1-181-01 OL

12-3.138v.2
2-8-96

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: WAD 009282161
Manifest Document No.: 27577
2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
LONGVIEW FIBRE CO
5901 E MARGINAL WAY
SEATTLE WA 98134
4. Generator's Phone (206 762-7170

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: SAFETY-KLEEN CORP.
6. US EPA ID Number: ILD 984908202
C. State Transporter's ID: 88888
D. Transporter's Phone: 206 939-2022

7. Transporter 2 Company Name: SALT LAKE EXPRESS INC
8. US EPA ID Number: UTD 981552425
E. State Transporter's ID: 40936
F. Transporter's Phone: 800 627-3047

9. Designated Facility Name and Site Address 000789
SAFETY-KLEEN CORP.
16540 SE 130TH AVE BLDG B
CLACKAMAS OR 97015
10. US EPA ID Number: ORD 981766124
G. State Facility's ID
H. Facility's Phone: 503 657-7033

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (NOT USEPA HAZARDOUS WASTE)(ERG#27)		1	DM	14	G	NONE NHZW
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above
(A) NONE

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
MFST REQ# 91385655 1-181-01-7274
EMERGENCY RESP#800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR.
SEE ATTACHMENT
SKDOT# A: 557 B: C: D:

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

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

Printed/Typed Name: R Armstrong
Signature: [signature]
Date (Month Day Year): 2 06 96

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Al Jackson
Signature: [signature]
Date (Month Day Year): 2 6 96

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: B NELSON
Signature: [signature]
Date (Month Day Year): 2 7 96

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: Martin Skoin
Signature: [signature]
Date (Month Day Year): 02 08 96

GENERATOR / TRANSPORTER / FACILITY

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

SAFETY-KLEEN CORP.

90290 6

ORIGINAL-RETURN TO GENERATOR

USEPA SF
1256784

LFC000705

INSTRUCTIONS FOR COMPLETION OF THIS FORM, REFER CODE OF FEDERAL REGULATIONS, 40 PART 262.20

Public reporting burden for this collection of information is estimated to average 30 minutes for generators, 15 minutes for transporters, and 15 minutes for treatment, storage and disposal facilities. Send comments regarding burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

1-181-01 OL

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. WAD 009282161

Manifest Document No. 09368

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
LONGVIEW FIBRE CO
5901 E MORGINE WAY
SEATTLE WA 98134

4. Generator's Phone (206 762-7170

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
SAFETY-KLEEN CORP.

6. US EPA ID Number
ILD 984908202

C. State Transporter's ID

D. Transporter's Phone 206 939-2022

7. Transporter 2 Company Name
SALT LAKE EXPRESS INC

8. US EPA ID Number
UTD 981552425

E. State Transporter's ID 40936

F. Transporter's Phone 800 627-3047

9. Designated Facility Name and Site Address 000789
SAFETY-KLEEN CORP.
16540 SE 130TH AVE BLDG B
CLACKAMAS OR 97015

10. US EPA ID Number
ORD 981766124

G. State Facility's ID

H. Facility's Phone
503 657-7033

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	COMBUSTIBLE LIQUID,N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (NOT USEPA HAZARDOUS WASTE)(ERG#27)	X	1	DM	14	G	NONE NHZW
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
88652490

15. Special Handling Instructions and Additional Information PP# 609368 MFST REQ# 88314422 1-181-01-7274
EMERGENCY RESP#800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR.
SKDOT# A: 557 B: C: D:

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Printed/Typed Name: Anne Kjallin — Signature: Anne Kjallin — Date: Month 11 Day 13 Year 95

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Al Jackson — Signature: Al Jackson — Date: Month 11 Day 13 Year 95

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: B Nelson — Signature: BLN — Date: Month 11 Day 14 Year 95

19. Discrepancy Indication Space
No X in Box 11.A.

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

Printed/Typed Name: Martin Skoien — Signature: Martin Skoien — Date: Month 11 Day 15 Year 95

GENERATOR — TRANSPORTER — FACILITY

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

SAFETY-KLEEN CORP.

90290

6

ORIGINAL-RETURN TO GENERATOR

Public reporting burden for this collection of information is estimated to average 30 minutes for generators, 15 minutes for transporters, and 15 minutes for facilities, including the time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

INSTRUCTIONS FOR COMPLETION OF THIS FORM: REFER TO CODE OF FEDERAL REGULATIONS, 40 PART 262.20

LFC000706

Report Date: 6/21/95
Report: Premium Solvent

Generator:
Longview Fibre Co

Control#: 9512100
Survey: PS014438

Seattle, WA 98108

Safety-Kleen Service Representative / Branch Number:
8324 Donald Cairney / 118101

Dear Customer:
Please review the results of the analysis completed by Safety-Kleen Corp. on your sample. Your sample submitted has **PASSED** the Safety-Kleen Non-Hazardous Waste Screening analysis. The analysis does not show any targeted hazardous characteristics. As long as you do not mix the premium solvent with listed or characteristic hazardous waste, you may consider this waste stream to be a non-hazardous waste.

Please contact your local Safety-Kleen representative or branch facility listed above if you have any questions.

EPA Code	Parameter	Report Limits	Result	Units
D001	FLASH @ 142	N/A	NO	N/A
D006	Cadmium	1.000	<<0.06	ppm
D008	Lead	5.000	<0.80	ppm
D019	Carbon Tetrachloride	0.500	<0.400	ug/mL
D029	1,1-Dichloroethylene	0.700	<0.400	ug/mL
D039	Tetrachloroethylene (Perc)	0.700	<0.400	ug/mL
D040	Trichloroethylene (TCE)	0.500	<0.400	ug/mL

John Schmitz
Corporate Lab Manager

Allan Mantauffel Technical Center

P.O. Box 92050
Elk Grove Village, IL 60009-2050
Fax: 312/825-7853

12555 W. Old Higgins Rd.
Elk Grove Village, IL 60007
Telephone: 312/825-7338

Report Date: 6/21/95
Report: Premium Solvent

Generator:
Longview Fibre Co

Control#: 9512100
Survey: PS014438

Seattle, WA 98108

Safety-Kleen Service Representative / Branch Number:
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Dear Customer:
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Please contact your local Safety-Kleen representative or branch facility listed above if you have any questions.

EPA Code	Parameter	Report Limits	Result	Units
D001	FLASH @ 142	N/A	NO	N/A
D006	Cadmium	1.000	<<0.06	ppm
D008	Lead	5.000	<0.80	ppm
D019	Carbon Tetrachloride	0.500	<0.400	ug/mL
D029	1,1-Dichloroethylene	0.700	<0.400	ug/mL
D039	Tetrachloroethylene (Perc)	0.700	<0.400	ug/mL
D040	Trichloroethylene (TCE)	0.500	<0.400	ug/mL

John Schmitz
Corporate Lab Manager

Allan Manteuffel Technical Center

P.O. Box 92050
Elk Grove Village, IL 60009-2050
Fax: 312/825-7853

12555 W. Old Higgins Rd.
Elk Grove Village, IL 60007
Telephone: 312/825-7338

1000 North Randall Road
Elgin, Illinois 60123-7857

WE CARE

FOR SERVICE CALL
TRANSPORTER
206 939-2022 DAN KENTCH
CDR RL#6 3-220 OF

DUNS NO. 05106-0408 FED. ID NO. 39-6090019

SCHEDULED SERVICE WEEK	SCHEDULED SERVICE TERRITORY	REFERENCE NUMBER
95-34	11	337535

MANIFEST NUMBER	37535

GENERATOR

1-181-01-7274-5
LONGVIEW FIBRE CO
5901 E MARGINE WAY
SEATTLE WA 98134

BILL TO

SERVICE DATE	SALESMEN'S NO.	SALES TAX EXEMPTION NUMBER	HANDLING CODE	CREDIT CODE	SALES TAX CODE	PREVIOUS BALANCE	PORTION OVER 60 DAYS
[illegible]	[illegible]			U	48-033-7405		

BUSINESS TYPE	CHAIN	CUSTOMER P.O. NUMBER	GENERATOR'S/CUSTOMER PHONE #	O.C.	SVC P/S	PROD. P/S	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
19	NA	[illegible]	206-762-7170	NO	421	001	.082	.082	.082

CUSTOMER

SERVICE NO.	SERIAL NO.	SERVICE CHARGE	SALES TAX	TOTAL CHARGE	SOLVENT CLEAN	SOLVENT SPENT	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)	CHANGE SERVICE TERM (INITIAL)	CHANGE SCHEDULED DATE (YY WW)	INV CODE	REMARKS 204
330-39497		257.00	21.07	278.07			12				9	

TOTAL SERVICE SECTION	257.00	21.07	278.07

MACHINE INSPECTION SECTION (PLEASE CHECK APPROPRIATE BOXES ON RIGHT) →

	GOOD	POOR
MACHINE CONDITION & CLEANLINESS	☐	☐
LAMP ASSEMBLY CONDITION	☒	☐

	YES	NO
DECALS IN PLACE AND LEGIBLE	☒	☐
FUSIBLE LINK INSTALLED	☒	☐
EMERGENCY CLOSING OF LID UNDERSTRUCTED	☒	☐
MACHINE PROPERLY GROUNDED	☒	☐
LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	☒	☐
SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	☐	☐

WASTE INFORMATION SECTION

USEPA TRANSPORTER ID NO. IL [illegible] GENERATOR USEPA ID NO. [illegible] GENERATOR STATE ID NO.

