUDNER & O'CONNOR CO. (Company Name) | 4035 W. KINZIE STREET (Address)
CHICAGO (City) | ILLINOIS (State) | 60624 (Zip)
0 3 1 6 0 0 0 4 2 3 G — Generator Number

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE (Hauler Name) | GRIFFITH, INDIANA (Hauler Address) | S.W.H. Registration Number 0024/002
312-355-5440

STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILLINOIS (Hauler Address) | S.W.H. Registration Number ILT 000646810

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 SOUTH COLFAX (Address) 312-768-3400 | 9 1 8 0 8 9 0 2 Site Number
GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

UN ~~NA~~ 1493

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

F005

SHIPPING DESCRIPTION: SOLVENT NOS | HAZARD CLASS: FLAMABLE LIQUID | WEIGHT FOR D.O.T. USE 13,500 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 1485 | 1 (GALLONS) (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One): (DRUMS) 27 | 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: June 22, 1982 | Rita J Code (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 Strem (Authorized Signature) DATE: 6/22/82

(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:

Michael E Ruge (Authorized Signature) DATE: 6/22/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

To 124R T-63 GRM 6-22-82

SITE COPY - PART 3

002760

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0307496
1 7

TO BE COMPLETED BY WASTE GENERATOR

SPECIAL WASTE HAULING MANIFEST

312-886-0200

Authorization Number [illegible] 8 13

FED EPA ID-005473277

CUDNER & O'CONNOR CO. (Company Name) | 4035 WEST KINZIE STREET (Address)

CHICAGO (City) | ILLINOIS (State) | 60624 (Zip)

0 3 1 6 0 0 0 4 2 3 G
14 Generator Number 24

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE (Hauler Name) | GRIFFITH, INDIANA 310-[illegible]-3400 (Hauler Address)

S.W.H. Registration Number 0 0 2 4 / 0 0 8 1
25 31

STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILLINOIS 312-385-5440 (Hauler Address)

S.W.H. Registration Number IIT 0006146810
32 38

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

312-765-3400

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 SOUTH COLFAX (Address)

9 1 8 0 8 9 0 2
39 Site Number 46

GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

NA-1993
F005

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
SOLVENT NOS	FLAMABLE LIQUID

WEIGHT FOR D.O.T. USE 8100 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 990
47 52

1 (GALLONS) (Circle One)
2 CU. YDS.
53

METHOD OF SHIPMENT (Circle One) (DRUMS) 18 TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11-11-82

Rita J. Cody
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 Shand (Authorized Signature) DATE: 11/11/82
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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael O'Brien (Authorized Signature) DATE: 11/11/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

To 125 RT-63 GPM 11.11.82

SITE COPY - PART 3

002761

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

0520864 (1–7)

Authorization Number ____ (8–13)

DAUBERT Chemical Co. (Company Name) | 4700 S. Central Ave (Address) | 3124967370 (Phone Number) | 0316000155 (14) Generator Number (24) G

Chicago (City) | Ill. (State) | 60638 (Zip) | ILD005150750 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155th St. So. Holland Mich (Hauler Address) | S.W.H. Registration Number 0079/004 (25–31)

3125963377 (Phone Number) | ILD069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Co. (Facility Name) | 420 So. Calfax (Address) | 91808902 (39–46) Site Number

GRIFFITH (City) | IND. (State) | 46319 (Zip) | 2127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | (39–46) Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Spent 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
Spent solvents, NOS	Flammable Liquid	NA1993	F017

WEIGHT FOR D.O.T. USE 200000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002500 (47–52) (1) GALLONS (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 Anthony Granito (Authorized Signature) DATE July 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) ____ (Authorized Signature) DATE: 7/15/82 (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: 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 211RT-50 GRN 7.15.82

002762

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

0689395 (1–7)

Authorization Number ____ (8–13)

TO BE COMPLETED BY WASTE GENERATOR

DAUBERT CHEMICAL (Company Name)	ILLINOIS ROUTE 38 (Address)	(815)-226-7738 (Phone Number)	1 0 3 0 2 0 0 0 0 1 G (14–24 Generator Number)
DIXON (City)	ILLINOIS (State)	61021 (Zip)	EPA Number

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name)	201 WEST 155TH ST. SOUTH HOLLAND IL., 60473 (Hauler Address)		S.W.H. Registration Number 0 0 7 9 / 0 0 1 (25–31)
		(312)-596-3377 (Phone Number)	I L D 0 6 9 5 0 6 1 6 0 (EPA Number)
Hauler Name	Hauler Address		S.W.H. Registration Number (32–38)
		Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERCIAN CHEMICAL SERVICES (Facility Name)	420 SOUTH COLFAX, (Address)			9 1 8 0 8 9 0 2 (39–46 Site Number)	
GRIFFITH (City)	IN. (State)	46319 (Zip)	(312)-768-3400 (Phone Number)	I N D 0 1 6 3 6 0 2 6 5 (EPA Number)	
Alternate (Facility Name)	Address			Site Number	
City	State	Zip	Phone Number	EPA Number	

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE HEPTANE WASTE PHASE: LIQUID (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 HEPTANE	FLAMMABLE LIQUIDS	U N 1 2 0 6 (UN or NA Number)	EPA HW Number

WEIGHT FOR D.O.T. USE ____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 00 1650 (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 Darrell E Ulven (Authorized Signature) DATE: 12-1-82

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) Mike Ziegler (Authorized Signature) DATE: 12/01/82 (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:

Mike Ziegler (Authorized Signature) DATE: 12/01/82 (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

To210RT-50 GRM 12.1.82

002763

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0474040

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 998575

ILD094291648

BARRETT VARNISH Co. | 1532 S. 50TH Ct. | 242-2462 | 031051000 6

(Company Name) | Address | Phone Number | Generator Number

CICERO | ILL. | 60650 | ILD094291648

City | State | Zip | EPA Number

WASTE HAULER(S)

STRAND TRUCKING | 420 S. COLFAX | S.W.H. Registration Number 0024002

Hauler Name | Hauler Address

385-8400 | ILT000646810

Phone Number | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL | 420 S. COLFAX | 91808902

(Facility Name) | Address | Site Number

GRIFFITH | IND. | | 768-3400 | IND069506160

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: Blend of ORGANICS - LACQUER SOLVENTS | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS	UN or NA Number	EPA HW Number
SOLVENT N.O.S.	FLAMMABLE LIQUID	UN1993	F005

WEIGHT FOR D.O.T. USE: 26100 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003190 (1 GALLONS) (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 58 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: Wanda Gattis (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) Tom Strand (Authorized Signature) DATE: 3/24/82

(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:

Michael U Burge (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

On dock 3/24/82 6PM
To 126 RT-63 6PM 3-26-82

002764

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0474042 (1–7)

Authorization Number 998575 (8–13)

BARRETT VARNISH Co. (Company Name) | 1532 S. 50TH CT. (Address) | 3122422462 (Phone Number) | 0310510080 G (14 Generator Number 24)

CICERO (City) | ILL. (State) | 60650 (Zip) | ILD094291648 (EPA Number)

WASTE HAULER(S)

AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX (Hauler Address) | S.W.H. Registration Number 9180890 2 (25–31)

2199244370 (Phone Number) | IND016360265 (EPA Number)

STRAND TRUCKING (Hauler Name) | 13642 KENTON CRESTWOOD ILL (Hauler Address) | S.W.H. Registration Number 0024002 (32–38)

3123858440 (Phone Number) | ILT000646813 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX (Address) | 9180890 2 (39 Site Number 46)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39 Site Number 46)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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
SOLVENT N.O.S.	FLAMMABLE LIQUID	NA1993	F005

WEIGHT FOR D.O.T. USE 27200 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003520 (47–52) 1 (GALLONS) (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 64 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 Ron Meken (Authorized Signature) DATE: 7-19-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Stan Strum (Authorized Signature) DATE: 7/19/82 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

M. Edgar C. Davis (Authorized Signature) DATE: 7/19/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 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

002765

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

0474043 (1–7)

Authorization Number ____ (8–13)

BARRETT VARNISH CO. (Company Name) | 1532 S. 50TH CT. (Address) | 3122422462 (Phone Number) | 03105100806 (14–24) Generator Number

CICERO (City) | ILL. (State) | 60650 (Zip) | ILD094291648 (EPA Number)

WASTE HAULER(S)

AMERICAN CHEMICAL (Hauler Name) | 420 S COLFAX (Hauler Address) GRIFFITH, IND. | 2199244370 (Phone Number) | S.W.H. Registration Number 9180890 (25–31) | IND016360265 (EPA Number)

STRAND TRUCKING (Hauler Name) | 13642 KENTON (Hauler Address) CRESTWOOD, ILL. | 3123858440 (Phone Number) | S.W.H. Registration Number 0024002 (32–38) | ILT0006468 10 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX (Address) | 91808902 (39–46) Site Number

GRIFFITH (City) | IND. (State) | 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
SOLVENT N.O.S.	FLAMMABLE LIQUID	NA1993	F005

WEIGHT FOR D.O.T. USE: 24150 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002585 (47–52) (1) GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One): (DRUMS) 47 (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: Wanda Gattis (Authorized Signature) | DATE: 10-21-82

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) Jean Ballou (Authorized Signature) | DATE: 10/21/82 (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:

Michael O Burge (Authorized Signature) | DATE: 10 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 125FT-63 GRM 10.21.82

002766

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0520867

Authorization Number

DAUBERT CHEMICAL CO (Company Name) 4700 S. CENTRAL AVE (Address) 3124967370 (Phone Number) 0316000155 (Generator Number)

CHICAGO (City) Ill. (State) 60638 (Zip) ILD005150750 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) 201 W. 155th St. So. Holland Ill. (Hauler Address) S.W.H. Registration Number 0079/001

3125963377 (Phone Number) ILD069506160 (EPA Number)

Hauler Name Hauler Address S.W.H. Registration Number

Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL CO (Facility Name) 420 S. Colfax (Address) 91808902 (Site Number)

GRIFFITH (City) IND. (State) 46319 (Zip) 2127683400 (Phone Number) IND016360265 (EPA Number)

Alternate (Facility Name) Address Site Number

City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Spent 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: Spent Solvents, NOS HAZARD CLASS: FLAMMABLE LIQUID NA1993 (UN or NA Number) F017 (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: 002000 (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 Anthony Granitz (Authorized Signature) DATE Dec. 17, 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) Mike Pfeifer (Authorized Signature) DATE 12/17/82

(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 12/17/82

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 120 RT-63 GRM 12-17-82

002767

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115978

Authorization Number 997008

A.J. Daw Printing Ink Co. (Company Name) | 5301 Dansher Rd. (Address)

Countrysdde (City) | Illinois (State) | 60525 (Zip)

0310570003 G (Generator Number)

IL D 059449991

WASTE HAULER(S)

(1) Strand (Hauler Name) | 13642 S. Kenton Ave. (Hauler Address) | Krestwood, Ill 60445

S.W.H. Registration Number 0311

IL T000646810

(2) _____ (Hauler Name) | _____ (Hauler Address)

S.W.H. Registration Number _____

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Service (Facility Name) | 420 Coalfax Ave., Griffith, Ind 46319 (Address)

91808902 (Site Number)

IND 016360265

City | State | Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Flammable liquid NOS

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable liquid

HAZARD CLASS: Ignitable UN 1993 F-003

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

68 x 55 gal drums

DATE: 4-27-82

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3240 (47–52) (GALLONS) 2 CU. YDS. (Circle One) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK OTHER Van (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Leonard Strand (Authorized Signature) DATE: 4/26/82 (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 04/26/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

On dock 4.26.82 GRM
To 112 RT-63 GRM 5-3-82

002168

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0115980

Authorization Number 997008

WASTE GENERATOR

A.J. Daw Printing Ink Co. (Company Name) | 5301 Dansher Rd. (Address)

Countryside, (City) | Illinois (State) | 60525 (Zip)

0310570003 G (Generator Number)

IL D 059449991

WASTE HAULER(S)

(1) Strand (Hauler Name) | 13642 S. Kenton Ave. Krestwood, Il 60445 (Hauler Address)

S.W.H. Registration Number 0311

IL T 000646810

(2) _____ (Hauler Name) | _____ (Hauler Address)

S.W.H. Registration Number _____

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 Caalfax Ave. Griffith, Ind. 46319 (Address)

91808902 (Site Number)

_____ (City) | _____ (State) | _____ (Zip)

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Flammable liquid NOS

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable liquid

HAZARD CLASS: Ignitable UN 1992

F-003

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-27-83 (Authorized Signature)

72 x 55 gal

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3960 (47–52) (1 GALLONS / 2 CU. YDS.) (Circle One) (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Leonard Strand (Authorized Signature) DATE: 4/26/83 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature) DATE: 04/26/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

Ondock 4.26.82 GRM
To 112 R T-63 GRM $-3.52

002769

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

5947000

011

WASTE GENERATOR

Authorization Number 997008

AJ Dow Printing Ink Co. 5301 Dansher Rd
(Company Name) Address

Countryside Illinois 60525
City State Zip

0310570003 G
Generator Number

WASTE HAULER(S) 312-385 8440 0024002

(1) Sdrond 13642 S. Kenton Ave. Kresthwood, Il 60445
Hauler Name Hauler Address S.W.H. Registration Number ~~[illegible]~~ IL T 000646810

(2) Hauler Name Hauler Address S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE 318-768-3400

American Chemical Service 420 Colfax Ave. 9180890 2
(Facility Name) Address Site Number

Griffith Indiana 46319
City State Zip IN0016365265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Flammable Liquid NOS. WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: F003

SHIPPING DESCRIPTION: Flammable Liquid - HAZARD CLASS: Ignitable UN1992

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/1/82 [signature] (Authorized Signature)

5 EMPTY 55 GAL DRUMS
3 x 30 gal
149 x 55 gal

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2889 1 GALLONS 2 CU. YDS. (Circle One)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) R. Pinkwell (Authorized Signature) DATE: 6/3/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[signature] (Authorized Signature) DATE: 6/3/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

On dock 6-3-82 GRM To 112 RT-63 GRM 6-7-82

002170

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115994

Authorization Number 7 7 7 0 0 2

AS Davis Printing Ink Co (Company Name) 7301 Davis Rd Address

Chicago (City) Illinois (State) 6025 (Zip)

0210-700003 G (Generator Number)

WASTE HAULER(S) 312-345-8440

(1) Grand (Hauler Name) 13612 S Kenton Ave (Hauler Address) Robbins, IL 60445 S.W.H. Registration Number 0024004

(2) _____ (Hauler Name) _____ (Hauler Address) IL 0006168 10 S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE 312 765-3400

Envirite Corporation 4100 Dean (Facility Name) Address

Harvey (City) Illinois (State) 60426 (Zip) 9710810 Site Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Flammable Liquid NOS WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid D001 WASTE THINNER

HAZARD CLASS: Flammable UN1992

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION 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 (Authorized Signature) 23 x 55 gal.

WASTE HAULER* 9500 gal

QUANTITY OF WASTE RECEIVED: 00265 1 GALLONS 2 CU. YDS. (Circle One)

METHOD OF SHIPMENT (Circle One) 23 DRUMS TANK TRUCK OPEN TRUCK OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) James Bell (Authorized Signature) DATE: 6 9 82

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Michael J Bulger (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

SITE COPY - PART 3

To 210 RT-50 GRAL 6-9-82

002771

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0482306 (1–7)

Authorization Number 992841 (8–13)

TO BE COMPLETED BY WASTE GENERATOR

Delta Color, Inc. (Company Name) | 310 Gerri Lane (Address) | 3125432550 (Phone Number) | 0430050041 (14–24 Generator Number) G

ADDISON (City) | ILLINOIS (State) | 60101 (Zip) | ILD050516214 (EPA Number)

WASTE HAULER(S)

201 W. 155TH ST.
MR. FRANK, INC. (Hauler Name) | SOUTH HOLLAND, IL. 60473 (Hauler Address) | S.W.H. Registration Number 0079/029 (25–31)

3125963377 (Phone Number) | ILD069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVE (Address) | 91808902 (39–46 Site Number)

GRIFFITH (City) | IND. (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: INK SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: | HAZARD CLASS: FLAMMABLE | UN or NA Number: NA1993 | EPA HW Number: F003

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 004000 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION S. Wallin (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) Robert Cleghorn (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 210 T-50 6PM 6-25-82

002772

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

0706723
1 7

Authorization Number 8 13

DELTA COLOR INC. (Company Name) | 301 GERRI LANE (Address) | 3125432550 (Phone Number) | 0430050041 G (Generator Number) 14 24

ADDISON (City) | IL (State) | 60101 (Zip) | ILD050576214 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING CO (Hauler Name) | CRESTWOOD, ILL (Hauler Address) | S.W.H. Registration Number 0311 25 31

3123858440 (Phone Number) | ILT000646810 (EPA Number)

AMERICAN CHEMICAL SERVICE (Hauler Name) | GRIFFITH, IN (Hauler Address) | S.W.H. Registration Number 0024002 32 38

2199244370 (Phone Number) | IND016360265 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVE (Address) | 91808902 (Site Number) 39 46

GRIFFITH (City) | IN (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number 39 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS
HAZARD CLASS: IGNITABLE
UN1993 (UN or NA Number) | D001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 12,300 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED 001335 47 52 | 1 GALLONS (Circle One) 2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One) DRUMS 27 (Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify) 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 Scott Waller (Authorized Signature) DATE: 10-21-82

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) Jim Batt (Authorized Signature) DATE: 10/21/82 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:

Michael O'Brien (Authorized Signature) DATE: 10/21/82 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

- 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

SITE COPY - PART 3 5 To 204 K T-50
2 2 To Solid Mix T-50 10-22-82 GRM

002773

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0115701

Authorization Number 997021

WASTE GENERATOR

HENRY VALVE COMPANY (Company Name) | 3215 NORTH AVENUE (Address)
MELROSE PARK (City) | ILLINOIS (State) | 60160 (Zip)
0311860013 G (Generator Number)
ILD005071741

WASTE HAULER(S)

(1) AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 So. Colfax Ave. Griffith, IN 46319 (Hauler Address)
S.W.H. Registration Number 0024/002

(2) STRAND TRUCKING (Hauler Name) | CRESTWOOD, IL (Hauler Address)
ILT000646810
S.W.H. Registration Number 031101/

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 So. Colfax Ave. (Address)
91808902 (Site Number)
GRIFFITH (City) | INDIANA (State) | 46319 (Zip)
IND016360765

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE CHLOROTHENE VG

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE CHLOROTHENE VG

HAZARD CLASS: F001

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2-26-82

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 001265 (1 GALLONS / 2 CU. YDS.) (Circle One)

METHOD OF SHIPMENT (Circle One) 23 DRUMS | TANK TRUCK | 11506 Lbs OPEN TRUCK | OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Stan Strand (Authorized Signature) DATE: 2/26/82

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Michael J. Bulger (Authorized Signature) DATE: 2/26/82

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

SITE COPY - PART 3

On dock 2/26/82 GRW
To #1 Still T-63 6KM 4.1.82

002774

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0115702

WASTE GENERATOR

Authorization Number 997021

HENRY VALVE COMPANY (Company Name) — 3215 NORTH AVENUE (Address)

MELROSE PARK (City) — ILLINOIS (State) — 60160 (Zip)

0311860013 G (Generator Number)

ILD005071741

WASTE HAULER(S)

(1) AMERICAN CHEMICAL SERVICE (Hauler Name) — 420 So. Colfax Ave. (Hauler Address) Griffith, IN 46319 — S.W.H. Registration Number 0024/002 ILT000646810

(2) STRAND TRUCKING (Hauler Name) — Crestwood, IL (Hauler Address) 213-385-8440 — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

IND 016360265

AMERICAN CHEMICAL SERVICE (Facility Name) — 420 So. Colfax Ave. (Address) — 91808902 (Site Number)

GRIFFITH (City) — INDIANA (State) — 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE CHLOROTHENE VG

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE CHLOROTHENE VG

HAZARD CLASS: F001

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-27-82 — R. F. Schaefer (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 001540 (47–52) — 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) 28 DRUMS — TANK TRUCK — OPEN TRUCK — OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) — DATE: 5/27/82

(2) (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Michael E. Bwig (Authorized Signature) — DATE: 5/27/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

SITE COPY - PART 3

On dock 5-27-82 GRM 7 Kewsen to 210 TC T-50 GRM 6-1-82
To 122 TC T-63 GRM 7-9-82

002775

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0115703

WASTE GENERATOR

Authorization Number

HENRY VALVE COMPANY (Company Name) | 3215 North Avenue (Address)

Melrose Park (City) | Illinois (State) | 60160 (Zip)

0 3 1 1 8 6 0 0 1 3 G — Generator Number

ILD005071741

WASTE HAULER(S)

(1) AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 So. Colfax Ave. Griffith, IN 46319 (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 2 — ILT000646810

(2) STRAND TRUCKING (Hauler Name) | Crestwood, IL 312-385-6445 (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

IND016360265

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 So. Colfax Ave. (Address) 312-768-3400 | 9 1 8 0 8 9 0 2 Site Number

Griffith (City) | Indiana (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Chlorothene VG

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Chlorothene VG

HAZARD CLASS: F001

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11-17-82 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 0 0 2 5 3 0 — (1) GALLONS (2) CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) 46 (DRUMS) TANK TRUCK OPEN TRUCK (OTHER) VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE: 11/17/82

(2) (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature) DATE: 11/17/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

On dock 11.17.82 To 118 T-63 GRM 11-23-82

002776

HAZARDOUS WASTE MANIFEST

001
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER
0024-002
CARRIER NUMBER

American Chemical Service
NAME OF CARRIER (SCAC)

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER 317-362-1837	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	INT190012013	Mi-Tek Lighting, 1615 E. Elmore St. Cville Ind 47933	March 17, 198[illegible]
TRANSPORTER # 1	IND016360265	American Chemical Service, 420 S. Colfax, Griffith IND 219-924-4370	March 17, 198[illegible]
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service, 420 S. Colfax, Griffith Ind 219-924-4370	3/17/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
39 drums		F003	Flammable Liquid	1993		73°F	55gal	2145 gals		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

Steven C. Jones 3-17-82
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

[signature]
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

[signature] 3/17/82
TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

On dock 3/18/82 GRM To 126 E T-63 GRM 3/18/82

002777

HAZARDOUS WASTE MANIFEST

002
MANIFEST DOCUMENT NUMBER

American Chemical Service
NAME OF CARRIER (SCAC)

SHIPPER NUMBER
0024-002
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER 317-362-1837	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	INT100012013	Hi-Tek Lighting, 1615 E. Elmore St., Crawfordsville, Indiana 47933	April 8, 1982
TRANSPORTER # 1	IND016360265	American Chemical Service, 420 S. Colfax, Griffith, Indiana 219-924-4370	April 8, 1982
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service, 420 S. Colfax, Griffith, Indiana 219-924-4370	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
58 drums		F003	Flammable Liquid	1993		73°F	55 gals	3190 gals		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared 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.

Steven C. Jones April 8, 1982
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

[signature]
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

[signature] 4/8/82
TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

On dock 4.8.82 GRM
To 123K T-63 GRM 4.14.82

002778

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

NAME OF CARRIER (SCAC) CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER			
TRANSPORTER # 1			
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DIS— POSAL FACILITY			
TSDF TREATMENT STORAGE OR DIS— POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES — FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE _____ DATE _____

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE _____ TRANSPORTER #2 SIGNATURE & DATE (If required) _____

This is to certify acceptance of the hazardous waste for treatment, storage or disposal

TSDF SIGNATURE _____ DATE _____

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

To 204K T-506KM

On dock 9.8.82

002779

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

Authorization Number ____ 8 ____ 13

INDUSTRIAL ENCLOSURE (Company Name)	619 N. LOUCKS (Address)	3128980400 (Phone Number)	0894070039 (Generator Number) 14 24
AURORA, I (City)	ILLINOIS (State)	60505 (Zip)	(EPA Number)

WASTE HAULER(S)

LAND GREBE MOTOR TRANSIT CO. (Hauler Name)	STATE RT 120 E VALPARAISO IND. (Hauler Address)	I.C.C.# 2980 S.W.H. Registration Number 0374022 (25 31)
	3128423121 (Phone Number)	IND009842524 (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 SERV. (Facility Name)	420 SO. COLFAX (Address)			91808902 (39 Site Number 46)
GRIFFITH (City)	IND. (State)	46319 (Zip)	3127683400 (Phone Number)	IND016360265 (EPA Number)
(Alternate (Facility Name))	(Address)			(39 Site Number 46)
(City)	(State)	(Zip)	(Phone Number)	(EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE LIQUID HAZARD CLASS: 55 149980 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 4200 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 4162 (47 52) 1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 9 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 8/3/82

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] 8-6-82 (Authorized Signature) DATE: __/__/__ (54 59)

(2) ____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 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. # 4

SITE COPY - PART 3

TO 210 RT-50 6PM 8.9.82

002780

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 001

TO:		FROM:	
T/S/D FACILITY	AMERICAN CHEMICAL	Generator	INDIANA DECORATIVE PRODUCTS
E.P.A. ID Code No.	INDO-16360265	E.P.A. ID Code No.	IND 052871878
Address	420 S Colfax	Address	210 S. Wayne Street
Destination	GRiffith Ind. 46319	Origin	Waterloo, Indiana
Phone	219-924-4370	Phone	219-837-8341

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.)
~~14~~	WASTE METHYL ETHYL KETONE	FLAMMABLE	UN-1193	F005	550 gl	(Flammable)
4	WASTE PERCHLORETHYLENE	TOXIC	UN-1897	F001	220 gl	NONE
6 D	WASTE ~~PERCHLORETHYLENE~~ METHYLENE CHLORIDE	TOXIC	UN-1897	F001	330 gl	NONE

PLACARDS REQUIRED FLAMMABLE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 THOMAS SOLVENT COMPANY E.P.A. ID No. MIDO 3993902
Address 5605 Planeview Drive
City Fort Wayne State In Zip 46825 Phone 219-483-7638

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State ____ Zip ____ Phone ____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature [signature] Date 1/7/82

T/S/D F COPY

Ondock
To 126 K T-636 W
2/12/82

002181

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: 002

TO:		FROM:	
T/S/D FACILITY	AMERICAN CHEMICAL	Generator	INDIANA DECORATIVE PRODUCTS
E.P.A. ID Code No.	INDC-16360265	E.P.A. ID Code No.	IND 052871878
Address	420 S. Colfax	Address	210 S. Wayne Street
Destination	Griffith Ind. 46319	Origin	Waterloo, Indiana
Phone	219-924-4370	Phone	219-837-8341

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 METHYL ETHYL KETONE	FLAMMABLE	UN-1193	F005		(Flammable
2	WASTE PERCHLORETHYLENE	TOXIC	UN-1897	F001		NONE

PLACARDS REQUIRED Flammable

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 THOMAS SOLVENT COMPANY E.P.A. ID No. MIDO 3993902
Address 5605 Planeview Drive
City Fort Wayne State IN Zip 46825 Phone 219-483-9638

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State ____ Zip ____ Phone ____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature [signature] Date [illegible]

T/S/D F COPY To ~~125~~ 210 K T-~~67~~ 50
GEN 002 1462

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: 003

TO:	FROM:
T/S/D FACILITY: AMERICAN CHEMICAL	Generator: INDIANA DECORATIVE PRODUCTS
E.P.A. ID Code No.: INDO-16360265	E.P.A. ID Code No.: IND 052871878
Address: 420 S. Colfax	Address: 210 S. Wayne Street
Destination: Griffith Ind. 46319	Origin: Waterloo, Indiana
Phone: 219-924-4370	Phone: 219-837-8341

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
2	WASTE PERCHLORETHYLENE	12	UN-1897	F001		NONE

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is *hereby specifically stated by the shipper to be not exceeding*
$_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges
_____ (Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 THOMAS SOLVENT COMPANY E.P.A. ID No. MIDO 3993902
Address 5605 Planeview Drive
City Fort Wayne State IN Zip 46825 Phone 219-483-9630

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 7/14/82

T/S/D F COPY TO210RT-50
GRM 7.14.82
002783

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: 4862

TO:		FROM:	
T/S/D FACILITY	AMERICAN CHEMICAL SERVICE	Generator	INDIANA DECORATIVE PRODUCTS
E.P.A. ID Code No.	IND0-16350265	E.P.A. ID Code No.	IND-052871878
Address	420 S. Colfax	Address	210 S. Wayne Street
Destination	Griffith, Indiana 46319	Origin	Waterloo, Indiana
Phone	219-924-4370	Phone	219-837-8341

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
2	WASTE PERCHLORETHYLENE	12	UN-1897	F001		NONE

HAZARDOUS WASTE

HAZARDOUS WASTE

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $____ Per ____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY ____
E.P.A. ID Code No. ____
Address ____
Destination ____

EMERGENCY RESPONSE INFORMATION

CONTACT Name ____
Phone ____
National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature ____ Date ____

TRANSPORTER #1 THOMAS SOLVENT COMPANY E.P.A. ID No. MIDO-3993902
Address 5605 Planeview Drive
City Fort Wayne State IN Zip 46825 Phone 219-483-9638

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature ____ Date ____

TRANSPORTER #2 ____ E.P.A. ID No. ____
Address ____
City ____ State ____ Zip ____ Phone ____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature ____ Date ____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature ____ Date ____

T/S/D F COPY

TO 204 RT-50
Bill 10.21.82
002784

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER			11-4-82
TRANSPORTER # 1			
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
20 DM	X		FLAMMABLE LIQUID N.O.S.	1993				1400 lb		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$_____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

To 117RT-63 62RM 11.4.82

TSDF COPY

002785

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0434056

Authorization Number 997251

J & S Tin Mill Products Co. (Company Name) | 3400 No. Powell Ave. (Address) | 3124550261 (Phone Number) | 0316000373 (Generator Number) G

Franklin Park, (City) | Illinois (State) | 60631 (Zip) | ILD042075978 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton Crestwood, Illinois (Hauler Address) | S.W.H. Registration Number 0024002

(312) 385-8440 (Phone Number) | ILT0006468 10 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax Ave. (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND163602 65 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Flammable Liquid	DOT 172.101	UN1993	F005

WEIGHT FOR D.O.T. USE 32960 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED 3520 (1 GALLONS (Circle One) 2 CU. YDS.) 1

METHOD OF SHIPMENT (Circle One) (DRUMS 64 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Nancy T. O'Connor (Authorized Signature) DATE: 1-21-82

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) Thomas Strand (Authorized Signature) DATE: 01 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:

Michael E. Berg (Authorized Signature) DATE: 1/21/82

COMMENTS OR SPECIAL INSTRUCTIONS: On dock 1/21/82 GRM
To 124 RT-63 GRM 1/22/82

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. # 3

SITE COPY - PART 3

002786

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541974

Authorization Number 997251

J & S Tin Mill Products Co. (Company Name) | 3400 No. Powell Ave. (Address) | 3124550261 (Phone Number) | 0316000373 (Generator Number) G

Franklin Park, (City) | Illinois (State) | 60631 (Zip) | ILD042075978 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton Crestwood, Illinois (Hauler Address) | S.W.H. Registration Number 0311011

(312) 385-8440 (Phone Number) | ILT000646810 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number 0311011

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax Ave. (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND16360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid

HAZARD CLASS: DOT 172.101

UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 14725 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 1705 (1 GALLONS (Circle One) 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One) (DRUMS 31 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Nancy O'Connor (Authorized Signature) DATE: 2-26-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [signature] (Authorized Signature) DATE: 2/26/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael C. Burg (Authorized Signature) DATE: 2/26/82

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

V. # 3

SITE COPY - PART 3

Ondock 2/26/82 GRM
To 125 R T-63 GRM 3/1/82

002787

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS •

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541975
1 7

Authorization Number 0 9 7 2 5 1
8 13

J & S Tin Mill Products Co. (Company Name) | 3400 No. Powell Ave. (Address) | 3 1 2 4 5 5 0 2 6 1 (Phone Number) | 0 3 1 6 0 0 0 3 7 3 (Generator Number, 14) | G (24)

Franklin Park, (City) | Illinois (State) | 60631 (Zip) | I L D 0 4 2 0 7 5 9 7 8 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton Crestwood, Illinois (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 2 (25–31)

(312) 385-8440 (Phone Number) | I L T 0 0 0 6 4 6 8 1 0 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

~~American Chemical Service~~ (Facility Name) | ~~420 South Colfax Ave.~~ (Address) | ~~9 1 8 0 8 9 0 2~~ (Site Number, 39–46)

~~Griffith~~ (City) | ~~Indiana~~ (State) | ~~46319~~ (Zip) | ~~3127683400~~ (Phone Number) | ~~I N D 1 6 3 6 0 2 6 5~~ (EPA Number)

Alternate (Facility Name) | Address | 39 Site Number 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ~~Paint Solvents~~ WASTE PHASE: ~~Liquid~~ (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: ~~Flammable Liquid~~ | HAZARD CLASS: ~~DOT 172.101~~ | U N 1 9 9 3 (UN or NA Number) | F 0 0 5 (EPA HW Number)

WEIGHT FOR D.O.T. USE 23275 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 2695 (47–52) | (1) GALLONS (Circle One) (2) CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 49 Number) TANK TRUCK OPEN TRUCK (OTHER (Specify)) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Nancy OConnor (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) [signature] (Authorized Signature) DATE: 4/14/82. (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: 4/14/82 (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 24K T-63 6AM 4.14.82

002788

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541978

Authorization Number 9 9 7 2 5 1

J & S Tin Mill Products Co. (Company Name) | 3400 No. Powell Ave. (Address) | 3 1 2 4 5 5 0 2 6 1 (Phone Number) | 0 3 1 6 0 0 0 3 7 3 (Generator Number) | G

Franklin Park, (City) | Illinois (State) | 60631 (Zip) | I L D 0 4 2 0 7 5 9 7 8 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton Crestwood, Illinois (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 2

(312) 385-8440 (Phone Number) | I L T 0 0 0 6 4 6 8 1 0 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax Ave. (Address) | 9 1 8 9 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 3127683400 (Phone Number) | I N D 0 1 6 3 5 0 2 6 5 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Flammable Liquid	DOT 172.101	U N 1 9 9 3	F 0 0 5

WEIGHT FOR D.O.T. USE 25650 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 2970 (1 GALLONS (Circle One) 2 CU. YDS.) 1

METHOD OF SHIPMENT (Circle One) (DRUMS 54 Number) TANK TRUCK OPEN TRUCK (OTHER (Specify)) Van

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Nancy T. Connell (Authorized Signature) DATE: 5-25-82

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) Stan Strand (Authorized Signature) DATE: 5/25/82

(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

M. Edward O'Brien (Authorized Signature) DATE: 5/25/82

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 5-25-82 GRM To 124 ET-63 GRM 5-27-82

002789

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541979

Authorization Number 997251

J & S Tin Mill Products Co. (Company Name) | 3400 No. Powell Ave. (Address) | 3124550261 (Phone Number) | 0316000373 (Generator Number) G

Franklin Park, (City) | Illinois (State) | 60631 (Zip) | ILD042075978 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton Crestwood, Illinois (Hauler Address) | S.W.H. Registration Number 0024001

(312) 385-8440 (Phone Number) | ILT000646810 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax Ave. (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND16360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid

HAZARD CLASS: DOT 172.101

UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 22325 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 002585 | 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 47 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Nancy T. O'Connor (Authorized Signature) DATE: 6-9-82

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) James Bell (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 WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael O'Brien (Authorized Signature) DATE: 6/9/82

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 125K T-63 GRM 6.9.82

002790

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

054196

Authorization Number ~~997251~~

J & S Tin Mill Products Co. (Company Name) | 3400 No. Powell Ave. (Address) | 3124550261 (Phone Number) | 0316000373 (Generator Number) G

Franklin Park, (City) | Illinois (State) | 60631 (Zip) | ILD042075978 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton Crestwood, Illinois (Hauler Address) | S.W.H. Registration Number 0024002

(312) 385-8440 (Phone Number) | ILT000646810 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax Ave. (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND16360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid

HAZARD CLASS: DOT 172.101

UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 21150 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002585 (1 GALLONS (Circle One) 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One) (DRUMS 47 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 8-5-82

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: 8/5/82

(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:

[signature] DATE: 8/5/82

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

SITE COPY - PART 3

TO 124 R.T-63 6PM 8.5.82

002791

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541982 (1–7)

Authorization Number [illegible] (8–13)

J & S Tin Mill Products Co. (Company Name) | 3400 No. Powell Ave. (Address) | 3124550261 (Phone Number) | 03160000373 (14 Generator Number) G (24)

Franklin Park, (City) | Illinois (State) | 60631 (Zip) | ILD042075978 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton Crestwood, Illinois (Hauler Address) | S.W.H. Registration Number 0024001 (25–31)

(312) 385-8440 (Phone Number) | ILT0006468 10 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax Ave. (Address) | 9180890 2 (39 Site Number 46)

Griffith (City) | Indiana (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND163602 65 (EPA Number)

Alternate (Facility Name) | Address | (39 Site Number 46)

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid | HAZARD CLASS: DOT 172.101 | UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 13,050 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 021595 (47–52) (1 GALLONS 2 CU. YDS. Circle One) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 29 Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify) Vac

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 8-18-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 8/18/82 (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.