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12 CONTAINERS NO.	TYPE	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	CONTAINER SIZE	
[illegible] COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (D039) (WC02, WP02, WT0, WF001) (RQ-7) 7 AOL		DM		G	15600	210	
[illegible]	1	PA	17	G	557		

I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES.

0 TO 220 LBS/MONTH — INITIALS

220 LBS TO 2,200 LBS./MONTH — INITIALS

GREATER THAN 2,200 LBS./MONTH — INITIALS

DESIGNATED FACILITY NAME AND ADDRESS: SAFETY-KLEEN CORP, 15540 SE 130TH AVE BLDG B, CLACKAMAS OR 97015

USA EPA ID NO. ORD981726124

STATE ID NO.

PRODUCT NUMBER	SK SURVEY NO.	DESCRIPTION	MSDS GIVEN	PRICE	U/M	QUANTITY DELIVERED	SALES AMOUNT	TAX	LINE TOTAL
			☐						
			☐						
			☐						
			☐						
			☐						
			☐						

PAYMENT RECEIVED

CASH ☐ CHECK NUMBER

TOTAL RECEIVED

APPLY PAYMENT TO:
☐ TODAY'S SERVICE/SALE
☐ PREVIOUS BALANCE AS FOLLOWS

INV. # _____ AMOUNT $ _____

PREVIOUS CREDIT CARD NO.

CREDIT CARD NO. | EXP. DATE | AMEX VISA MC

CONSUMER REFERENCE INFO (NUMERIC ONLY)

TOTAL PRODUCTS AMOUNT

CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE RECLAMATION AGREEMENT, ADDITIONAL TERMS AND CONDITIONS, AND OTHER INFORMATION APPEARING ON THE REVERSE SIDE ARE MADE A PART HEREOF.

TOTAL SERVICE AMOUNT (FROM ABOVE)

TOTAL DUE

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

Print Name BB Colins X [signature]
GENERATOR/DESIGNATED REPRESENTATIVE SIGNATURE

SERVICE AND SALES ACKNOWLEDGEMENT

FORM NO. 700-08-12 (REV. 1/95)

IN THE EVENT OF AN EMERGENCY CALL 1-708-888-4660 (24 hours)

SEE REVERSE SIDE FOR IMPORTANT INFORMATION

LFC000709

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.
2. Page 1 of 1
Manifest Document No.

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
4. Generator's Phone (206) 762-7170

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name
6. US EPA ID Number

C. State Transporter's ID
D. Transporter's Phone

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

E. State Transporter's ID
F. Transporter's Phone

9. Designed Facility Name and Site Address
10. US EPA ID Number

G. State Facility's ID
H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)

	HM	11. US DOT Description	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.		WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) ...					
b.			1	DA	17	G	
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name | Signature | Date Month Day Year

GENERATOR

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date Month Day Year

TRANSPORTER

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date Month Day Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name | Signature | Month Day Year

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

SAFETY-KLEEN CORP.

90290

6

GENERATOR COPY

LFC000710

INSTRUCTIONS FOR COMPLETION OF THIS FORM. REFER CODE OF FEDERAL REGULATIONS. 40. PART 262.20.

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 15 minutes for facilities to complete, including the time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

LAND DISPOSAL RESTRICTION AND WASTE ANALYSIS CRITERIA FORM

safety-kleen

PHASE II LDR NOTICE: GENERATOR NOT REQUIRED TO LIST UNDERLYING CONSTITUENTS BECAUSE TREATER WILL MONITOR FOR THE CONSTITUENTS BEFORE LAND DISPOSAL.

TO: SAFETY-KLEEN CORP. (DESIGNATED FACILITY) EPA ID NO. ORD031765124

1-181-91-7274 21 (DESIGNATED FACILITY) 9534
MAN DOC: 37535

ADDRESS: 16540 SE 130TH AVE BLDG B CLACKAMAS OR 97015

Under manifest/sales service number 37535 the generator noted below is shipping to you a waste determined to be restricted under 40 CFR Part 268. In accordance with 40 CFR Part 268.7, the generator hereby provides notice that the waste is restricted from land disposal. A copy of this form must be kept by the generator and facility for five (5) years from the date of waste shipment.

PLEASE ✓ THE APPROPRIATE BOXES

WASTE NAME (FOR NON-WASTE WATER)	WASTE CODE	THE WASTE MAY CONTAIN THE FOLLOWING RESTRICTED CONSTITUENTS	TREATMENT STANDARD (mg/l) OR METHOD
☐ Waste Petroleum Naphtha 105	D001	Ignitable Liquid (High TOC Subcategory)	Incineration (INCIN), fuel substitution (FSUBS) or recovery (RORGS)(40 CFR 268.42)(non-waste water)
		Halogenated Organic Compounds (HOC's)≥1000 mg/l	INCIN (40 CFR 268.42)(non-waste water)
	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/L
	D035	Methyl Ethyl Ketone	36 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/L
	D040	Trichloroethylene	6.0 (non-waste water) MG/L
☐ Waste Petroleum Naphtha 140	D001	Ignitable Liguid (High TOC Subcategory)	INCIN, FSUBS, or RORGS (40 CFR 268.42)(non-waste water)
	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/L
☐ Actrel Solvent (If customer specific TCLP is not available)	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/L
	D040	Trichloroethylene	6.0 (non-waste water) MG/L
☐ Aqueous Parts Washer	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
☐ Cyclonic, 150 Premium Solvent OR AQUEOUS BRAKE CLEANER	~~D039~~	~~Tetrachloroethylene~~	~~6.0 (non-waste water) MG/L~~
☐ Waste Petroleum Naphtha (sludges from Safety-Kleen Service Center Operations)	D001	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGS (40 CFR 268.42)(non-waste water)
	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/L
☐ Waste Compound Cleaning Liquid/ Immersion cleaner 699	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/L
	D027	1, 4-Dichlorobenzene	6.0 (non-waste water) MG/L
	D035	Methyl Ethyl Ketone	36 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/L
	D040	Trichloroethylene	6.0 (non-waste water) MG/L
☐ Waste Gasoline Filters	D001	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGS (40 CFR 268.42)(non-waste water)
	D018	Benzene	10 (non-waste water) MG/L

OPTIONAL STATE INFO

MACHINE NUMBER	SPECIFIC GRAVITY	EXCESS FLUID IN DRUM? (MS>2/3)(C>1/3)(Y/N)	OFF-COLOR? (Y/N)	MORE THAN 30% SOLIDS? (Y/N)	UNUSUAL ODOR? (Y/N)	UNUSUAL MATERIALS INCLUDED/ADDED? (Y/N)
330-35447						

SPECIFIC GRAVITY ACCEPTANCE GUIDELINES

SALES REPRESENTATIVE SIGNATURE (FOR OPTIONAL STATE INFORMATION) ** NO SIGNATURE REQUIRED **

The constituent composition is based on knowledge of the waste (via Material Safety Data Sheets for the chemical(s) used, and the process which created the waste).

***These treatment standards do not preclude reclamation prior to final disposition.**

Generator Company LONGVIEW FIBRE CO EPA ID NO.: WAD009282161

Safety-Kleen Corp. manages the above waste through its recycling and fuels programs in accordance with all applicable elements of the land disposal restriction.

FORM 1330 (5/05)

SAFETY-KLEEN CORP.
1995
WASHINGTON STATE
WASTE RECYCLE PERCENTAGES

Generator: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

EPA/State ID#: _____

TSD/SK Facility: SAFETY KLEEN CORP. A/C

Address: 16540 SE 130TH

City: CLK State: OR Zip: 97015

EPA/State ID#: ORD981766124

Product	Recycle Percentage
Parts Washer Solvent 105	95%
Parts Washer Solvent 140	95%
Parts Washer Solvent 150	95%
Aqueous Brake Cleaner	00%
699 Immersion Cleaner	85%
Paint Gun Waste	55%
Paint Booth Filters	00%
Dry Clean Perc	44%
Dry Clean Filters	10%
Dry Clean Naptha	95%
Freon/Trichlor	09%
Imaging Wastes	01%

CERTIFICATION

I hereby swear and affirm that I am an official of the above named TSD and that I have the knowledge, and authority to make the above statements relating to the percentages of materials recycled by my firm and that the statements are true to the best of my ability to determine.