[signature] (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 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 124K T-63 ERM 8.18.82

002792

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541983 (1–7)

Authorization Number ____ (8–13)

J & S Tin Mill Products Co. (Company Name) | 3400 No. Powell Ave. (Address) | 3 1 2 4 5 5 0 2 6 1 (Phone Number) | 0 3 1 6 0 0 0 3 7 3 (14) Generator Number (24) G

Franklin Park, (City) | Illinois (State) | 60631 (Zip) | I L D 0 4 2 0 7 5 9 7 8 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton Crestwood, Illinois (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 1 (25–31)

(312) 385-8440 (Phone Number) | I L T 0 0 0 6 4 6 8 1 0 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax Ave. (Address) | 9 1 8 0 8 9 0 2 (39) Site Number (46)

Griffith (City) | Indiana (State) | 46319 (Zip) | 3127683400 (Phone Number) | I N D 1 6 3 6 0 2 6 5 (EPA Number)

Alternate (Facility Name) | Address | (39) Site Number (46)

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid | HAZARD CLASS: DOT 172.101 | U N 1 9 9 3 (UN or NA Number) | F 0 0 5 (EPA HW Number)

WEIGHT FOR D.O.T. USE 27295 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 2 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. | (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 53 Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify) UHV

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 9.17.82

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: 9/17/82 (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

[signature] (Authorized Signature) DATE: 9/17/82 (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 124R T-636 M 9.17.82

002743

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

0541985 (1–7)

Authorization Number ____ (8–13)

J & S Tin Mill Products Co. (Company Name) | 3400 No. Powell Ave. (Address) | 3 1 2 4 5 5 0 2 6 1 (Phone Number) | G 3 1 6 0 0 0 3 7 3 (14) (Generator Number) G (24)

Franklin Park, (City) | Illinois (State) | 60631 (Zip) | I L D 0 4 2 0 7 5 9 7 8 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton Crestwood, Illinois (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 2 (25–31)

(312) 385-8440 (Phone Number) | I L T 0 0 0 6 4 6 8 1 0 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

~~American Chemical Service~~ (Facility Name) | ~~420 South Colfax Ave.~~ (Address) | ~~9 7 8 0 8 2 0 2~~ (39–46) Site Number

~~Griffith~~ (City) | ~~Indiana~~ (State) | ~~46319~~ (Zip) | ~~3127683400~~ (Phone Number) | ~~I N D 1 6 3 6 0 2 6 5~~ (EPA Number)

(Alternate (Facility Name)) | (Address) | (39–46) Site Number

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:		
Flammable Liquid	DOT 172.101	U N 1 9 9 3 (UN or NA Number)	F 0 0 5 (EPA HW Number)

WEIGHT FOR D.O.T. USE 27840 (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 5 2 0 (47–52) (1 GALLONS (Circle One) 2 CU. YDS) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS) 64 (Number) | TANK TRUCK | OPEN TRUCK | (OTHER) (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE. 12/10/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 12/10/82 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE. 12/10/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 12.10.82 EXM
To 125RT-63 6RM 12.16.82

002794

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0084973

Rev. 3/81

002795

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
KELLOGG CO., KELPACO DIVISION	MR. FRANK'S	~~STAUFFER CHEMICAL~~ AMERICAN CHEMICAL
Site Address: 235 Porter St. Battle Creek, MI 49016	Transporters Address: 201 West 155th St. S. Holland, IL 60473	Facility Address: ~~2000 Michigan Hammond, IN 46320~~ 420 So Colfax, Griffith IN 46319
Phone Number: (606) 966-2000	Phone Number: (312) 596-3377	Phone Number: (~~219~~ 312) ~~932-7651~~ 768-3400
Generator's Site EPA I.D. Number: MID 005356209	Transporter's EPA I.D. Number: ILD069506160	Facility Site EPA I.D. Number: IND 016360265 ~~[illegible]~~

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form Solid	Form Liquid	Form Gas	Form Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Flammable Liquid (N.O.S.)	Flammable	UN1210	IT	1	TR		x			1500	Gal.	F003
2.													F005
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions. (Ink & lacquer thinning compounds (N.O.S.)

Major Components: 12% - Ink Pigments & Resins (UN1210)

88% - Halogenated & Non-Halogenated Solvents (UN1219) (UN1173) (UN1276) (UN1294)

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 6 29 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 0079027

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② Ronald Bridgewater — Date(s) Received 6 29 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 IND016360265

☒ Accepted ☐ Rejected — Date Received 6 30 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 211 RT-50 GRM 6.30.82

STATE OF MICHIGAN

Rev. 3/81

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0104209

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
LSI-RAPISTAN	VALLEY CITY REFUSE DISPOSAL	AMERICAN CHEMICAL SERVICE
Site Address	**Transporters Address**	**Facility Address**
640 LEFFINGWELL GRAND RAPIDS, MI 49505	2640 THORNWOOD SW WYOMING, MI 49509	420 SOUTH COLFAX AVE GRIFFITH, IND 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 451-6303	(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**
MIDOOO776047	MIDO55855373	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.	~~SOLID, NOS~~	~~ORM E~~	~~9189~~	~~08~~	~~2~~	~~DR~~	~~X~~				~~135~~	~~GAL~~	~~D008~~
2.	WASTE SOLVENT, NOS	FLAMMABLE LIQ. NOS	1993	07	1	DR		X			55	GAL	F003
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

~~1. FLASH POINT ABOVE 140°F.~~

2. FLASH POINT ≤ 64°F

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 Lee D. Roberts — Date Shipped MO. DAY YEAR: 05 14 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 H213-1

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② Arnold Dykstra — Date(s) Received: 5 17 82

Subsequent transporter(s) Signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

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: 05 18 82

...y significant discrepancies between manifest and shipment.

...UST 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 On dock 5.18.82 GRM
To 210RT-50 GRM 5.26.82

002-19

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

#03

TO:	FROM:
T/S/D FACILITY AMERICAN CHEMICAL SERVICE	Generator LASUER INDUSTRIES
E.P.A. ID Code No. INDO-16360265	E.P.A. ID Code No. EXEMPT
Address 420 S. Colfax	Address 102 S. Main Street
Destination Griffith, Indiana	Origin Claypool, Indiana
Phone 219-924-4370	Phone 219-566-2555

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	WASTE PAINT THINNING COM.	FLAMMABLE	1142	F003		

HAZARDOUS WASTE

HAZARDOUS WASTE

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

$_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____
(Signature of Consignor)

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 THOMAS SOLVENT COMPANY E.P.A. ID No. MID-039993902
Address 5605 Planaview Drive
City Fort Wayne, State IN Zip 46825 Phone 219-482-9638

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date 10/19

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date _____

T/S/D F COPY To 125 RT-63 EPM 10-21-82

002197

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: 14844

TO:	FROM:
T/S/D/F AMERICAN CHEMICAL SERVICE	Generator LEY EQUIPMENT COMPANY
E.P.A. ID Code No. INDO-1630265	E.P.A. ID Code No. EXEMPT
Address - 420 S. Colfax	Address 550 Bonnewitz Avenue
Destination Griffith, Indiana 46319	Origin Van Wert, Ohio
Phone 219-924-4370	Phone 419-238-6742

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
4	WASTE PAINT THINNING COMPOUND	FLAMMABLE	NA-1142	F003	220 110 Gal	FLAMMABLE

PLACARDS REQUIRED FLAMMABLE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $____ Per ____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

HAZARDOUS WASTE

HAZARDOUS WASTE

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D/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 Harold Rex - Ley Equip. Date 4-5-52

TRANSPORTER #1 THOMAS SOLVENT COMPANY E.P.A. ID No. MID-039993902
Address 5605 Planeview Drive
City Fort Wayne State In Zip 46825 Phone 219-483-7332

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature ____ Date 4/4/52

TRANSPORTER #2 ____ E.P.A. ID No. ____
Address ____
City ____ State ____ Zip ____ Phone ____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature ____ Date ____

TREATMENT/STORAGE/DISPOSAL/FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D/F Signature ____ Date 4-14-52

T/S/D/F COPY To 125RT-63 4-14-52

002798

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 AMERICAN CHEMICAL SERVICE	Generator LEX EQUIPMENT COMPANY
E.P.A. ID Code No. INDO-1630255	E.P.A. ID Code No. EXEMPT
Address 420 S. Colfax	Address 550 Bonnewitz Avenue
Destination Griffith, Indiana 46319	Origin Van Wert, Ohio
Phone 219-924-4370	Phone 419-238-6742

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	WASTE PAINT THINNING COM.	FLAMMABLE	NA-1142	D001		FLAMMABLE

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

$_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date 6-22-82

TRANSPORTER #1 THOMAS SOLVENT COMPANY E.P.A. ID No. MID-039993902
Address 5605 Planeview Drive
City Fort Wayne State IN Zip 46825 Phone 219-483-7322

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date 6/22/82

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 7/14/82

To 124F T-63
GRM 7.14.82

T/S/D F COPY

002789

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

15213

TO:		FROM:	
T/S/D FACILITY	AMERICAN CHEMICAL SERVICE	Generator	LEY EQUIPMENT COMPANY
E.P.A. ID Code No.	INDO-1630265	E.P.A. ID Code No.	EXEMPT
Address	420 S. Colfax	Address	550 Bonnewitz Avenue
Destination	Griffith, Indiana 46319	Origin	Van Wert, Ohio
Phone	219-924-4370	Phone	419-238-6742

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	WASTE PAINT THINNING COM.	FLAMMABLE	NA-1142	F003		FLAMMABLE

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

(Signature of Consignor)

FREIGHT CHARGES
PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature [illegible] Date [illegible]

TRANSPORTER #1 THOMAS SOLVENT COMPANY E.P.A. ID No. MID-039993902
Address 5605 Planeview Drive
City Fort Wayne State IN Zip 46825 Phone 219-483-7322

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 To 125 FT-63 [illegible] 10.21.82

002800

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0116084

Authorization Number 996068

WASTE GENERATOR

Litho Stip Co (Company Name) 7247 S 78TH ave (Address)

Bridgeview (City) Ill (State) 60455 (Zip)

0316000013 G (Generator Number)

ILD 010278281

WASTE HAULER(S)

(1) Mr Frank (Hauler Name) 201 W 155TH St (Hauler Address) S.W.H. Registration Number 0079019

(2) (Hauler Name) So Holland Ill (Hauler Address) S.W.H. Registration Number Ild 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) 420 S Colfax (Address) 918008902 (Site Number)

Griffith (City) Ind (State) 46319 (Zip)

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint & Solvents

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: UN 1993 F005

HAZARD CLASS: Flammable

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2-5-82 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004500 (47–52) 1 GALLONS 2 CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Donald Bell (Authorized Signature) DATE: 02/05/82 (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: 02/05/82 (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 124 K T-63 GRM 2/5/82

002801

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0068089 (1–7)

WASTE GENERATOR

Authorization Number 99608 (8–13)

LITHO - STRIP CO. (Company Name) | 7247 S. 78TH AVE (Address)

BRIDGEVIEW (City) | IL (State) | 60455 (Zip)

0316000046 G (14–24 Generator Number)

ILD 010276281

WASTE HAULER(S)

(1) MR. FRANK INC. (Hauler Name) | 201 W. 155TH ST. (Hauler Address)

S. HOLLAND, IL

S.W.H. Registration Number 0029021 (25–31)

ILD 065506160

(2) _____ (Hauler Name) | _____ (Hauler Address)

S.W.H. Registration Number _____ (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX (Address)

9180089 2 (39–46 Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip)

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: _____

HAZARD CLASS: FLAMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/26/82

Kenneth B. Nelson (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005800 (47–52) (1 GALLONS / 2 CU. YDS.) (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS · (TANK TRUCK) · OPEN TRUCK · OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Robert Pedersen (Authorized Signature) DATE 03/25/82 (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: 3/25/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR · PART - 2 IEPA · PART - 3 SITE · PART - 4 HAULER · PART - 5 IEPA · PART - 6 GENERATOR

SITE COPY - PART 3

TO 126 RT-63 61RM 3/25/82

002802

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 0635660 997003 996068

LITHO STRIP CO. (Company Name) | 7247 So. 78TH AVE. (Address) | 312 458 8416 (Phone Number) | 0310270007 G (Generator Number)

BRIDGEVIEW, (City) | IL (State) | 60455 (Zip) | ILD 102782281 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079029

SO. HOLLAND, IL | 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 So. COLFAX (Address) | 918 091 02 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | 312 768 3400 (Phone Number) | IND 016 360 265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE PAINT SOLVENTS | HAZARD CLASS: FLAMABLE | 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: 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 Kenneth B. Nelson (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) Mike Ralph (Authorized Signature) DATE: 6/11/82

(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:

_____ (Authorized Signature) DATE: 6/11/82

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. # 4

SITE COPY - PART 3

To 210 RT-50 6RM

002803

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

0635662 (1–7)

Authorization Number 997003 (8–13)

TO BE COMPLETED BY WASTE GENERATOR

LITHO STRIP CO. (Company Name) | 7247 So. 78TH AVE (Address) | 3124588416 (Phone Number) | 0310270007 G (14 Generator Number 24)

BRIDGEVIEW (City) | IL (State) | 60455 (Zip) | ILD 102782 81 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079018 (25–31)

SO. HOLLAND, IL | 3125963377 (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 So. COLFAX (Address) | 9180910 2 (39 Site Number 46)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND 016360265 (EPA Number)

Alternate (Facility Name) | Address | 39 Site Number 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT 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 PAINT SOLVENTS | HAZARD CLASS: 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: 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 Kenneth B Nelson (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) Donald H Burt (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: 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. 1 1

SITE COPY - PART 3

TO 210 RT-50 GRM 6.24.82

002604

IL 532-610
LPC 62 8/81

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

0635667 (1–7)

Authorization Number ____ (8–13)

LITHO STRIP 10. (Company Name) | 7247 S. 78TH AVE (Address) | 3124588416 (Phone Number) | 0310270007 G (14–24 Generator Number)

BRIDGEVIEW (City) | IL (State) | 60455 (Zip) | ILD 010278281 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) | 201 W. 155TH ST. SO. HOLLAND, IL (Hauler Address) | S.W.H. Registration Number 0079009 (25–31)

3125963327 (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. CALFAX (Address) | 91809102 (39–46 Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND 016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
WASTE PAINT SOLVENTS	FLAMMABLE	UN1993	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: 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 Kenneth B. Nelson (Authorized Signature) DATE: 8/31/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Robert Perkins (Authorized Signature) DATE: 09/02/82 (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. Rourke (Authorized Signature) DATE: 9/2/82 (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. # 4

SITE COPY - PART 3

To 124E T-63 GPM 9.2.82

002605

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

0635676 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number ____ (8–13)

Lester Strip (Company Name) | 7247 So 78th Ave (Address) | 312 458 8416 (Phone Number) | 0310270007 G (14–24 Generator Number)

Bridgeview (City) | Ill (State) | 60455 (Zip) | ILD 102782 81 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W 15th St (Hauler Address) | S.W.H. Registration Number 0079025 (25–31)

So Holland Ill | 312 596 3377 (Phone Number) | ILD 069 506 160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 So. Colfax (Address) | 9180910 2 (39–46 Site Number)

Griffith (City) | Ind (State) | 46319 (Zip) | 312 768 3400 (Phone Number) | IND 016 360 265 (EPA Number)

Alternate (Facility Name) | Address | 39 Site Number 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint 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 Waste Solvent | HAZARD CLASS: Flamable | 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: 004500 (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 Bob Santon (Authorized Signature) | DATE: 11-11-82

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) ____ (Authorized Signature) | DATE: 11/12/82 (54–59)

(2) ____ (Authorized Signature) | DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

____ (Authorized Signature) | DATE: 11/12/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

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 RT-63 GKM 11.12.82

002608

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0510605
Authorization Number ~~898473~~

London Chemical Co. (Company Name) | 240 Foster Ave (Address) | 3127665902 (Phone Number) | 04341A0014 G (Generator Number)

Bensenville (City) | Illinois (State) | 60106 (Zip) | ILD057837510 (EPA Number)

WASTE HAULER(S)

18

Mr Frank Inc (Hauler Name) | 201 W 105th St. (Hauler Address) | S.W.H. Registration Number 0079039

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 Svc. (Facility Name) | PO Box 190 (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvent | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Flammable Liquid N.O.S.	Flammable Liquid	UN1993	F003

WEIGHT FOR D.O.T. USE: 41,250 (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____ Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH 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 M Stanley (Authorized Signature) DATE: 10/29/82

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) ____ (Authorized Signature) DATE: 10/29/82

(2) ____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

____ (Authorized Signature) DATE: 10/29/82

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 116 RT-63 6PM 10-29-82

002607

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0350353

Authorization Number 9 9 7 1 9 8

M&D FLEXOGRAPHIC PRINTERS, INC. 3600 W. 83rd. Pl.
(Company Name) Address

0 3 1 6 0 0 0 3 4 2 G
Generator Number

Chicago, Illinois 60652
City State Zip

WASTE HAULER(S)

Landgrebe Motor Transport 3009 S. Shields
Hauler Name Hauler Address

EPA IND. 0 0 9 842824
S.W.H. Registration Number

ICC 2980,

Hauler Name Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service POBox 190
(Facility Name) Address

9 1 8 0 3 9 0 2
Site Number

Griffith, Ind.
City State Zip

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Ink Solvent

HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE 8,400 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 001100

1 GALLONS (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: 3/18/82 William J. Ward
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Carl Crabb Driver Landgrebe Motor Transport DATE: 3/18/82
(Authorized Signature)

(2) DATE: / /
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Frank James Price DATE: 3/19/82
(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

TO 204RT-50 GRM 3/19/82

SITE COPY - PART 3

002608

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0144419

WASTE GENERATOR

Authorization Number 9 9 7 1 8 8

M&D FLEXOGRAPHIC PRINTERS, 3600 W. 83rd. Pl.
(Company Name) Address

0 3 1 6 0 0 0 3 4 2 G
Generator Number

Chicago, Illinois 60652
City State Zip

WASTE HAULER(S)

EPA INd. 0 0 9842824

(1) Landgrebe Motor Transport 3009 S. Shields
Hauler Name Hauler Address

S.W.H. Registration Number

312 8423121

ICC 2980

(2) Hauler Name Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

312-7683400

American Chemical Service POBox 190 9 1 8 0 8 9 0 2
(Facility Name) Address Site Number

Griffith, Ind. 46319
City State Zip

IND 0 1 4 3 6 0 2 6 5

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

22 Drums 1210 Gallons Weight # 9,900

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Ink Solvent F003 UN1993

HAZARD CLASS: ~~Flammable~~

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-25-82 William J Ward
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 001210 (1) GALLONS (2) CU. YDS. (Circle One)

METHOD OF SHIPMENT (Circle One) 22 DRUMS TANK TRUCK OPEN TRUCK OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 05/25/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Frank James Price (Authorized Signature) DATE: 5/27/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

On dock 5-27-82 GRM
TO 1/2 TK-T-63 GRM 5-28-82

002809

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

0647365

Authorization Number ~~997188~~

3600 West 83rd. Pl.

M&D FLEXOGRAPHIC PRINTERS, INC. (Company Name) — Address — 582-3636 (Phone Number) — 0316000342 (Generator Number)

Chicago, (City) — Il. (State) — 60652 (Zip) — IL.D 005096045 (EPA Number)

WASTE HAULER(S)

Landgrebe Motor Transport (Hauler Name) — 3009 S. Shields (Hauler Address) — S.W.H. Registration Number 009842824

8423121 (Phone Number) — IND009842824 (EPA Number) ICC 2980

Hauler Name — Hauler Address — S.W.H. Registration Number

Phone Number — EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. (Facility Name) — PO Box 190 (Address) — 91808902 (Site Number)

Griffith, (City) — Ind. (State) — Zip — 7683400 (Phone Number) — IN00 1630265 (EPA Number)

Alternate (Facility Name) — Address — Site Number

City — State — Zip — Phone Number — EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Ink Solvent — HAZARD CLASS: — UN1993 (UN or NA Number) — F003 (EPA HW Number)

WEIGHT FOR D.O.T. USE 18,400 LBS TONS (circle one) — WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 002200 ~~14,720~~ — 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 40 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 — William J Ward (Authorized Signature) — DATE: 9-10-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Landgrebe Don Egli (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 WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) — DATE: 9/13/82

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3 — TO 204F T-50 GPM 9.13.82

002810

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

0647366
1 7

Authorization Number ____ 8 13

3600 West 83rd. Place

M&D FLEXOGRAPHIC PRINTERS, | 312-582-3636 | 0 3 1 6 0 0 0 3 4 2 G
(Company Name) | Address | Phone Number | 14 Generator Number 24

Chicago, | Il. | 60652 | IL.D 0 0 5 0 9 6 0 4 5
City | State | Zip | EPA Number

WASTE HAULER(S)

Mr. Franks | 201 W 155TH ST South Holland Ill | S.W.H. Registration Number 0079001 (25 31)
Hauler Name | Hauler Address

312 596 3377 | ILD069506160
Phone Number | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number (32 38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical | 426 S. Colfax | 9 1 8 0 8 9 0 2 (39 46)
(Facility Name) | Address | Site Number

Griffith | Ind | | | Ind 016360265
City | State | Zip | Phone Number | EPA Number

Alternate (Facility Name) | Address | 39 Site Number 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvent | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable | HAZARD CLASS: NA 1993 (UN or NA Number) | EPA HW Number

WEIGHT FOR D.O.T. USE 27,075 (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 William O. Ward (Authorized Signature) DATE: 12-28-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Mike O'Leary (Authorized Signature) DATE: 12 28 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: 12/28/82 (60 65)

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

SITE COPY - PART 3

To 210 RT-50 6PM 12-28-82

002611

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 23270

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: The Manitowoc Company, Inc.
2. EPA IDENTIFICATION NO.: WID 000808584
3. COMMENTS/SPECIAL INSTRUCTIONS: Skin: wash w/soap & water
Eyes: flush w/water
Breathing: put person into fresh air
Swallowing: call physician, do not induce vomiting
4. P.O. BOX OR STREET ADDRESS: 2401 South 30 Street
5. CITY, STATE, ZIP CODE: Manitowoc, WI 54220
6. TELEPHONE NUMBER: (414) - 684-6621

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)
27 - 55 gal drums	1485	Ketones, alcohols, esters, napthas, glycol ethers	Flammable Liq. NOS	UN 1993	1. Solid 3. Mixture 2. Liquid [3]	F003 F005	
					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: Dena Gens Drama
16. NAME (Print): Dena Gens Drama
17. DATE SHIPPED: M 11 D 1 Y 82

TRANSPORTER SECTION

18. COMPANY NAME: ABC Services, Inc.
19. EPA IDENTIFICATION NO.: WID 07159839
20. P.O. BOX OR STREET ADDRESS: 5700 - 49th Avenue
21. CITY, STATE, ZIP CODE: Kenosha, WI 53142
22. TELEPHONE NUMBER: (414) - 657-6222
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Kip Nelson
25. NAME (Print): Kip Nelson
26. Date Accepted: M 11 D 9 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.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (312) - 768-3400
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: G R Murphy
39. NAME (Print): G R MURPHY
40. Date Accepted: M 11 D 10 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 On dock 11.10.82 To 204 E 7:50 11.29.82

002512

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 23269

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: The Manitowoc Company, Inc.
2. EPA IDENTIFICATION NO.: WID 006073183
3. COMMENTS/SPECIAL INSTRUCTIONS: Skin: wash w/soap & water
Eyes: flush w/water
Breathing: put person into fresh air
Swallowing: call physician, do not induce vomiting
4. P.O. BOX OR STREET ADDRESS: 500 South 16 Street
5. CITY, STATE, ZIP CODE: Manitowoc, WI 54220
6. TELEPHONE NUMBER: (414) 684-6621

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)
46 [illegible] drums	2300	Ketones, alcohols, esters, napthas, glycol ethers	Flammable liq. NOS	UN 1993	1. Solid 3. Mixture 2. Liquid [3]	F003 F005	
					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: Dena Gens Dramm
16. NAME (Print): Dena Gens Dramm
17. DATE SHIPPED M D Y: 11 / 1 / 82

TRANSPORTER SECTION

18. COMPANY NAME: ABC Services, Inc.
19. EPA IDENTIFICATION: WID 076159839
20. P.O. BOX OR STREET ADDRESS: 5700 - 49th AVenue
21. CITY, STATE, ZIP CODE: Kenosha, WI 53142
22. TELEPHONE NUMBER: (414). 657-6222
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Kip Nelson
25. NAME (Print): K.P Nelson
26. Date Accepted M / D / Y: 11 / 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

On dock 11.10.82

HAZARDOUS WASTE FACILITY

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (312) - 768-3400
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(les) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: G R Murphy
39. NAME (Print): G R MURPHY
40. Date Accepted: 11 / 10 / 82

I hereby certify that the above named materials and indicated quantity(les) 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 To 7-50 on 11.29.82

00261 3

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

13
MANIFEST DOCUMENT NUMBER

IND005447776
SHIPPER NUMBER

Thomas Solvent Company
NAME OF CARRIER (SCAC)

MID039993902
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND005447776	MarkHon Industries Inc., 200 Bond St., Wabash, IN 46992	
TRANSPORTER # 1	MID039993902	Thomas Solvent Company, 5605 Planeview Dr. Port Wayne, IN 46825	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service, 420 Colfax Griffith, IN 46319	1/7/82
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)
19 drums	F	F003	Waste Thinning Compound	NA-1142 N/A	19	-4°C	55 gal	1045 gal.		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☒ No ☐

REMIT
C.O.D. TO:
ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

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 1/7/82

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

FILE COPY

002814

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

13
MANIFEST DOCUMENT NUMBER

IND005447776
SHIPPER NUMBER

Thomas Solvent Company
NAME OF CARRIER (SCAC)

MID039993902
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND005447776	MarkHon Industries Inc., 200 Bond St., Wabash, IN 46992	
TRANSPORTER # 1	MID039993902	Thomas Solvent Company, 5605 Planeview Dr. Fort Wayne, IN 46825	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service, 420 Colfax Griffith, IN 46319	1/7/82
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)
19 drums	F	F003	Waste Thinning Compound	NA-1142 N/A	19	-4°C	55 gal	1045 gal.		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☒ No ☐

REMIT
C.O.D. TO:
ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐
Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE _____ DATE 12-31-81

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE _____ TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE _____ DATE 1/7/82

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY To 125 R T-63 GR M 1/7/82

002615

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

14
MANIFEST DOCUMENT NUMBER

IND005447776
SHIPPER NUMBER

Thomas Solvent Company
NAME OF CARRIER (SCAC)

MID039993902
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND005447776	Markhon Industries Inc., 200 Bond St., Wabash, IN 46992	
TRANSPORTER # 1	MID039993902	Thomas Solvent Company, 5605 Planeview Dr. Fort Wayne, IN 46825	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016260265	American Chemical Service, 420 Colfax Griffith, IN 46319	4/14
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
14 drums	F	F003	Waste Thinning Compound	NA-1142	14	-4°C	55 gal	770 gal.		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES — FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.

$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE — TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE 4/14/85

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY To125RT-63 CRM 4/14/82

002616

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

16
MANIFEST DOCUMENT NUMBER

IND005447776
SHIPPER NUMBER

Thomas Solvent Company
NAME OF CARRIER (SCAC)

MID039993902
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND005447776	MarkHon Industries Inc., 200 Bond St., Wabash, IN 46992	
TRANSPORTER # 1	039993902 MIDXXXXXXXX	Thomas Solvent Company, 5605 Planeview Dr. Fort Wayne, IN 46825	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016260263	American Chemical Service, 420 Colfax Griffith, IN 46319	10/21/92
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
15 drums	F	F003	Waste Thinning Compound	NA-1142	10	-4°C	55 Gal	825 Gals		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES — FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.

$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

_____ 10-5-92
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

_____ 10-21-92
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

_____ 10/21/92
TSDF SIGNATURE DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY To 125 FT-63 EKM 10.2182

002617

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

15
MANIFEST DOCUMENT NUMBER

IND005447776
SHIPPER NUMBER

Thomas Solvent Company
NAME OF CARRIER (SCAC)

MID039993902
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND005447776	MarkHon Industries Inc., 200 Bond St., Wabash, IN 46992	
TRANSPORTER # 1	MID039993902	Thomas Solvent Company, 5605 Planeview Dr. Fort Wayne, IN 46825	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016260265	American Chemical Service, 420 Colfax Griffith, IN 46319	7/14
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)
10 drums	F	F003	Waste Thinning Compound	NA-1142	10	-4°C	55 gal	550 gal.		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges
_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE 7/14/82 DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

TO 124 R-T-63 GRM 7.14.82

002618

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0435654

Authorization Number 997665

Midwest Sintered Prod. (Company Name) 13605 So Halsted (Address) 312-849-5290 (Phone Number) 0312580004 (Generator Number)

Riverdale (City) IL (State) 60627 (Zip) ILD005234141 (EPA Number)

WASTE HAULER(S)

STRAND Trucking (Hauler Name) CRESTWOOD IL (Hauler Address) S.W.H. Registration Number 0024

Phone Number ILT000646810 (EPA Number)

AMERICAN CHEMICAL (Hauler Name) GRIFFITH Ind. (Hauler Address) S.W.H. Registration Number

Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) Po Box 190 (Address) 91808902 (Site Number)

GRIFFITH (City) Ind (State) 46319 (Zip) 2199244370 (Phone Number) IND016360265 (EPA Number)

Alternate (Facility Name) Address Site Number

City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: TRICHLORETHYLENE/OIL WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TRICHLORETHYLENE/OIL HAZARD CLASS: — UN or NA Number F001 EPA HW Number

WEIGHT FOR D.O.T. USE 7,920 LBS. TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 000660 (47–52) 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 12 Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 3-18-82

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) Thomas Strand (Authorized Signature) DATE: 03/18/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael O'Brien (Authorized Signature) DATE: 3/18/82

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 3/18/82 GRM
To 122 RT-63 GRM 4.1.82

002619

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0435652
Authorization Number ~~9977~~ 4

MID-WEST SPRING (Company Name) | 8 GREENWOOD AVE (Address) | 8158387812 (Phone Number) | 0316000443 G (Generator Number)
ROMEOVILLE (City) | IL (State) | 60441 (Zip) | ILD005093257 (EPA Number)

WASTE HAULER(S)

American Chemical Service (Hauler Name) | 420 S. Colfax (Hauler Address) | S.W.H. Registration Number 0024002
Phone Number | ILT000646810 (EPA Number)

STRAND TRUCKING (Hauler Name) | 137 S. KENTON (Hauler Address) | S.W.H. Registration Number
CRESTWOOD, IL. | 3123858440 (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) | Zip | 2197683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number
City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: ORGANIC SOLVENT | HAZARD CLASS: NON FLAMMABLE | 1710 (UN or NA Number) | F001 (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: 001045 (1 GALLON) 2 CU. YDS. (Circle One)

METHOD OF SHIPMENT (Circle One) (DRUMS 19 Number) TANK TRUCK OPEN TRUCK (OTHER (Specify) SEMI-TRAILER)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (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) [signature] (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:

[signature] (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. # 3

SITE COPY - PART 3

On dock 10-15-82

002620

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 29946

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Milwaukee Solvents & Chemicals
2. EPA IDENTIFICATION NO.: WID023350192
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 14765 W. Bobolink Avenue
5. CITY, STATE, ZIP CODE: Menomonee Falls, WI 53051
6. TELEPHONE NUMBER: (414) 252-3550

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	7500	Waste Solvent N.O.S.	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	[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): [illegible]
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 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: [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
33. EPA IDENTIFICATION NO.: IND016368265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Road
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: [signature]
39. NAME (Print): EDWARDS
40. Date Accepted M D Y: 1 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

HAZARDOUS WASTE FACILITY

To 205 R 1-50
GEM 1/21/82

002621

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 29951

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Milwaukee Solvents & Chemicals
2. EPA IDENTIFICATION NO.: WID023350192
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 14765 W. Bobolink Avenue
5. CITY, STATE, ZIP CODE: Menomonee Falls, WI 53051
6. TELEPHONE NUMBER: (414) 252-3550

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	5000	Waste Solvent N.O.S.	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	30,000
					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: Terry Dietzel
16. NAME (Print): Terry Dietzel
17. DATE SHIPPED M D Y: 2 / 8 / 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 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 D. Martin
25. NAME (Print): MICHAEL D. MARTIN
26. Date Accepted: 2 / 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
33. EPA IDENTIFICATION NO.: IND016380265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Road
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: Bob McAuck
39. NAME (Print): BOB MAUCK
40. Date Accepted: 2 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 210 K T-50
GRM 2/8/82

002522

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 29960

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
Milwaukee Solvents Chemicals	WID023350152	
4. P.O. BOX OR STREET ADDRESS: 11765 West Rebecca		
5. CITY, STATE, ZIP CODE: Menomonee Falls WI 53051	6. TELEPHONE NUMBER: (414) 352-2550	

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		Waste Solvent NOS	Flammable Liquid	[illegible]	1. Solid 3. Mixture 2. Liquid [2]	F003	36,000
					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)	17. DATE SHIPPED M D Y
[signature]	Terry Dutch	1-4-82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Mr Frank Tire	T-D065506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street	
21. CITY, STATE, ZIP CODE: South Holland Ill 60473	22. TELEPHONE NUMBER: (312) 596-[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	25. NAME (Print)	26. Date Accepted
Michael Martin	Michael Martin	2/19/82

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	33. EPA IDENTIFICATION NO.
American Chemical	[illegible]
34. P.O. BOX OR STREET ADDRESS: 400 South Collex Rd	
35. CITY, STATE, ZIP CODE: Gallatin Tenn	36. TELEPHONE NUMBER: (615) 524-4220
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
Bob Mauck	Bob Mauck	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

TO 210 K T-50 GRM 2/19/82

002823

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 29952

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Milwaukee Solvents & Chemicals
2. EPA IDENTIFICATION NO.: WID023350192
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 14765 W. Bobolink Avenue
5. CITY, STATE, ZIP CODE: Menomonee Falls, WI 53051
6. TELEPHONE NUMBER: (414) 252-3550

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) Tankor	5000	Waste Solvent N.O.S.	Flammable Liquid	UN1993	1. Solid 2. Liquid 3. Mixture ☐	F005	36,000
					1. Solid 2. Liquid 3. Mixture ☐		
					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: Terry Dietrich
16. NAME (Print): Terry Dietrich
17. DATE SHIPPED M D Y: 2/15/82

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 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: 2/15/82

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
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Road
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: Bob Mauck
39. NAME (Print): Bob Mauck
40. Date Accepted: 2/15/82