NAME:	SIGNATURE:	DATE:
TERRY FLETCHER	Terry Fletcher	12/29/95

DON CAIRNEY
INDUSTRIAL SALES SPECIALIST

SAFETY-KLEEN CORP.
3210 C ST N.E. · AUBURN, WA 98002
206/939-2022 FAX 206/939-7277

Report Date: 6/21/95
Report: Premium Solvent

Generator :
Longview Fibre Co

Control#: 9512100
Survey: PS014438

Seattle, WA 98108

Safety-Kleen Service Representative / Branch Number :
8324 Donald Cairney / 118101

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Please contact your local Safety-Kleen representative or branch facility listed above if you have any questions.

EPA Code	Parameter	Report Limits	Result	Units
D001	FLASH @ 142	N/A	NO	N/A
D006	Cadmium	1.000	<<0.06	ppm
D008	Lead	5.000	<0.80	ppm
D019	Carbon Tetrachloride	0.500	<0.400	ug/mL
D029	1,1-Dichloroethylene	0.700	<0.400	ug/mL
D039	Tetrachloroethylene (Perc)	0.700	<0.400	ug/mL
D040	Trichloroethylene (TCE)	0.500	<0.400	ug/mL

6-29-95

John Schmitz
Corporate Lab Manager

Allan Manteuffel Technical Center

P.O. Box 92050
Elk Grove Village, IL 60009-2050
Fax: 312/825-7853

12555 W. Old Higgins Rd.
Elk Grove Village, IL 60007
Telephone: 312/825-7338

BOX 1800
ELGIN, IL 60121-7857

DUNS No. 05106-0408
FED. ID NO. 39-6090019

safety-kleen®

12-241

ORIGINAL INVOICE

ACCOUNT NUMBER	LOCATION #	CUSTOMER ORDER NO		INVOICE NO
1-181-01-7274-5	1-181-01			190898

BILL TO	TAX STATUS/NUMBER	SERVICE DATE	INVOICE DATE	PLEASE PAY INVOICE BY
		09-28-98	09-29-98	10-14-98

SERVICE ADDRESS

LONGVIEW FIBRE CO SEATTLE
5901 E MARGINAL WAY S
SEATTLE WA 98134-2492

ENTERED OCT 13 1998

PRODUCT/SERVICE #	DESCRIPTION	QUANTITY	UOM	UNIT COST	TAX	ITEM TOTAL
340-14241	MACHINE SERVICE 34150	1	EA	326.50	28.08	354.58
	INVOICE TOTAL				28.08	354.58

FOR INFORMATION PLEASE CALL SK SERVICING LOCATION: (253)939-2022 AUBURN WA

Safety-Kleen and Laidlaw Environmental Services have formed a new organization with a goal of continuing to provide value-added solutions to your business and environmental needs. Any changes occurring will be thoroughly evaluated to ensure they have only a positive impact on our customers. Payments should continue to be made to Safety-Kleen, and our remittance address remains the same.

PLEASE DO NOT USE ANY STAPLES WITH REMITTANCE

RETURN THIS PORTION WITH PAYMENT TO: P.O. BOX 1800 ELGIN IL 60121-7857

BOX 1800
ELGIN, IL 60121
safety-kleen®

ACCOUNT NUMBER	INVOICE NUMBER	SERVICE DATE	INVOICE DATE	BILL TO
1-181-01-7274-5	190898	09-28-98	09-29-98	

190898 1181017274500354580028 08

LONGVIEW FIBRE CO SEATTLE
5901 E MARGINAL WAY S
SEATTLE WA 98134-2492

AMOUNT DUE
354.58

LFC000715

Elgin, Illinois 60123-7857

WE CARE

DUNS NO. 05106-0408 FED. ID NO. 39-6090019

CUSTOMER

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
253 939-2022	JOHNNY STEVENS	11/21/98	98-38	21	190898

CUSTOMER NO. 1-181-01-7274

GENERATOR

LONGVIEW FIBRE CO SEATTLE
5901 E MARGINAL WAY S
SEATTLE WA 98134

BILL TO

CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
C		

BUSINESS TYPE	CHAIN	OUTER COUNTY	SVC. P/C	PROD. P/C
09	NO	NO	491	001

LOCATION	TAX EXEMPTION NO.
118101	

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	HANDLING CODE	ASSOC. CODE	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
9-28-98	2274		206-762-7170	48-085-7485			.086	.086	.086

DEPT	SERVICE/ PRODUCT	SERIAL NUMBER	REMARKS/ UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS CLEAN	SPENT	# OF CONT	SK DOT	CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)	(INITIAL)	CHANGE SCH. DATE (YY WW)	INV. CODE	PROMO NO.	RELEASE NO.	MSDS GIVEN
00	34150	34014241		1	326.50	28.08	354.58	0.00		29	2	557		12						12,12	☐
																					☐
																					☐
																					☐
																					☐
																					☐
																					☐
																					☐
																					☐
																					☐
																					☐
																					☐
	TOTAL-SERVICE/PRODUCTS				326.50	28.08	354.58	0.00													

CHECK APPROPRIATE BOXES →

	GOOD	POOR
MACHINE CONDITION & CLEANLINESS	☑	☐
LAMP ASSEMBLY CONDITION	☑	☐

	YES	NO
DECALS IN PLACE AND LEGIBLE	☑	☐
FUSIBLE LINK INSTALLED	☑	☐
EMERGENCY CLOSING OF LID UNOBSTRUCTED	☑	☐
MACHINE PROPERLY GROUNDED	☑	☐
LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	☑	☐
SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	☑	☐

MANIFEST NO.	USEPA TRANSPORTER ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.
90898	ILD984908202	WAD009282161	

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)
COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII
(NOT USEPA HAZARDOUS WASTE)(ERG#128)

12. CONTAINERS NO.	TYPE	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER
2	DM	29	G	557

5163055 2

I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES
0 TO 220 LBS/MONTH — INITIALS
220 LBS TO 2,200 LBS/MONTH — INITIALS
GREATER THAN 2,200 LBS/MONTH — INITIALS

DESIGNATED FACILITY NAME AND ADDRESS SAFETY-KLEEN SYSTEMS, INC.
16540 SE 130TH AVE BLDG B CLACKAMAS OR 97015

USA EPA ID NO. ORD981766124
STATE ID NO.

PAYMENT RECEIVED SECTION

CASH ☐
CHECK NUMBER
TOTAL RECEIVED
APPLY PAYMENT TO: ☐ TODAY'S SERVICE/SALE ☐ PREVIOUS BALANCE AS FOLLOWS

INVOICE #	AMOUNT $	INVOICE #	AMOUNT $

PREVIOUS CREDIT CARD NO.

CREDIT CARD NO. AMEX VISA MC EXP. DATE

CUSTOMER REFERENCE INFORMATION

LDR MESSAGE
LDR NOT REQ'D

MANIFEST CODE	SEQ #
6P	2 D

IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

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

Print Customer Name

By: Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	354.58

DO NOT WRITE IN THE AREA BELOW

190898
1-181-01-7274-5

SERVICE AND SALES ACKNOWLEDGMENT
PART 1366 (Rev. 7/98)

LFC000716

1-181-01

Please print or type. (Form designed for use on elite (12 pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: WAD009282161

Manifest Document No.: 90848

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
LONGVIEW FIBRE CO SEATTLE
5901 E MARGINAL WAY S
SEATTLE WA 98134

4. Generator's Phone (206) 762-7170

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: SAFETY-KLEEN CORP.

6. US EPA ID Number: ILD 984908202

C. State Transporter's ID

D. Transporter's Phone: 206 939-2022

7. Transporter 2 Company Name: SAFETY-KLEEN (TG), INC.

8. US EPA ID Number: SCD 987574647

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address 000789
SAFETY-KLEEN SYSTEMS, INC
16540 SE 130TH AVE BLDG B
CLACKAMAS OR 97015

10. US EPA ID Number: ORD 981766124

G. State Facility's ID

H. Facility's Phone: 503 657-7033

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (NOT USEPA HAZARDOUS WASTE)(ERG#128)	2	DM	29	G	NONE
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
EMERGENCY RESP 800-468-1760(24 HR). IF SEE ATTACHMENT
MFST R/T# 96061164 1-181-01-7274 UNDELIVERABLE RETURN TO GENERATOR.
SKDOT# A: 557 B: C: D:

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

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

Printed/Typed Name: [illegible] | Signature: [illegible] | Date: Month 4 Day 28 Year 98

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: DRUC HUNTINGTON | Signature: [illegible] | Date: Month 04 Day 28 Year 98

18. Transporter 2 Acknowledgement of Receipt of Materials

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

19. Discrepancy Indication Space

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

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

GENERATOR

TRANSPORTER

FACILITY

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

SAFETY-KLEEN CORP.