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 210K T-50
GRM 2/15/82

002624

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 29961

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Milwaukee Solvents + Chemicals
2. EPA IDENTIFICATION NO.: WID023350192
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 19765 West Edgebrook Ave
5. CITY, STATE, ZIP CODE: Menomonee Falls WI 53051
6. TELEPHONE NUMBER: (414) 252-3550

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	5000	Waste Solvent NOS	Flammable Liquid	UN 1993	1. Solid 2. Liquid 3. Mixture [1]	D001	36,000
					1. Solid 2. Liquid 3. Mixture [ ]		
					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: Terry J Dietrich
16. NAME (Print): Terry J Dietrich
17. DATE SHIPPED M D Y: 3/9/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc
19. EPA IDENTIFICATION NO.: ILD065506160
20. P.O. BOX OR STREET ADDRESS: 201 West 15th Street
21. CITY, STATE, ZIP CODE: South Holland IL 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: 3 M. 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: [signature]
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical
33. EPA IDENTIFICATION NO.: TNP[illegible]265
34. P.O. BOX OR STREET ADDRESS: 120 South Collins Road
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: [signature]
39. NAME (Print): F DUNFEE
40. Date Accepted: 3 M / D / 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

To 210 RT-50
GRM 3/9/82

HAZARDOUS WASTE FACILITY

002625

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 29966

002626

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	[illegible] Solvents + Chemical
2. EPA IDENTIFICATION NO.	WID003350[illegible]2
3. COMMENTS/SPECIAL INSTRUCTIONS	
4. P.O. BOX OR STREET ADDRESS	[illegible]
5. CITY, STATE, ZIP CODE	[illegible] Falls Wi 53051
6. TELEPHONE NUMBER	([illegible])-350-3550

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	5000	Waste Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	16,000
					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)	17. DATE SHIPPED M D Y
[illegible]	[illegible]	3 23 82

TRANSPORTER SECTION

18. COMPANY NAME	Mr. Frank Inc
19. EPA IDENTIFICATION NO.	[illegible]
20. P.O. BOX OR STREET ADDRESS	[illegible] West [illegible] Street
21. CITY, STATE, ZIP CODE	South Holland, IL 60473
22. TELEPHONE NUMBER	([illegible])-[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	25. NAME (Print)	26. Date Accepted M D Y
[illegible]	[illegible]	3 / 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	[illegible] Chemical
33. EPA IDENTIFICATION NO.	[illegible]
34. P.O. BOX OR STREET ADDRESS	[illegible] South Colley Road
35. CITY, STATE, ZIP CODE	[illegible]
36. TELEPHONE NUMBER	([illegible])-[illegible]
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]	F DUNFEE	3 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 K T-50
GEM 3/23/82

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 29968

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Milwaukee Solvents & Chemicals
2. EPA IDENTIFICATION NO.: WID023350192
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 14765 West Bobolink Avenue
5. CITY, STATE, ZIP CODE: Menomonee Falls, WI 53051
6. TELEPHONE NUMBER: (414) 252-3550

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	5000	Waste Solvent N.O.S.	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid ☐	F003	32000
					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: Terry Dietl
16. NAME (Print): Terry Dietl
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 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): [illegible]
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
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Road
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): FDVN LEE
40. Date Accepted M / D / Y: 4 / 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

To 210 T-50
GEM 4.12.82

00227

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 29969

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Milwaukee Solvents Chemicals
2. EPA IDENTIFICATION NO.: WID0[illegible]3550152
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: PO Box 444
5. CITY, STATE, ZIP CODE: Menomonee Falls Wis 53051
6. TELEPHONE NUMBER: (414) 252-3550

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	4500	Lost Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [x]	F003	39,000
					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): [signature]
17. DATE SHIPPED M D Y: 1 02 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr Frank Inc
19. EPA IDENTIFICATION NO.: IL[illegible]
20. P.O. BOX OR STREET ADDRESS: 2[illegible] West 155th Street
21. CITY, STATE, ZIP CODE: [illegible] IL 60[illegible]
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: Michael Martin
25. NAME (Print): Michael Martin
26. Date Accepted: 4 02 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
33. EPA IDENTIFICATION NO.: [illegible]
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Rd
35. CITY, STATE, ZIP CODE: Griffith Indiana
36. TELEPHONE NUMBER: (219) 424-4370
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: 4 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

To 211K T-50 6RM
4.22.82

HAZARDOUS WASTE FACILITY

002628

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 29979

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
Milwaukee Solvent Chemicals	WIDO23330192	
4. P.O. BOX OR STREET ADDRESS: 14765 W Bobolink Ave		
5. CITY, STATE, ZIP CODE: Menomonee Falls, WI 53051	6. TELEPHONE NUMBER: (414)-251-3550	

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	5,500	Waste Solvent N.O.S.	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	42,000
					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: Robert Hutzer
16. NAME (Print): Robert Hutzer
17. DATE SHIPPED: M 5 D 10 Y 82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Mr Frank Inc	ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 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
[signature]	GARY DRUMM	M 5 D 10 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	IND016302 65
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Road	
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
[signature]	FDUNFEE	M 5 D 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

To 210K T-50
GRM 5-10-82

HAZARDOUS WASTE FACILITY

629200

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 29983

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Milwaukee Solvents & Chemicals
2. EPA IDENTIFICATION NO.: WID023350192
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 14765 W. Bobolink Avenue
5. CITY, STATE, ZIP CODE: Menomonee Falls, WI 53051
6. TELEPHONE NUMBER: (414) 252-3550

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	5,000.	Waste Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	38,000
					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: Robert Heitzer
16. NAME (Print): Robert Heitzer
17. DATE SHIPPED M D Y: 5 11 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD065506160
20. P.O. BOX OR STREET ADDRESS: 201 West 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): GARY DUNEE
26. Date Accepted M D Y: 5 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
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Road
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): F DUNTEE
40. Date Accepted M D Y: 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

TO 211 KT-50 GRM
5-29-82

HAZARDOUS WASTE FACILITY

00263

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 29986

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Milwaukee Solvents & Chemicals
2. EPA IDENTIFICATION NO.: WID023350192
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 14765 W. Bobolink Avenue
5. CITY, STATE, ZIP CODE: Menomonee Falls, WI 53051
6. TELEPHONE NUMBER: (414) 252-3550

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	5000	Waste Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	32,000
					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: Robert Hintze
16. NAME (Print): Robert Hintze
17. DATE SHIPPED M D Y: 6 11 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 60473
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:
25. NAME (Print):
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
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Road
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): FWhite
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

T0210 F-T-50
HAZARDOUS WASTE FACILITY GRM 6/11/82

00200

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 29985

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Milwaukee Solvents & Chemicals
2. EPA IDENTIFICATION NO.: WIDO23350192
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 14765 W. Bobolink Avenue
5. CITY, STATE, ZIP CODE: Menomonee Falls, WI 53051
6. TELEPHONE NUMBER: 414 252-3550

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	5000	Waste Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	38,000
					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: Robert Heitzer
16. NAME (Print): Robert Heitzer
17. DATE SHIPPED: M D Y 6 13 82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILDO69506160
20. P.O. BOX OR STREET ADDRESS: 201 West 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 6 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
33. EPA IDENTIFICATION NO.: INDO16360265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Road
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): FOUNTEE
40. Date Accepted: M 6 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 211 KT-50
GRM 6.3.82

229200

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 132927

002633

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
Milwaukee Solvents & Chemicals	WID023350192	
4. P.O. BOX OR STREET ADDRESS: 14765 W. Bobolink Avenue		
5. CITY, STATE, ZIP CODE: Menomonee Falls, WI 53051	6. TELEPHONE NUMBER: (414) 252-3550	

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	4,000	Waste Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	30,000
					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)	17. DATE SHIPPED M D Y
Robert Heitzer	Robert Heitzer	6/21/82

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Mr. Frank, Inc.	ILD065506160
20. P.O. BOX OR STREET ADDRESS: 201 West 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
Robert Perkins	Robert Perkins	6/23/82

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	IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Road	
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]	F DUNFEE	6/24/82

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

HAZARDOUS WASTE FACILITY

T0210 KT-50 GRW
6-29-82

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 132932

002834

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Milwaukee Solvents & Chem	2. EPA IDENTIFICATION NO.: WID023350192
4. P.O. BOX OR STREET ADDRESS: 14765 W. Bobolink Avenue	
5. CITY, STATE, ZIP CODE: Menomonee Falls, WI 53051	6. TELEPHONE NUMBER: (414)252-3550

3. COMMENTS/SPECIAL INSTRUCTIONS:

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	[illegible]	Waste Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	40,000
					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: Robert Heitzer
16. NAME (Print): Robert Heitzer
17. DATE SHIPPED M D Y: 7/28/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.	19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street	
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473	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	25. NAME (Print)	26. Date Accepted M / D / Y
[illegible]	[illegible]	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

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical	33. EPA IDENTIFICATION NO.: IND016380265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Road	
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
F Dunfee	F DUNFEE	7 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 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

Today 7:50 GPM
7-26-82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
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HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 132931

002635

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Milwaukee Solvents & Chemicals
2. EPA IDENTIFICATION NO.: WIDO23350192
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 14765 W. Bobolink Avenue
5. CITY, STATE, ZIP CODE: Menomonee Falls, Wisconsin 53051
6. TELEPHONE NUMBER: (414) 252-3550

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	5,000	Waste Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	42,000
					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: Robert Heitzer
16. NAME (Print): Robert Heitzer
17. DATE SHIPPED M D Y: 7/1/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILDO69506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
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
25. NAME (Print)
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
33. EPA IDENTIFICATION NO.: INDO16360265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Road
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): FOUNTEE
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 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

TO210E 7-50
GEM 7-22-82

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 132933

002638

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: MILWAUKEE SOLVENTS & CHEMICALS
2. EPA IDENTIFICATION NO.: WID023350192
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 14765 W. BOBOLINK AVENUE
5. CITY, STATE, ZIP CODE: MENOMONEE FALLS, WI 53051
6. TELEPHONE NUMBER: (414) 252-3550

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	5,000	WASTE SOLVENT NOS	FLAMMABLE LIQUID	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	40,000
					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: Robert Heitzer
16. NAME (Print): ROBERT HEITZER
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 WEST 155TH STREET
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND, ILLINOIS 60473
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:
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
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 SOUTH COLFAX ROAD
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: E Dunfee
39. NAME (Print): E. DUNFEE
40. Date Accepted M / D / Y: 7 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 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 10/27-30

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 132935

002637

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Milwaukee Solvents & Chemicals
2. EPA IDENTIFICATION NO.: WID023350192
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 14765 W. Bobolink Avenue
5. CITY, STATE, ZIP CODE: Menomonee Falls, WI 53051
6. TELEPHONE NUMBER: (414) 252-3550

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	5000	Waste Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	35,000
					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: Robert Heitzer
16. NAME (Print): Robert Heitzer
17. DATE SHIPPED M D Y: 8/17/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: IN ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
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:
25. NAME (Print): [illegible]
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
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Road
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): F DUNFEE
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 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 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 REV. 6-81

MANIFEST NUMBER: A 132934

002638

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: MILWAUKEE SOLVENTS & CHEMICALS
2. EPA IDENTIFICATION NO.: WID023350192
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 14765 W BOBOLINK AVENUE
5. CITY, STATE, ZIP CODE: MENOMONEE FALLS, WI 53051
6. TELEPHONE NUMBER: (414) 252-3550

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	4,500	WASTE SOLVENT NOS	FLAMMABLE LIQUID	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	31,500
					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: Robert Heitzer
16. NAME (Print): ROBERT HEITZER
17. DATE SHIPPED: M D Y 8/13/82

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 HOLAND, ILLINOIS 60473
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: [signature]
25. NAME (Print): [illegible]
26. Date Accepted: M / D / Y 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: AMERICAN CHEMICAL
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 SOUTH COLFAX ROAD
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: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted: 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 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 7-50 GPM
8-13-82

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 132946

002839

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Milwaukee Solvents & Chemicals
2. EPA IDENTIFICATION NO.: WID023350192
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 14765 W. Bobolink Avenue
5. CITY, STATE, ZIP CODE: Menomonee Falls, WI 53051
6. TELEPHONE NUMBER: (414) 252-3550

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	4,500	Waste Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	31,500
					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: Robert Heitzer
16. NAME (Print): Robert Heitzer
17. DATE SHIPPED: M D Y 9/3/82

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 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: 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
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Road
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: [signature]
39. NAME (Print): FOUN FEE
40. Date Accepted: 09/03/82

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 205R T-50
GR M 9.3.82

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 132948

002840

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Milwaukee Solvents & Chemicals
2. EPA IDENTIFICATION NO.: WID023350192
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 14765 W. Bobolink Avenue
5. CITY, STATE, ZIP CODE: Menomonee Falls, WI 53051
6. TELEPHONE NUMBER: (414) 252-3550

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	4,500	Waste Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	FD03	31,500
					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: Robert Heitzer
16. NAME (Print): Robert Heitzer
17. DATE SHIPPED M D Y: 7/22/82

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 60473
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: [signature]
25. NAME (Print): [signature]
26. Date Accepted M D Y: 9/23/82

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
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Road
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: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted M D Y: 9/22/82

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 E T-50

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 132949

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Milwaukee Solvents & Chemicals
2. EPA IDENTIFICATION NO.: WID023350192
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 14765 W. Bobolink Avenue
5. CITY, STATE, ZIP CODE: Menomoene Falls, WI58051
6. TELEPHONE NUMBER: (414) 252-3550

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	4,500	Waste Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	31,500
					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: Robert Heitzer
16. NAME (Print): Robert Heitzer
17. DATE SHIPPED: M D Y 10/1/82

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 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): Ronald W Prosser
26. Date Accepted: M D Y 10/1/82

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
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Road
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: [signature]
39. NAME (Print): FDVHFEE
40. Date Accepted: M / D / Y 10/1/82

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 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

TO210RT-50
10/1/82

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 REV. 6-81

MANIFEST NUMBER: A 132956

002642

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Milwaukee Solvents & Chemicals
2. EPA IDENTIFICATION NO.: WID023350192
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 14765 W. Bobolink Avenue
5. CITY, STATE, ZIP CODE: Menomonee Falls, WI 53051
6. TELEPHONE NUMBER: (414) 252-3550

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	5,000	Waste Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	35,000
					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: Robert Heitzer
16. NAME (Print): Robert Heitzer
17. DATE SHIPPED M D Y: 10/15/82

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 60473
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:
25. NAME (Print):
26. Date Accepted M / D / Y: 10/15/82

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
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Road
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: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted: 10 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

HAZARDOUS WASTE FACILITY

T0210 ET-SO
GPM 10.15.82

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 REV. 6-81

MANIFEST NUMBER
A 132964

002843

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Milwaukee Solvents & Chemicals
2. EPA IDENTIFICATION NO.: WID023350192
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 14765 W. Bobolink Avenue
5. CITY, STATE, ZIP CODE: Menomonee Falls, Wisconsin 53051
6. TELEPHONE NUMBER: (414) 252-3550

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	4,500	Waste Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	31,500
					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: Robert Heitzer
16. NAME (Print): Robert Heitzer
17. DATE SHIPPED M D Y: 12/1/82

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 60473
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:
25. NAME (Print): [illegible]
26. Date Accepted M / D / Y: 12/1/82

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
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Road
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: [signature]
39. NAME (Print): F DUNFEE
40. Date Accepted: 12/1/82

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 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 2HRT-50 GRW
12-1-82

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 132965

002944

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Milwaukee Solvents & Chemicals
2. EPA IDENTIFICATION NO.: WID023350192
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 15765 West Bobolink Avenue
5. CITY, STATE, ZIP CODE: Menomonee Falls, WI 53051
6. TELEPHONE NUMBER: (414) 252-3550

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	4,500	Waste Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	31,500
					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: Robert Heitzer
16. NAME (Print): Robert Heitzer
17. DATE SHIPPED M D Y: 12/10/82

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ID ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
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: Michael P. Martin
25. NAME (Print): Michael Martin
26. Date Accepted: 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
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Road
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: J. Dunfee
39. NAME (Print): J. 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

TO 211 R T-50
GPM 12-10-82

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 132966

002645

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Milwaukee Solvents & Chemicals
2. EPA IDENTIFICATION NO.: WID023350192
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 14765 West Bobolink Avenue
5. CITY, STATE, ZIP CODE: Menomonee Falls, WI 53051
6. TELEPHONE NUMBER: (414) 252-3550

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	4,500	Waste Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	31,500
					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: Robert Heitzer
16. NAME (Print): Robert Heitzer
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 West 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: Michael Martin
25. NAME (Print): Michael Martin
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
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 South Colfax Road
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: Edward Duffee
39. NAME (Print):
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

HAZARDOUS WASTE FACILITY

To 118 R T-50
GLM 12-15-82

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

0323347
1 7

Authorization Number 997073
8 13

MORTON CHEMICAL (Company Name) | 2481 E. PRATT BLVD. (Address) | EPA I.D. NO. ILD025110834
ELK GROVE VILLAGE (City) | ILLINOIS (State) | 60007 (Zip)
0 3 1 4 4 0 0 0 1 1 G
14 Generator Number 24

WASTE HAULER(S)

MR. F BANKS (Hauler Name) | 201 W. 155TH STREET, SOUTH HOLLAND ILLINOIS 60473 (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 2 1
25 31

~~XXXXXXX~~ ILD 069506160 (Hauler Name) | (Hauler Address) | S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX (Address) | 9 1 8 0 8 9 0 2 Site Number
39 46
GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND 16360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS & ADHESIVES

WASTE PHASE: (LIQUID) (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
WASTE RESIN COMPOUND	(FLAMMABLE LIQUID)	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005500 (47–52)

(GALLONS) 2 CU. YDS. (Circle One) (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/27/82 (Authorized Signature) (F005)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE: 01 28 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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 01 29 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 124R T-636PM 1/28/82

SITE COPY - PART 3

002646

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

0323345 (1–7)

Authorization Number 99707 3 (8–13)

MORTON CHEMICAL (Company Name) | 2401 E. PRATT BLVD. EPA. I.D. NO. ILD025110834 (Address) | 0 3 1 4 4 0 0 0 1 1 G (14–24 Generator Number)

ELK GROVE VILLAGE (City) | ILLINOIS (State) | 60007 (Zip)