90290

6

GENERATOR COPY

reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

INSTRUCTIONS FOR COMPLETION OF THIS FORM. REFER CODE OF FEDERAL REGULATIONS 40 PART 262.20

LFC000717

1-181-01

RECEIVED JUL 09 1998

8061001101988

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: WAD 009282161

Manifest Document No.: 23555

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
LONGVIEW FIBRE CO SEATTLE
5901 E MARGINAL WAY S
SEATTLE WA 98134

4. Generator's Phone (206) 762-7170

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: SAFETY-KLEEN CORP.

6. US EPA ID Number: ILD 984908202

C. State Transporter's ID

D. Transporter's Phone: 206 939-2022

7. Transporter 2 Company Name: SLT EXPRESS INC

8. US EPA ID Number: UTD 981552425

E. State Transporter's ID

F. Transporter's Phone: 800 627-3047

9. Designated Facility Name and Site Address: 000658
SAFETY-KLEEN CORP.
3700 LAGRANGE ROAD
SMITHFIELD KY 40068

10. US EPA ID Number: KYD 053348108

G. State Facility's ID: 03106900006

H. Facility's Phone: 502 845-2453

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	WASH WATER (NOT USDOT OR USEPA HAZARDOUS MATERIAL)		3	DM	1350	P	NONE
b.	Ink Sludge						
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: M061

15. Special Handling Instructions and Additional Information
MFST R/T# 94707419 1-181-01-7274
EMERGENCY RESP 800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR.
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.
PP SKDOT# A: 5469 B: C: D:

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

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

Printed/Typed Name: Sonny L. Burns — Signature: Sonny L. Burns — Date (Month Day Year): 6 19 98

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Dave Huntington — Signature: Dave Huntington — Date (Month Day Year): 06 19 98

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Richard W. Jensen — Signature: Richard Jensen — Date (Month Day Year): 06 29 98

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: Tonya Moore — Signature: Tonya Moore — Date (Month Day Year): 07 03 98

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

A)1713897/1066235

SAFETY-KLEEN CORP.

90290 6

ORIGINAL-RETURN TO GENERATOR

Reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

INSTRUCTIONS FOR COMPLETION OF THIS FORM, REFER CODE OF FEDERAL REGULATIONS, 40, PART 262.20.

LFC000718

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: WAD 009282161
Manifest Document No.: 23555
2. Page 1 of 2
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
LONGVIEW FIBRE CO SEATTLE
5901 E MARGINAL WAY S
SEATTLE, WA 98134
4. Generator's Phone (206) 762-7170

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: SAFETY KLEEN CORP.
6. US EPA ID Number: TXD 077603371
C. State Transporter's ID: 65124
D. Transporter's Phone: 940-383-2611

7. Transporter 2 Company Name: Hul Mat Environmental
8. US EPA ID Number: NYD 980762947
E. State Transporter's ID: 40082
F. Transporter's Phone: 800-678-2650

9. Designated Facility Name and Site Address
SAFETY KLEEN CORP.
3700 LAGRANGE ROAD
SMITHFIELD, KY 40068
10. US EPA ID Number: KYD 053348108
G. State Facility's ID
H. Facility's Phone: 502-845-2453

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. THIS IS A RYDER TO MANIFEST# 23555 FOR TRANSPORTATION PURPOSES ONLY						
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name: B. Forte
Signature: B Forte BJF
Date: Month 06 Day 28 Year 98

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: B. Forte
Signature: B Forte
Date: Month 06 Day 28 Year 98

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: DONALD BATT
Signature: Donald Batt
Date: Month 07 Day 01 Year 98

19. Discrepancy Indication Space
16) Signed in error. 6/30/98

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: Tonya Moore
Signature: Tonya Moore
Date: Month 07 Day 03 Year 98

GENERATOR
TRANSPORTER
FACILITY

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

SAFETY-KLEEN CORP.

90290 6

ORIGINAL-RETURN TO GENERATOR

reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

INSTRUCTIONS FOR COMPLETION OF THIS FORM, REFER CODE OF FEDERAL REGULATIONS, 40, PART 262.20.

1-181-01

RECEIVED JUL 09 1998

806100110148

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: WAD 009282161

Manifest Document No.: 23555

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
LONGVIEW FIBRE CO SEATTLE
5901 E MARGINAL WAY S
SEATTLE WA 98134

4. Generator's Phone (206) 762-7170

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: SAFETY-KLEEN CORP.

6. US EPA ID Number: ILD 984908202

C. State Transporter's ID

D. Transporter's Phone: 206 939-2022

7. Transporter 2 Company Name: SLT EXPRESS INC

8. US EPA ID Number: UTD 981552425

E. State Transporter's ID

F. Transporter's Phone: 800 627-3047

9. Designated Facility Name and Site Address: 000658
SAFETY-KLEEN CORP.
3700 LAGRANGE ROAD
SMITHFIELD KY 40068

10. US EPA ID Number: KYD 053348108

G. State Facility's ID: 0310690006

H. Facility's Phone: 502 845-2453

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. WASH WATER (NOT USDOT OR USEPA HAZARDOUS MATERIAL)		3	DM	1350	P	NONE
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: M061

15. Special Handling Instructions and Additional Information
MFST R/T# 94707419 1-181-01-7274
EMERGENCY RESP 800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR.
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.
PP SKDOT# A: 5469 B: C: D:

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

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Printed/Typed Name: Sonny L. Bivins — Signature: Sonny L. Bivins — Date: Month 6 Day 19 Year 98

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Dave Huntington — Signature: [illegible] — Date: Month 06 Day 19 Year 98

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: Richard W. Jensen — Signature: Richard Jensen — Date: Month 06 Day 29 Year 98

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: Tonya Moore — Signature: Tonya Moore — Date: Month 07 Day 03 Year 98

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

A)1713897/1066235

SAFETY-KLEEN CORP.

90290

6

ORIGINAL-RETURN TO GENERATOR

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 15 minutes for treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

INSTRUCTIONS FOR COMPLETION OF THIS FORM BEGIN ON PAGE 2

LFC000720

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: WAD 009282161
Manifest Document No.: 23555
2. Page 1 of 2
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
LONGVIEW FIBRE CO SEATTLE
5901 E MARGINAL WAY S
SEATTLE, WA 98134
4. Generator's Phone (206) 762-7170

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: SAFETY KLEEN CORP.
6. US EPA ID Number: TXD 077603371
C. State Transporter's ID: 65124
D. Transporter's Phone: 940-383-2611

7. Transporter 2 Company Name: Hul Mat Environmental
8. US EPA ID Number: NYD 980760947
E. State Transporter's ID: 40582
F. Transporter's Phone: 800-678-2600

9. Designated Facility Name and Site Address
SAFETY KLEEN CORP.
3700 LAGRANGE ROAD
SMITHFIELD, KY 40068
10. US EPA ID Number: KYD 053348108
G. State Facility's ID
H. Facility's Phone: 502-845-2453

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. THIS IS A RYDER TO MANIFEST# 23555 FOR TRANSPORTATION PURPOSES ONLY						
b.						
c.						
d.						

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

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name: B. Forte
Signature: B Forte BJF
Date: Month 06 Day 28 Year 98

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: B. Forte
Signature: B Forte
Date: Month 06 Day 28 Year 98

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: DONALD BATT
Signature: Donald Batt
Date: Month 07 Day 01 Year 98

19. Discrepancy Indication Space
16) Signed in error. 6/30/98

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: Tonya Moore
Signature: Tonya Moore
Date: Month 07 Day 03 Year 98

GENERATOR
TRANSPORTER
FACILITY

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

SAFETY-KLEEN CORP.

90290 6

ORIGINAL-RETURN TO GENERATOR

reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

INSTRUCTIONS FOR COMPLETION OF THIS FORM. REFER CODE OF FEDERAL REGULATIONS. 40. PART 262.20.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. WAD 009282161

Manifest Document No. 42389

2. Page 1 of

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
LONGVIEW FIBRE CO SEATTLE
5901 E MARGINAL WAY S
SEATTLE WA 98134

4. Generator's Phone (206) 762-7170

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
SAFETY-KLEEN CORP.

6. US EPA ID Number
ILD 984908202

C. State Transporter's ID

D. Transporter's Phone 206 939-2022

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address 000789
SAFETY-KLEEN CORP.
16540 SE 130TH AVE BLDG B
CLACKAMAS OR 97015

10. US EPA ID Number
ORD 981766124

G. State Facility's ID

H. Facility's Phone
503 657-7033

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (NOT USEPA HAZARDOUS WASTE)(ERG#128)	X	1	DM	17	G	NONE
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information PP# 342389 MFST R/T# 95414029 1-181-01-7274
EMERGENCY RESP 800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR.
SEE ATTACHMENT
SKDOT# A: 557 B: C: D:

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

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

Printed/Typed Name: William F. Costello — Signature — Date: Month 6 Day 4 Year 98

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Dave Huntington — Signature — Date: Month 06 Day 04 Year 98

18. Transporter 2 Acknowledgement of Receipt of Materials

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

19. Discrepancy Indication Space

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

Printed/Typed Name: Kim Luster — Signature — Date: Month 6 Day 8 Year 98

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

SAFETY-KLEEN CORP.

90290

6

ORIGINAL-RETURN TO GENERATOR

223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

INSTRUCTIONS FOR COMPLETION OF THIS FORM, REFER CODE OF FEDERAL REGULATIONS 40 PART

BILL OF LADING/MANIFEST	1. Shipper's US EPA ID No. (If Applicable) .WAD 009282161	Document No. 32094	2. Page 1 of 1	44242

3. Shipper's Name and Mailing Address LONGVIEW FIBRE CO SEATTLE
5901 E MARGINAL WAY S
SEATTLE WA 98134

4. Shipper's Phone (206 762-7170

5. Transporter 1 Company Name	6. US EPA ID Number	A. Transporter's Phone
SAFETY-KLEEN CORP.	ILD 984908202	206 939-2022
7. Transporter 2 Company Name	8. US EPA ID Number	B. Transporter's Phone
9. Designated Facility Name and Site Address 000789 SAFETY-KLEEN CORP. 16540 SE 130TH AVE BLDG B CLACKAMAS OR 97015	10. US EPA ID Number ORD 981766124	C. Facility's Phone 503 657-7033

	11. Shipping Name and Description	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a.	COMBUSTIBLE LIQUID,N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (NOT USEPA HAZARDOUS WASTE)(ERG#128)	X	1	DM	55	G
b.						
c.						
d.						
e.						

15. Special Handling Instruction and Additional Information MFST R/T# 95088620 1-181-01-7274
EMERGENCY RESP 800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR.
SEE ATTACHMENT
PP

SKDOT# A: 557 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'S 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.

Printed/Typed Name | Signature required here if US DOT regulated | Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name [illegible] | Sign here if material is not DOT regulated [signature] | Month 03 Day 18 Year 96

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name DAVE HUNTINGTON | Signature [signature] | Month 03 Day 18 Year 96

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name | Signature | Month Day Year

IN EVENT OF EMERGENCY CALL
1-800-468-1760 (24 hours)

GENERATOR'S COPY

safety-kleen. Elgin, Illinois 60123-7857 WE CARE

CUSTOMER NO. 1-181-01-7274

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
253 939-2022	JOHNNY STEVENS	05/16/98	98-11	21	632094

CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
C	337.75	

BUSINESS TYPE	CHAIN	OUTER COUNTY	SVC. P/C	PROD. P/C
09	NO	NO	391	001

LOCATION	TAX EXEMPTION NO.
118101	

CUSTOMER GENERATOR
LONGVIEW FIBRE CO SEATTLE
5901 E MARGINAL WAY S
SEATTLE WA 98134

BILL TO

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	HANDLING CODE	ASSOC. CODE	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
3-18-98	7221		206-762-7170	48-085-7485			.086	.086	.086

	DEPT	SERVICE/ PRODUCT	SERIAL NUMBER	REMARKS/ UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS CLEAN	SPENT	# OF CONT	SK DOT	CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)	(INITIAL)	CHANGE SCH. DATE (YY WW)	INV. CODE	PROMO NO.	RELEASE NO.	MSI G/V
1	00	34150	34014241		1	311.00	26.75	337.75	0.00		23	2	557		12							
2																						
3																						
4																						
5																						
6																						
7																						
8																						
9																						
10																						
11																						
12																						
		TOTAL-SERVICE/PRODUCTS				311.00	26.75	337.75	0.00													

CHECK APPROPRIATE BOXES →

	GOOD	POOR
MACHINE CONDITION & CLEANLINESS	☒	☐
LAMP ASSEMBLY CONDITION	☒	☐

	YES	NO
DECALS IN PLACE AND LEGIBLE	☒	☐
FUSIBLE LINK INSTALLED	☒	☐
EMERGENCY CLOSING OF LID UNOBSTRUCTED	☒	☐
MACHINE PROPERLY GROUNDED	☒	☐
LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	☒	☐
SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	☒	☐

MANIFEST NO.	USEPA TRANSPORTER ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.
32094	ILD984908202	WAD009282161	

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)

	12. CONTAINERS NO.	TYPE	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	5	1	6	3	0	6	5
A. COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (NOT USEPA HAZARDOUS WASTE)(ERG#128)	1	DM	2-3	G	557				1			
B.												
C.												
D.												

I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES.
0 TO 220 LBS./MONTH — RPC INITIALS
220 LBS. TO 2,200 LBS./MONTH — INITIALS
GREATER THAN 2,200 LBS./MONTH — INITIALS

DESIGNATED FACILITY NAME AND ADDRESS SAFETY-KLEEN CORP.
16540 SE 130TH AVE BLDG B CLACKAMAS OR 97015

USA EPA ID NO. ORD981766124
STATE ID NO.

PAYMENT RECEIVED SECTION

CASH ☐ CHECK NUMBER
TOTAL RECEIVED
APPLY PAYMENT TO: ☐ TODAY'S SERVICE/SALE ☐ PREVIOUS BALANCE AS FOLLOWS

INVOICE #	AMOUNT $	INVOICE #	AMOUNT $

PREVIOUS CREDIT CARD NO.
CREDIT CARD NO. AMEX VISA MC EXP. DATE
CUSTOMER REFERENCE INFORMATION

LDR MESSAGE: LDR NOT REQ'D

MANIFEST CODE	SEQ #
6P	1 D

IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.
"This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation."

Robert Cox
Print Customer Name
By: [signature]
Customer's Authorized Representative

THIS AGREEMENT CONTINUES ON THE REVERSE SIDE

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	311.00

DO NOT WRITE IN THE AREA BELOW

632094
1-181-01-7274-5

SERVICE AND SALES ACKNOWLEDGMENT

LFC000724

1-181-01

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: WAD 009282161
Manifest Document No.: 89791
2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
LONGVIEW FIBRE CO SEATTLE
5901 E MARGINAL WAY S
SEATTLE WA 98134
4. Generator's Phone (206) 762-7170

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: SAFETY-KLEEN CORP.
6. US EPA ID Number: ILD 984908202

C. State Transporter's ID
D. Transporter's Phone: 206 933-2022

7. Transporter 2 Company Name: SLT EXPRESS INC
8. US EPA ID Number: UTD 981552425

E. State Transporter's ID
F. Transporter's Phone: 800 621-3047

9. Designated Facility Name and Site Address 000658
SAFETY-KLEEN CORP.
3700 LAGRANGE ROAD
SMITHFIELD KY 40068
10. US EPA ID Number: KYD 053348103

G. State Facility's ID
H. Facility's Phone: 502 845-2453

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	WASH WATER (NOT USDOT OR USEPA HAZARDOUS MATERIAL)		4	DM	1200	P	NONE
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above: 4@1200lbs

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information PP# 789791 MFST R/T# 94673239 1-181-01-7274
EMERGENCY RESP 800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR.
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.
SKDOT# A: 5469 B: C: D:

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

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

Printed/Typed Name | Signature | Date Month Day Year 12 21 01

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] | Signature | Date Month Day Year 12 21 01

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

FACILITY

19. Discrepancy Indication Space

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

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

A/1713697/1066235

SAFETY-KLEEN CORP.

90290 6

GENERATOR COPY

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

INSTRUCTIONS FOR COMPLETION OF THIS FORM, REFER COPY OF FEDERAL REGULATIONS, 40 PART 262.22

One Brickman Way
Elgin, Illinois 60123-7857
safety-kleen.

WE CARE

DUNS NO. 05106-0408 FED. ID NO. 39-6090019

CUSTOMER

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
253 939-2022	JOHNNY STEVENS	02/21/98	97-52	21	358145

CUSTOMER NO.