WASTE HAULER(S)

MR. FRANKS (Hauler Name) | 201 W. 155TH STREET, SOUTH HOLLAND ILLINOIS 60473 (Hauler Address) | 0 0 7 9 0 19 (S.W.H. Registration Number 25–31)

(Hauler Name) | (Hauler Address) | ILD 069506160 (S.W.H. Registration Number 32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX (Address) | 9 1 8 0 8 9 0 2 (39–46 Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND 16360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS & ADHESIVES

WASTE PHASE: (LIQUID) (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 RESIN COMPOUND	(FLAMMABLE LIQUID)
	UN 1993

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004000 (47–52)

1 GALLONS (Circle One) / 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: ~~1/27/82~~ 1/29/82 (Authorized Signature) (F005)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) ____ (Authorized Signature) DATE: 01/29/82 (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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

____ (Authorized Signature) DATE: 01/29/82 (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 125 KT-63 6RM 1/29/82

SITE COPY - PART 3

002847

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0371097 (1–7)

Authorization Number 997073 (8–13)

TO BE COMPLETED BY WASTE GENERATOR

MORTON CHEMICAL (Company Name) | 2401 E. PRATT BLVD. EPA. I.D. NO. ILD025110834 (Address) | 0 3 1 4 4 0 0 0 1 1 (14) Generator Number (24) G

ELK GROVE VILLAGE (City) | ILLINOIS (State) | 60007 (Zip)

WASTE HAULER(S)

MR. FRANKS (Hauler Name) | ~~XXX~~ 201 W. 155TH STREET, SOUTH HOLLAND (Hauler Address) ILLINOIS 60473 | S.W.H. Registration Number 0 0 7 9 0 0 9 (25–31)

(Hauler Name) | (Hauler Address) | ILD 069506160 S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX (Address) | 9 1 8 0 8 9 0 2 (39–46) Site Number

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND 16360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS & ADHESIVES

WASTE 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 RESIN COMPOUND

HAZARD CLASS: (FLAMMABLE LIQUID)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 005000 (47–52)

(1) GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/26/82

Alene Dipone (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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: 03 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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 3 26 82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: - PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

To 126 RT-63 6RM 3/26/82

SITE COPY - PART 3

002648

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

0371096
997073
Authorization Number

MORTON CHEMICAL | 2401 E. PRATT BLVD. EPA. I.D. NO. ILD025110834
(Company Name) | Address

ELK GROVE VILLAGE | ILLINOIS | 60007 | 0 3 1 4 4 0 0 0 1 1 G
City | State | Zip | Generator Number

WASTE HAULER(S)

MR. FRANKS | 201 W. 155TH STREET, SOUTH HOLLAND, ILLINOIS 60473 | S.W.H. Registration Number 0 0 7 9 0 2 9
Hauler Name | Hauler Address

ILD 069506160

Hauler Name | Hauler Address | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL | 420 S. COLFAX | 9 1 8 0 8 9 0 2
(Facility Name) | Address | Site Number

GRIFFITH | INDIANA | 46319 | IND 16360265
City | State | Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS & ADHESIVES | WASTE 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 RESIN COMPOUND | HAZARD CLASS: (FLAMMABLE LIQUID) | WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 (47–52) | 1 GALLONS (Circle One) / 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/25/82 | Elene Dixon
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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: 03 25 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:

Powles
(Authorized Signature) DATE: 3 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

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

To 125 RT-63 GRM
3-25-82

SITE COPY - PART 3

002849

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

0371099
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 8 9 9 7 0 7 3 13

MORTON CHEMICAL (Company Name) | 2401 E. PRATT BLVD. (Address) | EPA. I.D. NO. ILD025110834

ELK GROVE VILLAGE (City) | ILLINOIS (State) | 60007 (Zip)

0 3 1 4 4 0 0 0 1 1 G
14 Generator Number 24

WASTE HAULER(S)

MR. FRANKS (Hauler Name) | 201 W. 155TH STREET, SOUTH HOLLAND ILLINOIS 60473 (Hauler Address) | S.W.H. Registration Number 0079 [illegible] 25 31

ILD 069506160

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX (Address) | 9 1 8 0 8 9 0 2 39 Site Number 46

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS & ADHESIVES | WASTE PHASE: (LIQUID) (Liquid, Gascous, Solid)

F005

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE RESIN COMPOUND | HAZARD CLASS: (FLAMMABLE LIQUID) | WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

1 UN1993

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 47 52

1 GALLONS (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/11/82 | Steve Dixon (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

J. F. Schmidt (Authorized Signature) DATE: 05 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

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

To 124FT-63 GRM 5-11-82

SITE COPY - PART 3

002650

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0371100

Authorization Number 997073

MORTON CHEMICAL (Company Name) | 2401 E. PRATT BLVD. EPA. I.D. NO. ILD025110834 (Address) | 0 3 1 4 4 0 0 0 [redacted] 1 1 G Generator Number

ELK GROVE VILLAGE (City) | ILLINOIS (State) | 60007 (Zip)

WASTE HAULER(S)

MR. FRANKS (Hauler Name) | 201 W. 155TH STREET, SOUTH HOLLAND ILLINOIS 60473 (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 2 9

312-596-3377

(Hauler Name) | (Hauler Address) | ILD 069506160 S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

2159+4370

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX (Address) | 9 1 8 0 8 9 0 2 Site Number

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND 16360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS & ADHESIVES

WASTE PHASE: (LIQUID) (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
WASTE RESIN COMPOUND	(FLAMMABLE LIQUID)	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 (47–52)

1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

UN1993 F005

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/12/82

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE: 05 12 82 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 5 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

To 124K T-63 61RM 5-12-82

SITE COPY - PART 3

002851

0370702

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

...PLETED BY
WASTE GENERATOR

Authorization Number ~~9 9 1 2 1 9~~

MURNANE PAPER COMPANY — 607 NORTHWEST AVENUE
(Company Name) — Address

NORTHLAKE — ILLINOIS — 60164
City — State — Zip

0 3 1 4 7 1 0 0 0 9 G
Generator Number

ILD 005128541
IND 00

WASTE HAULER(S)

LANDGREBE MOTOR TRANSIT — 3009 S. SHIELDS, CHGO., IL.60616
Hauler Name — Hauler Address

S.W.H. Registration Number 9 8 4 2 8 2 4

ICC D 9 8 0
EPA #

Hauler Name — Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE — 420 S. COLFAX AVENUE
(Facility Name) — Address

9 1 8 0 8 9 0 2
Site Number

GRIFFITH — INDIANA — 46319
City — State — Zip

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID
NOS. UNA 1993

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
RESIDUE INK	F001
RESIDUE ALCOHOL	F003

WEIGHT FOR D.O.T. USE 9366 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 1 1 5 5

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-20-82 — Karl Friesl
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY 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 Philip L Lyons — DATE: 10 / 20 / 82
(Authorized Signature)

(2) _____ — DATE: / /
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Frank Price — DATE: 10 / 21 / 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

To 122 F T-63 GKM 10-21-82

SITE COPY - PART 3

002852

OMPLETED BY
E GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0370701

Authorization Number 991 219

MURNANE PAPER COMPANY (Company Name) | 607 NORTHWEST AVENUE (Address)

NORTHLAKE (City) | ILLINOIS (State) | 60164 (Zip)

031 47 10 009 G
Generator Number
ILD 005128541

WASTE HAULER(S)

LANDGREBE MOTOR TRANSIT (Hauler Name) | 3009 S. SHIELDS, CHGO.ILL. 60616 (Hauler Address) | S.W.H. Registration Number 9 84 282 4

Hauler Name | Hauler Address | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVENUE (Address) | 9 180 89 02 Site Number

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID NOS. UNA 1993

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
RESIDUE INK	F001
RESIDUE ALCOHOL	F003

WEIGHT FOR D.O.T. USE 5675 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 660

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: 1-5-82 Karl Friesl (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 1/5/82

(2) [signature] (Authorized Signature) DATE: 1/6/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: __/__/__

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* 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 K T-63 GRM 1/6/82

SITE COPY - PART 3

002853

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0502200 (1–7)

Authorization Number 997744 (8–13)

ANDREW Corp (Company Name) | 10500 W 153RD (Address) | 3123493300 (Phone Number) | 0312310003 G (14–24 Generator Number)

Orland Park (City) | IL (State) | 60462 (Zip) | ILD005172084 (EPA Number)

WASTE HAULER(S)

MR FRANK Inc (Hauler Name) | 201 W 155TH ST (Hauler Address) | S.W.H. Registration Number 0079019 (25–31)

3125963377 (Phone Number) | ILD069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 S. Colfax (Address) | 91808902 (39–46 Site Number)

Griffith | Ind (State) | 46319 (Zip) | (312)9244370 (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39–46 Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 1-1-1 Trichloroethane WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Liquid	NON FLAMMABLE	UN2831	F001

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003500 (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 C. Ted Nelson (Authorized Signature) DATE: 7-1-82

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: 07/01/82 (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: 7/1/82 (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 122 TT-63 6PM 7.1.82

002654

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 WASTE GENERATOR

0502205 (1–7)

Authorization Number 997744 (8–13)

Andrew Corp (Company Name) | 10500 W 153rd (Address) | 3123493300 (Phone Number) | 03123100036 (14–24 Generator Number)

Orland Park (City) | IL (State) | 60462 (Zip) | ILD005177084 (EPA Number)

WASTE HAULER(S)

MR Frank Inc (Hauler Name) | 201 W 155th ST (Hauler Address) | S.W.H. Registration Number 0079026 (25–31)

3125963322 (Phone Number) | ILD069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 Colfax (Address) | 91808902 (39–46 Site Number)

Griffith (City) | Ind (State) | 46319 (Zip) | 3129244370 (Phone Number) | IND001636265 (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: 1-1-1 Trichloroethane WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Liquid	NONFLAMMABLE	UN2831	F001

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002145 (47–52) (1 GALLONS / 2 CU. YDS. (Circle One)) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION C. Ted Nelson (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) Michael DeMarton (Authorized Signature) DATE: 12/08/82 (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:

A. Mueller (Authorized Signature) DATE: 12/06/82 (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 1 BRT-63 GLM 12.6.82

002655

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0435911 (1–7)

Authorization Number [redacted] (8–13)

ARVEY CORP (Company Name) | 3500 N. KIMBALL (Address) | 3124631400 (Phone Number) | 0316000459 G (14 Generator Number 24)

CHICAGO (City) | ILL (State) | 60618 (Zip) | ILD000810515 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | 13742 KENTON (Hauler Address) | CRESTWOOD IL | 3123858440 (Phone Number) | S.W.H. Registration Number 0024002 (25–31) | ILT000646810 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38) | (Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | (Address) | 91808902 (39 Site Number 46)

GRIFFITH (City) | IND (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39 Site Number 46)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: SPENT SOLVENTS + ADHESIVES | WASTE PHASE: LIQUID (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	FLAM. LIQUIDS NOS	UN 1193 / UN 1173 9 0	F003

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 00390 (47–52) 1 GALLONS 2 CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 71 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 Frank J Kaley (Authorized Signature) DATE: 12-21-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 12/21/82 (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

Michael E Burke (Authorized Signature) DATE 12/21/82 (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

On dock 12.21.82 To 204 RT-50 GKM 12.30.82

002856

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0335424
1 7

Authorization Number 994 109
8 13

ASTRO COLOR LAB (Company Name) — 61 W. ERIE ST (Address)

CHICAGO (City) — ILL. (State) — 60610 (Zip)

0316 000 461 G
14 Generator Number 24

WASTE HAULER(S)

JAYAR HOAG CHEMCO (Hauler Name) — 8620 FERRIS AVE (Hauler Address) MORTON GROVE ILL

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

AMER CHEM SERV (Facility Name) — 420 COLFAX AVE (Address) — 9180892 (Site Number)
39 46

GRIFFITH (City) — IND (State) — Zip — IN0016360765

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 1-1-1- TRICHLOROTHANE

WASTE 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: UN 2831

WEIGHT FOR D.O.T. USE 2400 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 220
47 52

GALLONS (Circle One) 2 CU. YDS.
53

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-22-82 — Bill Walsh Jr (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Thomas L Holian (Authorized Signature) — DATE: 1/27/82
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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[illegible] (Authorized Signature) — DATE: 2/11/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

On dock 2/11/82 GRM
To # 1 Still T-63 GRM 4.1.82

SITE COPY - PART

002857

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

0335425

SPECIAL WASTE HAULING MANIFEST

Authorization Number 994109

ASTRO COLOR LAB — 61 W. ERIE ST
(Company Name) — Address

CHICAGO — ILL — 60610
City — State — Zip

0316 000 461 G
Generator Number

JAYAR HOAG CHEM CO — 8620 FERRIS AVE
Hauler Name — WASTE HAULER(S) Hauler Address

MORTON GROVE ILL.

S.W.H. Registration Number 0247001

Hauler Name — Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. SERV. — 420 COLFAX AVE
(Facility Name) — Address

GRIFFITH — IND. —
City — State — Zip

41808902
Site Number

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 1-1-1- TRICHLOROTHENE

WASTE 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: UN 2831

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

(GALLONS) (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS ~~BULK TANKER~~ (OPEN TRUCK) OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-23-82

Bill Walsh Jr
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Thomas R. Nolan
(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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Chris Mayer
(Authorized Signature) DATE: 4/2/82

COMMENTS OR SPECIAL INSTRUCTIONS:

ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — 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 4/2/82 6AM
To 122 T-T-62 6AM 5-11-82

002858

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

033

ASTRO COLOR LAB (Company Name) — 61 W. ERIE ST (Address) — Authorization Number 994

CHICAGO (City) — ILL. (State) — 60610 (Zip) — 0316 000 46 (Generator Number)

WASTE HAULER(S)

JAYAR-HOAG CHEM CO (Hauler Name) — 8620 FERRIS AVE (Hauler Address) — S.W.H. Registration Number 02 470

MORTON GROVE ILL

Hauler Name — Hauler Address — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. SERV. (Facility Name) — 420 COLFAX AVE (Address) — 91808902 (Site Number)

GRIFFITH (City) — IND. (State) — Zip — IND 016 36026

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 1-1-1- TRICHLOROTHENE

WASTE 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: UN 2831

WEIGHT FOR D.O.T. USE 1800 LBS TONS (circ

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 165 (47–52)

1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-15-82 — Bill Walsh Jr (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Thomas Holian (Authorized Signature) — DATE: 4/15/82 (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 AT THE SITE SPECIFIED ABOVE:

HAZARDOUS WASTE SUBJECT TO FEE YES / NO X

DATE: 4/19/82 (60–65)

NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8[illegible]

T - 5 IEPA PART - 6 GENERATOR

SITE COPY - PAR

002859

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

0335427

SPECIAL WASTE HAULING MANIFEST

Authorization Number 994 109

ASTRO COLOR LAB (Company Name) — 61 N. ERIE ST (Address)

CHICAGO (City) — ILL — 60610

0316 000461 (Generator Number)

JAYAL HOAG CHEM CO (Hauler Name) — 8620 [illegible] Ave. MORTON GROVE ILL — S.W.H. Registration Number 0247001

Hauler Name — S.W.H. Registration Number

AMER. CHEM. SERV (Facility Name) — 91808902

GRIFFITH (City) — IND. OIL 360 26[illegible]

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: [illegible] — WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE [illegible] IMMEDIATELY BELOW.

SHIPPING DESCRIPTION: STEEL DRUM — WEIGHT FOR D.O.T. USE: 1800 LBS (Circle One)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE [illegible] (Circle One)

METHOD OF SHIPMENT (Circle One) DRUMS [illegible]

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS [illegible] IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE [illegible]

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION.

DATE: 5-19-84 — [signature] Jr.