1	-	1	8	1	-	0	1	-	7	2	7	4

CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
C		

BUSINESS TYPE	CHAIN	OUTER COUNTY	SVC. P/C	PROD. P/C
09	NO	NO	391	001

LOCATION	TAX EXEMPTION NO.
118101	

GENERATOR

LONGVIEW FIBRE CO SEATTLE
5901 E MARGINAL WAY S
SEATTLE WA 98134

BILL TO

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	HANDLING CODE	ASSOC. CODE	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
12-23-97	8324	#SE 712066	206-762-7170	48-085-7485			.086	.086	.086

	DEPT	SERVICE/ PRODUCT	SERIAL NUMBER	UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS CLEAN	SPENT	# OF CONT.	SK DOT	CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)	(INITIAL)	CHANGE SCH. DATE (YY WW)	INV. CODE	PROMO NO.	RELEASE NO.	MSDS GIVEN
1	0088888		01066235	303.00	4	1212-	-	1212							26							
2																						
3																						
4																						
5																						
6																						
7																						
8																						
9																						
0																						

TOTAL-SERVICE/PRODUCTS 1212 - 1212-

CHECK APPROPRIATE BOXES →

	GOOD	POOR
MACHINE CONDITION & CLEANLINESS	☐	☐
LAMP ASSEMBLY CONDITION	☐	☐

	YES	NO
DECALS IN PLACE AND LEGIBLE	☐	☐
FUSIBLE LINK INSTALLED	☐	☐
EMERGENCY CLOSING OF LID UNOBSTRUCTED	☐	☐
MACHINE PROPERLY GROUNDED	☐	☐
LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	☐	☐
SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	☐	☐

MANIFEST NO.	USEPA TRANSPORTER ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.
	ILD984908202	WAD009282161	

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)

12. CON NO.	AINERS TYPE	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER
				5 1 6 3 0 5 5

I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES.

0 TO 220 LBS./MONTH
INITIALS

220 LBS. TO 2,200 LBS./MONTH
INITIALS

GREATER THAN 2,200 LBS./MONTH
INITIALS

DESIGNATED FACILITY NAME AND ADDRESS

USA EPA ID NO.

STATE ID NO.

PAYMENT RECEIVED SECTION

CASH ☐
CHECK NUMBER

TOTAL RECEIVED

APPLY PAYMENT TO:
☐ TODAY'S SERVICE/SALE
☐ PREVIOUS BALANCE AS FOLLOWS

INVOICE #	AMOUNT $	INVOICE #	AMOUNT $

PREVIOUS CREDIT CARD NO. →

CREDIT CARD NO. AMEX VISA MC EXP. DATE

CUSTOMER REFERENCE INFORMATION

LDR MESSAGE
LDR NOT REQ'D

MANIFEST CODE	SEQ #
	2-D

IN THE EVENT OF AN EMERGENCY CALL
1-800-468-1760 (24 hours)

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

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

Print Customer Name

By: Customer's Authorized Representative

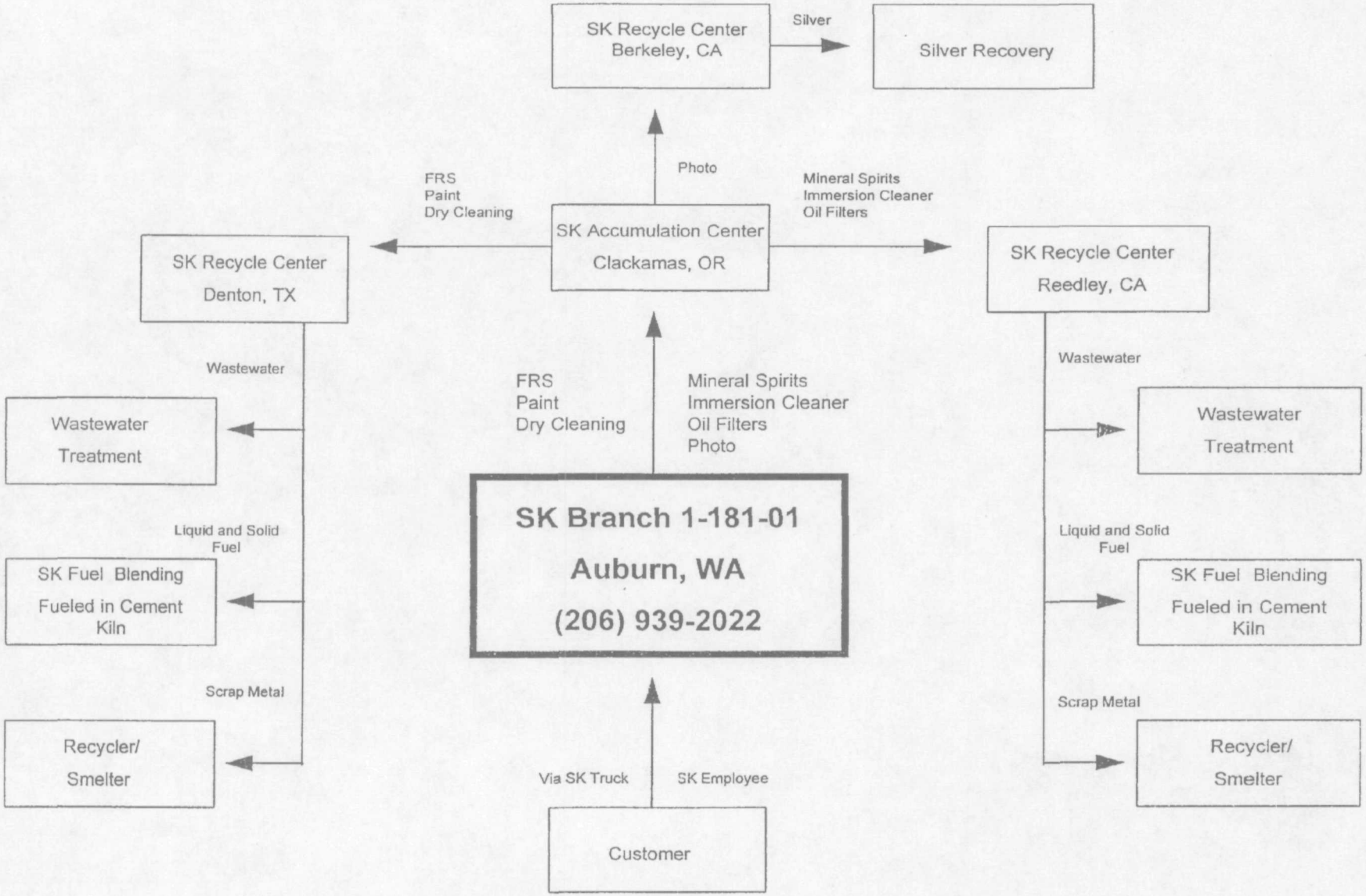
TOTAL CHARGE (FROM ABOVE)	1212
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	1212-

DO NOT WRITE IN THE AREA BELOW

358145
1-181-01-7274-5

SERVICE AND SALES ACKNOWLEDGMENT

LFC000726


SK Recycle Center
Berkeley, CA
Silver
Silver Recovery
Photo
FRS
Paint
Dry Cleaning
SK Accumulation Center
Clackamas, OR
Mineral Spirits
Immersion Cleaner
Oil Filters
SK Recycle Center
Denton, TX
SK Recycle Center
Reedley, CA
Wastewater
Wastewater
Treatment
FRS
Paint
Dry Cleaning
Mineral Spirits
Immersion Cleaner
Oil Filters
Photo
Wastewater
Wastewater
Treatment
Liquid and Solid
Fuel
SK Branch 1-181-01
Auburn, WA
(206) 939-2022
Liquid and Solid
Fuel
SK Fuel Blending
Fueled in Cement
Kiln
SK Fuel Blending
Fueled in Cement
Kiln
Scrap Metal
Scrap Metal
Recycler/
Smelter
Recycler/
Smelter
Via SK Truck
SK Employee
Customer

LFC000727

1000 North Randall Road
Elgin, Illinois 60123-7857

WE CARE.