WASTE HAULER

I HEREBY CERTIFY 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: 05/17/[illegible]

(2) (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ___

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

[signature] (Authorized Signature) — DATE: 5/25/8[illegible]

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 — OUTSIDE ILLINOIS: 800 / 424-[illegible]

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

HAULER COPY - PART 4

002860

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0335428

Authorization Number [illegible]

ASTRO COLOR LAB (Company Name) — 61 W. ERIE ST (Address) — PHONE #

CHICAGO (City) — ILL. (State) — 60610 (Zip)

0316 000 461 (Generator Number) G

WASTE HAULER(S)

JAYAR-HOAG CHEM (Hauler Name) — CO 8620 FERRIS AV (Hauler Address) — MORTON GROVE, ILL — S.W.H. Registration Number 0247001

Hauler Name — Hauler Address — PHONE — FED I.D. # — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER CHEM SER. (Facility Name) — 420 COLFAX AVE (Address) — 3127683400 — 91808902 (Site Number)

GRIFFITH (City) — IND. (State) — (Zip) — IND 016 360 265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 1-1-1- TRICHLOROTHENE

WASTE 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: UN 2831

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 TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-29-82 — Bill Walsh Jr (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Thomas Holian (Authorized Signature) — DATE: 7/29/82 (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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Frank Price (Authorized Signature) — DATE: 7/30/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

On dock ~~730-82 CRM~~
To IAKT-63 CRM 8-7-82

SITE COPY - PART 3

002861

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0335427 (1–7)

Authorization Number 994109 (8–13)

ASTRO COLOR LAB (Company Name) | 61 W. ERIE ST (Address)
CHICAGO (City) | ILL (State) | 60610 (Zip)

0316 000461 G (14–24) Generator Number

WASTE HAULER(S)

JAYAR HOAG CHEM CO (Hauler Name) | 8620 FERRIS AVE (Hauler Address)
MORTON GROVE ILL

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

AMER. CHEM. SERV (Facility Name) | 420 COLFAX AVE (Address)
GRIFFITH (City) | IND, (State) | (Zip)

9180902 (39–46) Site Number

IND. 016 360 265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 1-1-1 TRICHLOROTHENE

WASTE 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: UN 2831

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, 2 CU. YDS. (Circle One)) (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK (OPEN TRUCK) OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-19-82 | Bill Walsh Jr (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) _____ (Authorized Signature) DATE: 05/19/82 (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: 5/28/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

On dock 5-25-82-12M To 1 13K1 T-63 SITE COPY - PART 3

002662

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0586809 (1–7)

Authorization Number ~~994109~~ (8–13)

ASTRO COLOR LTB (Company Name) | 61 W ERIE ST (Address) | 312-280 5500 (Phone Number) | 0316 000 461 (14–24 Generator Number) G

CHICAGO (City) | ILL. (State) | 60610 (Zip) | EPA Number

WASTE HAULER(S)

JAYAR HOAG CHEM CO (Hauler Name) | 8620 FERRIS AV (Hauler Address) MORTON GROVE IL. | 312-965-6650 (Phone Number) | S.W.H. Registration Number 0247001 (25–31) | EPA Number

Hauler Name | Hauler Address | Phone Number | S.W.H. Registration Number (32–38) | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. SER. (Facility Name) | 420 COLFAX AVE (Address) | 9180902 (39–46 Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | 219-924-4370 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 1-1-1- TRICHLOROTHANE | WASTE 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: UN 2831 | UN or NA Number | EPA HW Number F001

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 2 CU. YDS. (Circle One)) (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 Bill Walsh Jr (Authorized Signature) | DATE: 9-16-82

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 9/16/82 (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

[signature] (Authorized Signature) | DATE: 9/20/82 (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 9.20.82 To IBK 10.6.82 T-63 GRM

002663

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0586810

Authorization Number

ASTRO COLOR LAB (Company Name) | 61 W. ERIE ST. (Address) | 312-280-5500 (Phone Number) | 0316 000461 (Generator Number)

CHICAGO (City) | ILL (State) | 60610 (Zip) | EPA Number

WASTE HAULER(S)

JAYAR HOAG CHEM (Hauler Name) | 8620 FERRIS AV. (Hauler Address) | S.W.H. Registration Number 0247001

MORTON GROVE IL | 312-965-6650 (Phone Number) | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER CHEM SER. (Facility Name) | 420 COLFAX AVE (Address) | 91808902 (Site Number)

GRIFFITH (City) | IND. (State) | 14639 (Zip) | 219-924-4370 (Phone Number) | IND 016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 1-1-1- TRICHLOROTHENE WASTE 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: UN 2831 | UN or NA Number | F001 (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 | 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 3 Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Bill Walsh Jr (Authorized Signature) DATE: 10-12-82

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) Thomas Holian (Authorized Signature) DATE 10/13/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

F Dunfee (Authorized Signature) DATE 10/20/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 10.20.82 To 118 KT-63 GM 11.23.8

002864

ETED BY
ATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0586811
1 7

Authorization Number 8 13

ASTRO COLOR LAB (Company Name) | 61 W. ERIE ST. (Address) | 312-280-5500 (Phone Number) | 0316 000461 (Generator Number) 14 24 G

CHICAGO (City) | ILL. (State) | 60610 (Zip) | EPA Number

WASTE HAULER(S)

JAYAR HOAG CHEM. (Hauler Name) | 8620 FERRIS AV. (Hauler Address) MORTON GROVE IL. | 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

AMER. CHEM. SER. (Facility Name) | 420 COLFAX AVE (Address) | 91808902 (Site Number) 39 46

GRIFFITH (City) | IND. (State) | 46319 (Zip) | 219-924-4370 (Phone Number) | IND016360205 (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: 1-1-1 TRICHLOROTHENE WASTE 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: UN 2831

UN or NA Number | F001 EPA HW Number

WEIGHT FOR D.O.T. USE 1200 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 110 47 52 1 GALLONS (Circle One) 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One) (DRUMS 2 Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Bill Walsh Jr (Authorized Signature) DATE: 11-9-82

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) Thomas Holian (Authorized Signature) DATE: 11 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 WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Frank James Price (Authorized Signature) DATE: 11 / 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. # 3

SITE COPY - PART 3

On dock 11.17.82
To 118 T-63 11.23.82 GRM

002665

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0586812 (1–7)

Authorization Number [redacted] (8–13)

ASTRO COLOR LAB (Company Name) | 61 W. ERIE ST (Address) | 312-280-5500 (Phone Number) | 0316 000 461 (14 Generator Number 24) G

CHICAGO (City) | ILL (State) | 60610 (Zip) | EPA Number

WASTE HAULER(S)

JAYAR HOAG CHEM. (Hauler Name) | 8620 FERRIS AVE MORTON GROVE IL (Hauler Address) | 312-965-6650 (Phone Number) | S.W.H. Registration Number 0247001 (25–31) | EPA Number

Hauler Name | Hauler Address | Phone Number | S.W.H. Registration Number (32–38) | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM SER. (Facility Name) | 420 COLFAX AVE (Address) | 918 08902 (39 Site Number 46)

GRIFFITH (City) | IND (State) | 46319 (Zip) | 219-924-4370 (Phone Number) | IND 016360005 (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: 1-1-1 TRICHLOROTHENE | WASTE 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: UN 2831 | UN or NA Number | F001 EPA HW Number

WEIGHT FOR D.O.T. USE 1200 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 110 (47–52) | (GALLONS (Circle One) 2 CU. YDS.) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 2 Number) | TANK TRUCK | (OPEN TRUCK) | OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Dill Walsh (Authorized Signature) | DATE: 11-24-82

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) Thomas Golan (Authorized Signature) | DATE: 11 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:

[illegible] (Authorized Signature) | DATE: 12 20 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 12-20-82 To IAF.T-63 EPA 1.10.83

002866

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0482302

Authorization Number 921543

B&F SPECIALTIES (Company Name) 185 LIVELY BLVD (Address) 312 437 2772 (Phone Number) 031 440 0098 (Generator Number) G

ELK GROVE VILLAGE (City) IL (State) 60007 (Zip) _____ (EPA Number)

WASTE HAULER(S)

LAND & REBE MOTOR (Hauler Name) Valpo. Ind (Hauler Address) ICC2930 (S.W.H. Registration Number) 842-4181 (Phone Number) IND009842824 (EPA Number)

LAND & REBE MOTOR (Hauler Name) VALPO. IND (Hauler Address) _____ (S.W.H. Registration Number) _____ (Phone Number) _____ (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) 420 S. COLFAX AVE (Address) 918 08902 (Site Number)

GRIFFITH (City) IN (State) 46319 (Zip) 2199244370 (Phone Number) IND016360265 (EPA Number)

_____ (Alternate (Facility Name)) _____ (Address) _____ (Site Number)

_____ (City) _____ (State) _____ (Zip) _____ (Phone Number) _____ (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS HAZARD CLASS: FLAMMABLE UN1993 (UN or NA Number) F003 (EPA HW Number)

WEIGHT FOR D.O.T. USE 1100 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 150 (1 GALLONS (Circle One) 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One) (DRUMS 3 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 6/10/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) IND. 009-842-824 DATE: 6/19/82

(2) [signature] (Authorized Signature) ICC-2980 PRE-PAID DATE: 6/18/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 6/11/82

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

On dock 6.11.82
TO210 TK T-50 GRM 6.18.81

002867

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0183433

WASTE GENERATOR

Authorization Number 998043

Bagcraft Corporation (Company Name) — 3500 W 43rd Street (Address)

Chicago (City) — Illinois (State) — 60632 (Zip)

0316000410 (Generator Number)

FedID No. ILD005071253

WASTE HAULER(S)

(1) Mr Frank Inc (Hauler Name) — 201 W 155th Street (Hauler Address) — S.W.H. Registration Number 00791001

(2) _____ (Hauler Name) _____ (Hauler Address) — S.W.H. Registration Number ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — 420 S Colfax (Address) — 91809702 (Site Number)

Griffith (City) — Indiana (State) — 46319 (Zip) — IWD 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Waste Ink + Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid NOS, UN-1993

HAZARD CLASS: Flammable

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/19/82 — Ted Iverson (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3,000 (1 GALLONS / 2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Mike [signature] (Authorized Signature) — DATE: 02 19 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:

BDB Mauck (Authorized Signature) — DATE: 2 19 82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

To 210K T-50 GRM 2/19/82

002868

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0335441

Authorization Number 998043

Bagcraft Corporation (Company Name) — 3500 W 43rd St (Address)

Chicago (City) — Illinois (State) — 60632 (Zip)

0316000410 (Generator Number) G

FedID ILD 005071253

WASTE HAULER(S)

Mr Frank Inc (Hauler Name) — 201 W 155th Street (Hauler Address) — 3125963377 — S.W.H. Registration Number 0079/001

ILD 069506160

Hauler Name — Hauler Address — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — 420 S Culfax (Address) — 3127683400 — 91808902 (Site Number)

Griffith (City) — Indiana (State) — 46319 (Zip) — IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Ink and Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: FS03

SHIPPING DESCRIPTION: Flammable Liquid NOS. UN 1993

HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003,000

1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/6/82 — [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: 5 6 82

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 5 6 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

T0112F T-63 GRM 5-6-82

SITE COPY - PART 3

002869

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0183434

WASTE GENERATOR

Authorization Number 998043

Bogcraft Corporation (Company Name) — 3900 W 43rd Street (Address)

0316 000410 G (Generator Number)

City — State — Zip

FCOID No. ILD005021253

WASTE HAULER(S)

312-576-3377

(1) Mr Frank Inc (Hauler Name) — 201 W 155th Street (Hauler Address) — S.W.H. Registration Number 0079/017

ILD 069506160

(2) Hauler Name — Hauler Address — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

219-924-4370

American Chemical Service (Facility Name) — 4205 Culfax (Address) — 91808902 (Site Number)

Griffith (City) — Indiana (State) — 46319 (Zip)

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Ink + Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid N.O.S. UN 1993

HAZARD CLASS: Flammable

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-30-82 — Robert Speight (Authorized Signature) — F005

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 703000 — 1 GALLONS (Circle One) / 2 CU. YDS. — 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) Ronald B. [illegible] (Authorized Signature) — DATE: 4 30 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:

[signature] (Authorized Signature) — DATE: 4 30 82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1: GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

SITE COPY - PART 3

To 112 TK T-63 GRM 4-30-82

002870

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 998043

Bagcraft Corporation (Company Name) | 3900 W 43rd Street (Address)
Chicago (City) | Illinois (State) | 60632 (Zip)
0316000410 (Generator Number) G

WASTE HAULER(S)

Mr Frank Inc (Hauler Name) | 201 W 155th Street (Hauler Address) | S.W.H. Registration Number 0079/001
312-596-3377 ILD 069506160
(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE 317-7683400

American Chemical Service (Facility Name) | 4205 Col Fax (Address) | 91808902 (Site Number)
Gr. Hill (City) | Indiana (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste 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: F003

SHIPPING DESCRIPTION: Flammable Liquid N.O.S. Flammable | HAZARD CLASS:
UN 1993

WEIGHT FOR D.O.T. USE 24000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 3000 (1 GALLONS (Circle One) 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/7/82 (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: 7/7/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 7/7/82

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 211F T-50 GRM 7-7-82

SITE COPY - PART 3

002871

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0335443
1 7

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number ____ 8 ____ 13

Bagcraft Corporation (Company Name) | 3900 W 43rd Street (Address) | 0316000410 (Generator Number) 14 G 24
Chicago (City) | Illinois (State) | 60632 (Zip) | Fed ID No ILD 005071253

WASTE HAULER(S)

Mr Frank Inc (Hauler Name) | 201 W 155th St (Hauler Address) | S.W.H. Registration Number 0079/001 (25 31)
(312) 596 3377 | ILD 069506160

Hauler Name | Hauler Address | S.W.H. Registration Number ____ (32 38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE (312) 768-3400

American Chemical Service (Facility Name) | 4205 Colfax (Address) | 91808502 (39 Site Number 46)
Griffin (City) | Indiana (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Ink + Solvent | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid NOS, UN 1993 | HAZARD CLASS: Flammable | WEIGHT FOR D.O.T. USE 24 000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 3000 (47 52) | 1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/25/82 | (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: 8/25/82 (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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

____ (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

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

To 210 T-50 6PM 8-25-82

SITE COPY - PART 3
002872

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0265513

Authorization Number 000000

Bagcraft Corporation (Company Name) — 3900 W 43rd Street (Address)

Chicago (City) — Illinois (State) — 60632 (Zip)

0316000410 (Generator Number)

Fed ID NO ILD 005071255

WASTE HAULER(S)

McFrank Inc. (Hauler Name) — 201 W 155th Street (Hauler Address) — S.W.H. Registration Number 0079/001

(312) 596 3377 — ILD 069506160

Hauler Name — Hauler Address — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — 4205 Colfax (Address) — (312) 768-3400 — 91808902 (Site Number)

Griffith (City) — Indiana (State) — 46319 (Zip) — IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Tank + Solvent — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: F003

SHIPPING DESCRIPTION: Flammable Liquid Nos. UN1993 — HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE 24000 LBS/TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 3000 — 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/26/82 — [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: 10 26 82

(2) (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) — DATE: 10 26 82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

TO 122 KT-63 GKM 10.26.82

SITE COPY - PART 3

002873

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0306406 (1–7)

Authorization Number 00000 (8–13)

Baycraft Corporation (Company Name) | 3900 W 43rd Street (Address) | Chicago (City) | Illinois (State) | 60632 (Zip)

0316000410 (14–24) Generator Number G

FID No ILD005071253

WASTE HAULER(S)

American Chemical Service (Hauler Name) | 420 S Colfax (Hauler Address) | S.W.H. Registration Number 0024-001 (25–31)

STRAND TRUCKING (Hauler Name) | 312-385-8440 | 13642 S. Kenton (Hauler Address) | Caldwood | IND016360265 | S.W.H. Registration Number IL 0006468 (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S Colfax (Address) | (768-3400) | 91808902 (39–40 Site Number)

Gr. Ff. Pk (City) | Indiana (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Flammable Ink Waste | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Flammable Liquid NOS, UN 1993	Flammable	12 500 LBS. TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 1375 00 (47–52) GALLONS (Circle One) 2 CU. YDS. 1 (53)

25

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: 12/3/02 (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Jim Batten (Authorized Signature) DATE: 12 31 02 (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 Davis (Authorized Signature) DATE: 1 2 13 03 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

On dock 12-3-02
To 206 T-50 GPM 12-3-02

SITE COPY - PART 3

002874

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0265514 (1–7)

Authorization Number (8–13)

Bagcraft Corporation (Company Name) | 3500 W 43rd Street (Address) | 0316000410 (14) Generator Number (24)
Chicago (City) | Illinois (State) | 60632 (Zip) | Fed ID No ILD005072253

WASTE HAULER(S)

Mc Frank Inc (Hauler Name) | 201 W 55th Street (Hauler Address) | S.W.H. Registration Number 0079 (25–31)
(312) 596 3337
Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE (219) 924 4370

American Chemical Service (Facility Name) | 420 S Colfax (Address) | 91808902 (39–46) Site Number
Griffith (City) | Indiana (State) | 46319 (Zip) | IND 016360695

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Ink + Solvent | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liq. NOS. | HAZARD CLASS: Flammable | WEIGHT FOR D.O.T. USE 25000 (LBS) TONS (circle one)

UN 1993 | D001

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 3000 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) DRUMS | TANK TRUCK | OPEN TRUCK | OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12/14/82 | (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: 12/14/82

(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:

(Authorized Signature) DATE: 12/14/82 (58)

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

To 210 KT-50 61RM 12-14-82

SITE COPY - PART 3

002875

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0416926

Authorization Number

Bee Chemical Co. (Company Name) | 500 State St (Address) | 3127580500 (Phone Number) | 0310450010 (Generator Number) G

City | State | Zip | ILD089828016 (EPA Number)

WASTE HAULER(S)

Mr. Franks Inc (Hauler Name) | 201 W. 155th St. (Hauler Address) | S.W.H. Registration Number 0079029

South 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 (Facility Name) | P.O. Box 190 (Address) | 3127653480 | 91808902 (Site Number)

Griffith (City) | Ind. (State) | 46319 (Zip) | Phone Number | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Dirty 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: Tank Truck | HAZARD CLASS: Flammable | UN1993 (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: 004700 | 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION | X Gary Stout (Authorized Signature) | DATE: 12/20/82

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) Ronald Bridgewater (Authorized Signature) | DATE: 12/20/82

(2) _____ (Authorized Signature) | DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) | DATE: 12/20/82

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 6PM 12.20.82

002876

BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541407 (1–7)

Authorization Number 997227 (8–13)

BEE CHEMICAL CO. (Company Name) | 2700 E. 170th St. (Address) | 312-474-7000 (Phone Number) | 0 3 1 1 5 9 0 0 0 4 G (14–24 Generator Number)

LANSING, (City) | IL (State) | 60438 (Zip) | I L D 0 0 5 2 2 9 4 4 8 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | SOUTH HOLLAND, IL (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 8 (25–31)

312-596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. Colfax Ave. (Address) | 9 1 8 0 8 9 0 2 (39–46 Site Number)

GRIFFITH (City) | IN (State) | 46319 (Zip) | 219-769-3400 (Phone Number) | IND 0 1 6 3 6 0 2 6 5 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
FLAMMABLE	1	U N 1 9 9 3	

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004000 (47–52) (1 GALLONS (Circle One) / 2 CU. YDS) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Russell Parish (Authorized Signature) DATE: 1-6-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry (Authorized Signature) DATE: 01 06 82 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO_____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature) DATE: 1 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

To 109R T-636RM 1/6/82

002677

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541409

Authorization Number 997227

TO BE COMPLETED BY WASTE GENERATOR

BEE CHEMICAL COMPANY	2700 E. 170th St.	312-474-7000	0311590004 LLB G
(Company Name)	Address	Phone Number	Generator Number
LANSING,	IL 60438		ILD005229448
City	State Zip		EPA Number

WASTE HAULER(S)

MR. FRANK, INC.	SOUTH HOLLAND, IL		S.W.H. Registration Number 0079018
Hauler Name	Hauler Address	312-59603377 Phone Number	ILD069506616 EPA Number
			S.W.H. Registration Number
Hauler Name	Hauler Address	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL	420 S. Colfax Avenue				91808902 Site Number
(Facility Name)	Address				
Griffith,	IN	46319	219-769-3400	IND 016360265	
City	State	Zip	Phone Number	EPA Number	
Alternate (Facility Name)	Address				Site Number
City	State	Zip	Phone Number	EPA Number	