DUNS NO. 05106-0408 FED. ID NO. 39-6090019

BRANCH 1-181-01 7274

MACHINE PLACEMENT FORM

P 6058

GENERATOR LOCATION

NAME: CHANTILLY FIRE DEPT
DELIVERY ADDRESS: 5101 E. MARGINAL WAY
INFORMATION/ATTENTION LINE: [illegible]
CITY & STATE: SEATTLE WA 98134
TAX CODE: 4180 BUTTA
ZIP:

BILL TO (IF DIFFERENT FROM LOCATION)

NAME
DELIVERY ADDRESS
INFORMATION/ATTENTION LINE
CITY & STATE
ZIP
TAX CODE

SIC CODE

BUSINESS TYPE	CHAIN	ASSOCIATION	SVC. P/C	PROD. P/C

SALES TAX EXEMPTION NUMBER

DATE PLACED	SALES REP NO.	CUSTOMER'S P.O. NUMBER	☐ BLANKET	☐ TEMPORARY	CUSTOMER PHONE NO.	HANDLING CODE	CREDIT CODE	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
[illegible]	[illegible]				206 762 7170					

SERVICE/ PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	SOLVENT CLEAN	SOLVENT SPENT	SOLVENT # OF CONT	SOLVENT SK DOT	CC	SERVICE TERM	SCHEDULE DATE (YY WW)	*FLOAT CODE SEE BELOW	FREE TRIAL	INV. CODE	PROMO NO.	RELEASE NO.	MS GN
[illegible]				50	[illegible]	[illegible]													
[illegible]			1																
[illegible]		oil filters	1	35-	—	35-													
TOTAL-SERVICE/PRODUCTS				35-	-	35-													

REFUSED SERVICE EXPLAIN

WE CARE.

PLACEMENT CODES
(1) NEW APPLICATION
(2) REPLACE DEFECTIVE MACHINE
(3) REPLACE COMPETITIVE MACHINE
(4) REPLACE HOME MADE VAT.
(5) ADDITIONAL MACHINE

MANIFEST NO.	USEPA TRANSPORTER ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.
	ILD984908202		

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)

		12. CONTAINERS NO.	TYPE	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	5	16	30	55
Combustible Liquid N.O.S. (Petroleum Naphtha) 193 PGIII (D001, D006, D008, D018 D035, D039, D040) (ERG #27)	SSPW AND/OR 16 GAL. DRUMS					501				
Waste Combustible Liquid, N.O.S. (Petroleum Naphtha) 193 PGIII (D001, D006, D008, D018, D035, D039, D040) (ERG #27)	30 GAL. DRUMS					585				
Compounds, Cleaning Liquid, (Monoethanolamine) 1760 PGIII (D006 D008, D018, D027, D039, D040) (ERG #60)	PRODUCT NO. 699					950				
Combustible Liquid, N.O.S. (Petroleum Naphtha) 193 PGIII (D008, D018, D039, D040) (ERG #27)	PREMIUM SOLVENT					975				

I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES:
0 TO 220 LBS./MONTH — INITIALS
220 LBS. TO 2,200 LBS./MONTH — INITIALS
GREATER THAN 2,200 LBS./MONTH — INITIALS

DESIGNATED FACILITY NAME AND ADDRESS SAFETY-KLEEN CORP.

USA EPA ID NO.
STATE ID NO.

RECEIVED SECTION

CASH ☐
CHECK NUMBER
TOTAL RECEIVED
APPLY PAYMENT TO: ☐ TODAYS SERVICE/SALE ☐ PREVIOUS BALANCE AS FOLLOWS
INVOICE # AMOUNT $ INVOICE # AMOUNT $
PREVIOUS DIT → NO.
CREDIT CARD NO.
AMEX VISA MC
EXP. DATE
CUSTOMER REFERENCE INFORMATION

LDR MESSAGE
MANIFEST CODE

IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

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

TOTAL CHARGE (FROM ABOVE)
TOTAL DUE 35-

Print Customer Name
By: Customer's Authorized Representative

SEE REVERSE SIDE FOR IMPORTANT INFORMATION

CUSTOMER'S COPY

Form No. 1272 (7/96)

LFC000728

1-181-01

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: WAD 009282161
Manifest Document No.: 39533
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
LONGVIEW FIBRE CO
5901 E MARGINAL WAY
SEATTLE WA 98134
4. Generator's Phone (206)762-7170

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: SAFETY-KLEEN CORP
6. US EPA ID Number: ILD 984908202
C. State Transporter's ID
D. Transporter's Phone: 206 939-2022

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

9. Designated Facility Name and Site Address
000789
SAFETY-KLEEN CORP.
16540 SE 130TH AVE BLDG B
CLACKAMAS OR 97015
10. US EPA ID Number: ORD 981766124
G. State Facility's ID
H. Facility's Phone: 503 657-7033

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. [redacted] COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII ([redacted], [redacted], [redacted]) (ERG#128) 6.7#/GAL	X	1	DM	25	G	[redacted]
b. [redacted] (NOT USDOT OR USEPA REGULATED)			[redacted]		[redacted]	NONE
c.						
d.						

J. Additional Descriptions for Materials Listed Above
(A) [redacted] (Non-USEPA Regulated)

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
IF UNDELIVERABLE, RETURN TO GENERATOR. FOR RECYCLE
EMERGENCY RESPONSE#800-468-1760 24HR.
9715 93323642 439533 1-181-01-7274 21

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

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

SEE ATTACHMENT

Printed/Typed Name: Kim Armstrong
Signature:
Date: Month 04 Day 16 Year 97

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Don Cairney
Signature:
Date: Month 04 Day 16 Year 97

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: Denice Bailey
Signature: Denice Bailey
Date: Month 4 Day 22 Year 97

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

SAFETY-KLEEN CORP.

A: [redacted] B: [redacted] C: D:
557
90290
6

ORIGINAL - RETURN TO GENERATOR

LFC000729

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable): WAD 009282191
Document No.: 34030
2. Page 1 of 1

92852

3. Shipper's Name and Mailing Address: LONGVIEW FIBRE CO SEATTLE
5001 E MARGINAL WAY S
SEATTLE WA 98134

12/19/97

4. Shipper's Phone: 206 763-7171

5. Transporter 1 Company Name: SAFETY-KLEEN CORP.
6. US EPA ID Number: ILD 984305202
A. Transporter's Phone: 206 [illegible]

7. Transporter 2 Company Name:
8. US EPA ID Number:
B. Transporter's Phone:

9. Designated Facility Name and Site Address: 000789
SAFETY-KLEEN CORP
16540 SE 130TH AVE BLDG D
CLACKAMAS OR 97015
10. US EPA ID Number: ORD 981766124
C. Facility's Phone: 503 [illegible] 7033

	11. Shipping Name and Description	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a.	COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (NOT USEPA HAZARDOUS WASTE)(ERG#128)	X	1	DM	4	G
b.						
c.						
d.						
e.						

15. Special Handling Instruction and Additional Information: PP# 334080 MPST R/T# 340 [illegible] 1 [illegible]
EMERGENCY RESP 800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR
SEE ATTACHMENT

MANIFEST# A. [illegible] 357 B [illegible] D.

16a. US DOT HAZARDOUS MATERIALS SHIPPER'S 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.

Printed/Typed Name: [illegible]
Signature required here if US DOT regulated: [illegible]
Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name:
Sign here if material is not DOT regulated:
Month Day Year

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

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

SHIPPER — TRANSPORTER — USE 16A OR 16B

DESIGNATED FACILITY NAME: 16540 SE 130TH A
A. COMBUSTIBLE LIQUID (NOT USEPA HAZARD
B.
C.
D.
TOTAL-SERVICE/PRODUCT
MANIFEST NO.: 34030
11. US DOT DESCRIPTION (INCLUD
USE
PREVIOUS CREDIT CARD NO.
CREDIT CARD NO.
INVOICE #
CASH
CHECK NUMBER
SERVICE DATE
SALES REP NO.
SERVICE/PRODUCT
DEPT
SPECIAL
LONGVIEW FIBRE CO
MARGINAL
SEATTLE WA 9813
CUSTOMER NO.

One Brookman Way
Elgin, Illinois 60123-7857
CUSTOMER NO.

LFC000730

One Brickman Way
Elgin, Illinois 60123-7857
CUSTOMER NO.