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Flammable	1	UN1993	

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 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 J Bee Lee (Authorized Signature) DATE: 1-22-82

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: 1/22/82

(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: 1/22/82

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 109K T-63 GRM 1/22/82

002678

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541408 (1–7)

Authorization Number 997227 (8–13)

Bee Chemical (Company Name) | 2700 E. 170st (Address) | 312 474-7000 (Phone Number) | 0311590004 (14 Generator Number 24)

Lansing (City) | ILL. (State) | 60438 (Zip) | ILD005229448 (EPA Number)

WASTE HAULER(S)

MR FRANK, INC. (Hauler Name) | South Holland ILL. (Hauler Address) | S.W.H. Registration Number 0079018 (25–31)

3125463377 (Phone Number) | ILD064506460 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 S. Colfax (Address) | 9180890 (39 Site Number 46)

Griffith (City) | IND. (State) | 46319 (Zip) | 2197693460 (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: Flammable Paint Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable | HAZARD CLASS. 1 | UN1993 (UN or NA Number) | EPA HW Number

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 4500 (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 J. Bell (Authorized Signature) | DATE: 1-15-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry (Authorized Signature) | DATE 01/15/82 (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:

T Dunkle (Authorized Signature) | DATE: 1/15/82 (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 109F T-63 GRM 1/15/82

002879

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541410 (1–7)

Authorization Number 9 9 7 2 2 7 (8–13)

BEE CHEMICAL COMPANY (Company Name) | 2700 E. 170th St. (Address) | 312-474-7000 (Phone Number) | 0 3 1 1 5 0 9 0 0 0 4 G (14–24 Generator Number)

LANSING, (City) | IL (State) | 60438 (Zip) | I L D 0 0 5 2 2 9 4 4 8 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | SOUTH HOLLAND, IL (Hauler Address) | S.W.H. Registration Number 0 0 79 044 (25–31)

312-596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. Colfax Avenue (Address) | 9 1 8 0 8 9 0 2 (39–46 Site Number)

GRIFFITH, (City) | IN (State) | 46319 (Zip) | 219-769-3400 (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: Flammable Paint Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable | HAZARD CLASS: 1 | U N 1 9 9 3 (UN or NA Number) | EPA HW Number

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 (47–52) | 1 GALLONS (Circle One) / 2 CU. YDS. (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 Russell Parish (Authorized Signature) | DATE: 2-1-82

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) Miguel Rivera (Authorized Signature) | DATE: 02/04/82 (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 Meuck (Authorized Signature) | DATE: 02/04/82 (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 109 R T-63 GRM 2/1/82

002680

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541411

Authorization Number 89722 7

BEE CHEMICAL COMPANY (Company Name) | 2700 E. 170th St. (Address) | 312-474-7000 (Phone Number) | 0 3 1 1 5 9 0 0 0 4 G (Generator Number)

LANSING, (City) | IL (State) | 60438 (Zip) | I L D 0 0 5 2 2 9 4 4 8 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | SOUTH HOLLAND, IL (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 9

312-596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 0 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. Colfax Avenue (Address) | 9 1 8 0 8 9 0 2 (Site Number)

GRIFFITH (City) | IN (State) | 46319 (Zip) | 219-769-3400 (Phone Number) | IND0 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: Flammable Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable | HAZARD CLASS: 1 | UN 1 9 9 3 (UN or NA Number) | (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 0 0 3 0 0 6 | 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 J. Berville (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) Tom Berry (Authorized Signature) DATE: 02/05/82

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

BJB Mauck (Authorized Signature) DATE: 02/05/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 109 K T-63 6PM 2/5/82

002681

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

0541415 (1–7)

Authorization Number 9 9 7 2 2 7 (8–13)

BEE CHEMICAL CO. (Company Name) | 2700 E 170th ST. (Address) | 312-474-7000 (Phone Number) | 0 3 1 1 5 9 0 0 0 4 G (14 Generator Number 24)

LANSING (City) | IL (State) | 60438 (Zip) | XX I L D 0 0 5 2 2 9 4 4 8 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | SOUTH HOLLAND, IL (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 1 8 (25–31)

312-596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 (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) | IN (State) | 46309 (Zip) | 219-769-3400 (Phone Number) | IND 0 1 6 3 6 0 2 6 5 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABBE Paint Solvent WASTE PHASE: KM LIQUID (Liquid. Gaseous. Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable | HAZARD CLASS: 1 | U N 1 9 9 3 (UN or NA Number) | EPA HW Number

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 3 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 J. Bemis (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) _____ (Authorized Signature) DATE: 02/23/82 (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

_____ (Authorized Signature) DATE: 2/23/82 (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 109R T-63 6RM 2/23/82

002882

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541414

Authorization Number 99 7 2 2 7

BEE CHEMICAL COMPANY (Company Name) | 2700 E. 170th St. (Address) | 312-474-7000 (Phone Number) | 0 3 1 1 5 9 0 0 0 4 G (Generator Number)

Lansing (City) | IL (State) | 60438 (Zip) | I L D 0 0 5 2 2 9 4 4 8 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | South Holland, IL (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 1

312-596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICN CHEMICAL (Facility Name) | 420 S. Colfax Ave. (Address) | 9 1 8 0 8 9 0 2 (Site Number)

GRIFFITH (City) | IN (State) | 46319 (Zip) | 219-769-3400 (Phone Number) | IND 0 1 6 3 6 0 2 6 5 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable

HAZARD CLASS: 1

U N 1 9 9 3 (UN or NA Number)

(EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 3,000 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 J. Bauldo (Authorized Signature) DATE: 2-18-82

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) Mike Ragan (Authorized Signature) DATE: 02/18/82

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

Bob Mavel (Authorized Signature) DATE 2/18/82

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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 109K T-63 6RM 2/18/82

002683

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541412

Authorization Number 997227

(Company Name)	Address	Phone Number	Generator Number
Bee Chem. Co.	2700 E. 170th St.	312-474-7000	0311590004 G

City	State	Zip	EPA Number
LANSING	IL	60438	ILD005229448

WASTE HAULER(S)

Hauler Name	Hauler Address	Phone Number	S.W.H. Registration Number / EPA Number
MR. FRANK, INC.	SOUTH HOLLAND, IL	312-596-3377	0079/021 / ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number
AMERICAN CHEMICAL	420 S. Colfax Avenue	91808902

City	State	Zip	Phone Number	EPA Number
GRIFFITH	IN	46319	219-769-3400	IND016360265

Alternate (Facility Name)	Address	Site Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable

HAZARD CLASS: 1

UN 1993 (UN or NA Number)

EPA HW Number

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000 (1 GALLONS (Circle One) 2 CU. YDS.) 1

METHOD OF SHIPMENT (Circle One) (DRUMS_____) Number TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 2-12-82

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) Ronald Bridgewater (Authorized Signature) DATE: 2/12/82

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE 2/12/82

COMMENTS OR SPECIAL INSTRUCTIONS: [illegible]

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 109 K T-63 GRM 2/12/82

002884

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541413 (1–7)

Authorization Number 9 9 7 2 2 7 (8–13)

BEE CHEMICAL CO. (Company Name) | 2700 E. 170th ST. (Address) | 312-474-8000 (Phone Number)
0 3 1 1 5 9 0 0 0 4 G (14 Generator Number 24)

LANSING, (City) | IL (State) | 60438 (Zip)
I L D 0 0 5 2 2 9 4 4 8 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | SOUTH HOLLAND, IL (Hauler Address)
S.W.H Registration Number 0 0 7 9 (25–31)
312-596-3377 (Phone Number)
I L D 0 6 9 5 0 6 1 6 (EPA Number)

(Hauler Name) | (Hauler Address)
S.W.H. Registration Number (32–38)
(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. Colfax Avenue (Address)
9 1 8 0 8 9 0 2 (39 Site Number 46)

GRIFFITH (City) | IN (State) | 46319 (Zip) | 219-769-3400 (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: Flammable Paint. WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable | HAZARD CLASS: 1

U N 1 2 6 3 (UN or NA Number) | (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 2 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 Russell Paint (Authorized Signature) DATE 2-17-82

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) Tom Burry (Authorized Signature) DATE: 02/17/82 (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.

BOB MAUCK (Authorized Signature) DATE 02/17/82 (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 211K T-50 6RM 2/17/82

002685

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541417

Authorization Number 997227

BEE CHEMICAL CO. (Company Name) | 2700 E. 170th ST. (Address) | 312-474-7000 (Phone Number) | 0311590004 G (Generator Number)

Lansing (City) | IL (State) | 60438 (Zip) | ILD005229448 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | South Holland, IL (Hauler Address) | S.W.H. Registration Number 0079001

312-596-3377 (Phone Number) | ILD069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. Colfax Avenue (Address) | 91808902 (Site Number)

GRIFFITH (City) | IN (State) | 46319 (Zip) | 219-769-3400 (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: Flammable Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Flammable	1	UN1993	

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 3000 (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 Russell Parish (Authorized Signature) DATE: 3-2-82

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) Mike Lesh (Authorized Signature) DATE: 3/2/82

(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

P Douglas (Authorized Signature) DATE 3/2/82

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 109R T-63 6KM 3/2/82

002886

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541416
Authorization Number 997227

BEE CHEMICAL CO. (Company Name) | 2700 E. 170th (Address) | 312-474-7000 (Phone Number) | 0311590004 G (Generator Number)
Lansing, (City) | IL (State) | 60438 (Zip) | ILD005229448 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | South Holland, IL (Hauler Address) | S.W.H. Registration Number 00790Z
312-59603377 (Phone Number) | ILD069506616 (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) | 91808902 (Site Number)
Griffith (City) | IN (State) | 46319 (Zip) | 219-769-3400 (Phone Number) | IND 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)
(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Flammable Paint | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable | HAZARD CLASS: 1 | UN 1263 (UN or NA Number) | (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 20500 (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 Russell Powell (Authorized Signature) DATE: 2-26-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 02/26/82

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

_____ (Authorized Signature) DATE: 2-26-82

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-506RM 3/26/82

002687

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541418

Authorization Number 997227

BEE CHEMICAL CO. (Company Name) | 2700 E. 170th St. (Address) | 312-474-7000 (Phone Number) | 0 3 1 1 5 9 0 0 0 4 G (Generator Number)

MR.Lansing, (City) | IL (State) | 60438 (Zip) | I L D 0 0 5 2 2 9 4 4 8 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | South Holland, IL (Hauler Address) | S.W.H. Registration Number 0029/021

312-596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 (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) | IN (State) | 46319 (Zip) | 219-769-3400 (Phone Number) | IND 0 1 6 3 6 0 2 6 5 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE PAINT SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE | HAZARD CLASS: 1 | U N 1 9 9 3 (UN or NA Number) | (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 004600 | (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 D. Bell (Authorized Signature) DATE: 3-8-82

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) Ronald C Brady (Authorized Signature) DATE 03/08/82

(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 03/08/82

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 109K T-63 6PM 3/8/82

002688

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541419 (1–7)

Authorization Number 9 9 7 2 2 7 (8–13)

BEE CHEMICAL CO.	2700 E. 170th St.	312-474-7000	0 3 1 1 5 9 0 0 0 4 G
(Company Name)	Address	Phone Number	14 Generator Number 24
Lansing,	IL 60438		I L D 0 0 5 2 2 9 4 4 8
City	State Zip		EPA Number

WASTE HAULER(S)

MR. FRANK, INC	South Holland, IL	312-596-3377	S.W.H. Registration Number 00 [illegible] (25–31)
Hauler Name	Hauler Address	Phone Number	I L D 0 6 9 5 0 6 1 6 EPA Number
			S.W.H. Registration Number (32–38)
Hauler Name	Hauler Address	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL	420 S. Colfax Avenue		9 1 8 0 8 9 0 2
(Facility Name)	Address		39 Site Number 46
Griffith	IN 46319	219-769-3400	IND 0 1 6 3 6 0 2 6 5
City	State Zip	Phone Number	EPA Number
Alternate (Facility Name)	Address		39 Site Number 46
City	State Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:		
Flammable	1	U N 1 9 9 3 (UN or NA Number)	EPA HW Number

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004500 (47–52) (1 / 2) GALLONS (Circle One) / CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Russell Ford (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 _____

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 109KT-63 GPM 3/15/82

002889

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

0541420

Authorization Number 997227

BEE CHEMICAL CO. | 2700 E. 170th St. | 312-474-7000 | 0 3 1 1 5 9 0 0 0 4 G
(Company Name) | Address | Phone Number | Generator Number

Lansing IL | IL | 60438 | I L D 0 0 5 2 2 9 4 4 8
City | State | Zip | EPA Number

WASTE HAULER(S)

MR. FRANK, INC. | South Holland, IL | S.W.H. Registration Number 007902
Hauler Name | Hauler Address

312-596-3377 | I L D 0 6 9 5 0 6 1 6 0
Phone Number | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number
Phone Number | EPA Number

C
DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMIAL | 420 S. Colfax Avenue | 91808902
(Facility Name) | Address | Site Number

Griffith | IN | 46319 | 219-769-3400 | IND 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: Flammable Paint Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable | HAZARD CLASS: 1 | UN 1993 (UN or NA Number) | EPA HW Number

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 (1 GALLONS (Circle One) 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION J. Bonillo (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) Gary Owens (Authorized Signature) DATE: 03/23/82

(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

J. Bonillo (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 109 RT-63 GRM 3/23/82

002690

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541421 (1–7)

Authorization Number 9 9 7 2 2 7 (8–13)

BEE CHEMICAL CO.	2700 E. 170th St.	312-474-7000	0 3 1 1 5 9 0 0 0 4 (14–24) G
(Company Name)	Address	Phone Number	Generator Number
Lansing	IL	60438	I L D 0 0 5 2 2 9 4 4 8
City	State	Zip	EPA Number

WASTE HAULER(S)

Mr. Frank, Inc.	South Holland, IL		S.W.H. Registration Number 1079/16 (25–31)
Hauler Name	Hauler Address	312-596-3377 Phone Number	I L D 0 6 9 5 0 5 1 6 0 EPA Number
			S.W.H. Registration Number (32–38)
Hauler Name	Hauler Address	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERIACN CHEMICAL	420 S. Colfax Avenue			9 1 8 0 8 9 0 2 (39–46)
(Facility Name)	Address			Site Number
Griffith	IN	46319	219-769-3400	IND 0 1 6 3 6 0 2 6 5
City	State	Zip	Phone Number	EPA Number
Alternate (Facility Name)	Address			(39) Site Number (46)
City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Flammable	1	U N 1 9 9 3	

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 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 J. Bevelle (Authorized Signature) DATE: 4-2-82

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) Miguel Garcia (Authorized Signature) DATE: 04/02/82 (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: 04/02/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: T. Dunbee

IN ILLINOIS: 217 / 782-3637 ***24 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 109K T-63 GLM 4.2.82

002891

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

0416913

Authorization Number 997231

Bee Chemical Co (Company Name) | 500 State St (Address) | 3127580500 (Phone Number) | 0310450010 G (Generator Number) | City | State | Zip | ILD089828016 (EPA Number)

WASTE HAULER(S)

Mr. Transport Inc (Hauler Name) | 201 W. 155th St (Hauler Address) | South Holland, Il. 60473 | 3125963377 (Phone Number) | S.W.H. Registration Number 0079021 | ILD069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number | Phone Number | EPA Number

DESTINATION — DISPOSAL, STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | P.O. Box 190 (Address) | 91808902 (Site Number)
Griffith (City) | Ind. (State) | 46319 (Zip) | Phone Number | IND001636265 (EPA Number)

Alternate (Facility Name) | Address | Site Number
City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Ink & Solvent | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Tank Truck	Flammable	UN1993	F003

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 00480.0 (47–52) (1 GALLONS (Circle One) / 2 CU. YDS.) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 4/6/82

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) [signature] (Authorized Signature) DATE: 4/6/82 (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: 4/16/82 (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 125RT-63 612M 4.6.82

002692

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541422

Authorization Number 997227

(Company Name)	Address	Phone Number	Generator Number
BEE CHEMICAL CO.	2700 E. 170th St.	312-474-7000	0311590004 G

City	State	Zip	EPA Number
Lansing,	IL	~~xxxx~~ 60438	ILD005229448

WASTE HAULER(S)

Hauler Name	Hauler Address	Phone Number	S.W.H. Registration Number / EPA Number
Mr. Frank, Inc.	South Holland IL	312-596-3377	0079021 / ILD069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number	City	State	Zip	Phone Number	EPA Number
AMERIACN CHEMCAL	420 S. Colfax Avenue	~~91808902~~	Griffith	IN	46319	219-796-~~xxxx~~ 3400	IND016360265

TO BE COMPLETED BY WASTE GENERATOR.

WASTE NAME: Flammable Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable HAZARD CLASS: 1 UN 1993 (UN or NA Number) EPA HW Number

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 005500 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X [signature] (Authorized Signature) DATE: 4/13/82

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) Ronald Bridgewater (Authorized Signature) DATE: 4/13/82 (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: 4/13/82 (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 109TR T-63GRM 4.13.82

002893

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541424

Authorization Number 997227

TO BE COMPLETED BY WASTE GENERATOR

BEE CHEMICAL CO.	2700 E. 170th St.	312-474-7000	0 3 1 1 5 9 0 0 0 4 G
(Company Name)	Address	Phone Number	Generator Number
LANSING	IL	60438	I L D 0 0 5 2 2 9 4 4 8
City	State	Zip	EPA Number

WASTE HAULER(S)

MR. FRANK, INC.	South Holland, IL	S.W.H. Registration Number 007902
Hauler Name	Hauler Address	
	312-596-5377	I L D 0 6 9 5 0 6 1 6 0
	Phone Number	EPA Number
Hauler Name	Hauler Address	S.W.H. Registration Number
	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL	420 S. Colfax Avenue		9 1 8 0 8 9 0 2
(Facility Name)	Address		Site Number
Griffith,	IN	46319 219-926-3400	IND 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: Flammable Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Flammable	1	U N 1 9 9 3	

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 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: 4/23/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE 04/23/82 (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:

_____ (Authorized Signature) DATE: 04/23/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS 4-8 PM

~~*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 T0109K T-63 GRM 4-23-82

002694