WE CARE

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.
206 933-2022	JOHNNY STEVENS	03/24/[illegible]

SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
97-[illegible]	[illegible]	[illegible]

CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 D/
C		

BUSINESS TYPE	CHAIN	OUTER COUNTY	SVC PAC	PRO
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

LOCATION	TAX EXEMPTION NO
[illegible]	

GENERATOR: 1 - 1 A 1 - 9 5 - 7 2 7 4

MAYVIEW FIBRE CO SEATTLE
[illegible] MARCINAL WAY S
SEATTLE WA 98134

BILL TO

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	HANDLING CODE	ASSOC CODE	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
03/19/97	22241		206-762-7330	43-[illegible]			.[illegible]	.[illegible]	.[illegible]

DEPT	SERVICE/ PRODUCT	SERIAL NUMBER	REMARKS	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS CLEAN	SPENT	# OF CONT	SK DOT	CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)	(INITIAL)	CHANGE SCH DATE TO AW.	INV CODE	PROMO NO.	RELEASE NO.
00	34GSC	34014343		1	296.25	25.44	321.7[illegible]	0.00		16	2	557		12						
TOTAL-SERVICE/PRODUCTS					296.25	25.44	321.7[illegible]	0.00												

CHECK APPROPRIATE BOXES →

	GOOD	POOR
MACHINE CONDITION & CLEANLINESS	☑	☐
LAMP ASSEMBLY CONDITION	☐	☐

	YES	NO
DECALS IN PLACE AND LEGIBLE	☑	☐
FUSIBLE LINK INSTALLED	☑	☐
EMERGENCY CLOSING OF LID UNOBSTRUCTED	☑	☐

	YES	NO
MACHINE PROPERLY GROUNDED	☑	☐
LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	☑	☐
SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	☑	☐

MANIFEST NO.	USEPA TRANSPORTER ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.
34GSC	[illegible]	WAC[illegible]2161	

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)

COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PG III
(NOT USEPA HAZARDOUS WASTE)(ERG#128)

12. CONTAINERS NO.	TYPE	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	[illegible]	[illegible]	[illegible]
1	DM	16	G	557			1

I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES:

0 TO 220 LBS./MONTH — INITIALS
220 LBS. TO 2,200 LBS./MONTH — INITIALS
GREATER THAN 2,2[illegible] LBS./MONTH — INITIALS

DESIGNATED FACILITY NAME AND ADDRESS: SAFETY-KLEEN CORP.
26540 SE 130TH AVE BLDG [illegible] CLACKAMAS OR 97015

USA EPA ID NO. [illegible]
STATE ID NO.

PAYMENT RECEIVED

CASH ☐
CHECK NUMBER

TOTAL RECEIVED

APPLY PAYMENT TO:
☐ TODAY'S SERVICE/SALE
☐ PREVIOUS BALANCE AS FOLLOWS

INVOICE #	AMOUNT $	INVOICE #	AMOUNT $

PREVIOUS CREDIT CARD NO. →

CREDIT CARD NO.

AMEX / VISA / MC

EXP. DATE

LDR MESSAGE

LDR NOT REQ'D

MANIFEST CODE	SEQ #
SP	557

IN THE EVENT OF AN EMERGENCY CALL

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

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

Eric Perantie
Print Customer Name

By: Eric Perantie
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	321.73

DO NOT WRITE IN THE AREA BELOW
[illegible]

[illegible]

LFC000731

* 1-181-01

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: WAD 009282161

Manifest Document No.: 22944

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
LONGVIEW FIBRE CO
5901 E MARGINAL WAY
SEATTLE WA 98134

4. Generator's Phone (206) 762-7170

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: SAFETY-KLEEN CORP.

6. US EPA ID Number: ILD 984908202

C. State Transporter's ID

D. Transporter's Phone: 205 939-2022

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address 000789
SAFETY-KLEEN CORP.
16540 SE 130TH AVE BLDG B
CLACKAMAS OR 97015

10. US EPA ID Number: ORD 981766124

G. State Facility's ID

H. Facility's Phone: 503 657-7033

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (D039, D008, D018, D040)(ERG#128)6.7#/GAL	X	1	DM	29	G	D039 D008
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above
(A) D018, D040

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
IF UNDELIVERABLE, RETURN TO GENERATOR. FOR RECYCLE
EMERGENCY RESPONSE#800-468-1760 24HR.
9727 93718719 722944 1-181-01-7274 21

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.
SEE ATTACHMENT
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Date (Month Day Year)

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date (Month Day Year)

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date (Month Day Year)

19. Discrepancy Indication Space

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

Printed/Typed Name | Signature | Date (Month Day Year)

GENERATOR | TRANSPORTER | FACILITY

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

SAFETY-KLEEN CORP.

A: 975 B: C: D:

90290 6

GENERATOR COPY

Public reporting burden for this collection of information is estimated to average 37 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

LFC000732

1-181-01

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: WAD 009282161
Manifest Document No.: 39533
2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
LONGVIEW FIBRE CO
5901 E MARGINAL WAY
SEATTLE WA 98134
4. Generator's Phone (206) 762-7170

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: SAFETY-KLEEN CORP.
6. US EPA ID Number: ILD 984908202
C. State Transporter's ID
D. Transporter's Phone: 206 939-2022

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

9. Designated Facility Name and Site Address
000789
SAFETY-KLEEN CORP.
16540 SE 130TH AVE BLDG B
CLACKAMAS OR 97015
10. US EPA ID Number: ORD 981766124
G. State Facility's ID
H. Facility's Phone: 503 657-7033

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	~~[illegible]~~ COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (~~B039, D008, D018, D040~~) (ERG#128) 6.7#/GAL	X	1	DM	25	G	~~[illegible]~~
b.	~~[illegible]~~ (NOT USDOT OR USEPA REGULATED)			~~DM~~		~~[illegible]~~	NONE
c.							
d.							

J. Additional Descriptions for Materials Listed Above
(A) ~~D018, D040~~ (NON-USEPA Regulated)

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
IF UNDELIVERABLE, RETURN TO GENERATOR. FOR RECYCLE
EMERGENCY RESPONSE#800-468-1760 24HR.
9715 93323642 439533 1-181-01-7274 21

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

SEE ATTACHMENT

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

GENERATOR

Printed/Typed Name	Signature	Date (Month Day Year)
Kim Armstrong	[signature]	04 16 97

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
Don Cairney	[signature]	04 16 97

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Date (Month Day Year)
Denice Bailey	Denice Bailey	4 22 97

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

SAFETY-KLEEN CORP.

A: ~~[illegible]~~ B: ~~[illegible]~~ C: D: 90290 6

557

ORIGINAL-RETURN TO GENERATOR

RECEIVED MAY 01 1997

INSTRUCTIONS FOR COMPLETION OF THIS FORM. REFER CODE OF FEDERAL REGULATIONS, 40, PART 262.20.

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

LFC000733

1-181-01

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: WAD 000284161

Manifest Document No.: 1074

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
LONGVIEW FIBRE CO
5901 E MARGINAE WAY
SEATTLE WA 98134

4. Generator's Phone (206) 762-7170

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: SAFETY-KLEEN CORP.

6. US EPA ID Number: ILD 984906202

C. State Transporter's ID

D. Transporter's Phone: 206 939-2022

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address 000789
SAFETY-KLEEN CORP.
16540 SE 130TH AVE BLDG B
CLACKAMAS OR 97015

10. US EPA ID Number: ORD 981766124

G. State Facility's ID

H. Facility's Phone: (503) 657-7033

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	COMBUSTIBLE LIQUID,N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (NOT USEPA HAZARDOUS WASTE)(ERG#128)	X	1	DM	20	G	NONE
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
MFST R/T# 92852526 1-181-01-7274
EMERGENCY RESP 800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR
SEE ATTACHMENT
SKDGT# A: 537 B: C: D:

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

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

Printed/Typed Name | Signature | Date (Month Day Year)

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date (Month Day Year)

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date (Month Day Year)

19. Discrepancy Indication Space

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

Printed/Typed Name | Signature | Date (Month Day Year)

GENERATOR

TRANSPORTER

FACILITY

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

SAFETY-KLEEN CORP.

90290

6

GENERATOR COPY

LFC000734

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 15 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

INSTRUCTIONS FOR COMPLETION OF THIS FORM, REFER CODE OF FEDERAL REGULATIONS 40 PART 262.20

0-000-00

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. WAD009782161 | Manifest Document No. 69946 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Longview fibre Company
5901 E. Marginal WAY
SEATTLE WA 98134
4. Generator's Phone (206) 762-7170

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: SAFETY-KLEEN CORP.
6. US EPA ID Number: ILD 984908202
C. State Transporter's ID
D. Transporter's Phone: 206 939-2022

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

9. Designated Facility Name and Site Address 000789
SAFETY-KLEEN CORP.
16540 SE 130TH AVE BLDG B
CLACKAMAS OR 97015
10. US EPA ID Number: ORD 981766124
G. State Facility's ID
H. Facility's Phone: 503 657-7033

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (NOT USEPA HAZARDOUS WASTE)(ERG#128)	2	DM	34	G	NONE
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above
a) None
1717

K. Handling Codes for Wastes Listed Above
93269505

15. Special Handling Instructions and Additional Information
MFST R/T# 00000000 1-181-01-7274
EMERGENCY RESP 800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR.
SEE ATTACHMENT
M 69946 SKDOT# A: 557 B: C: D:

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

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

Printed/Typed Name: K Armstrong | Signature: K Armst | Date: Month 03 Day 12 Year 97

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Don Cairney | Signature: D Cairney | Date: Month 03 Day 12 Year 97

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: Denice Bailey | Signature: Denice Bailey | Date: Month 3 Day 18 Year 97

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

SAFETY-KLEEN CORP.

90290 6

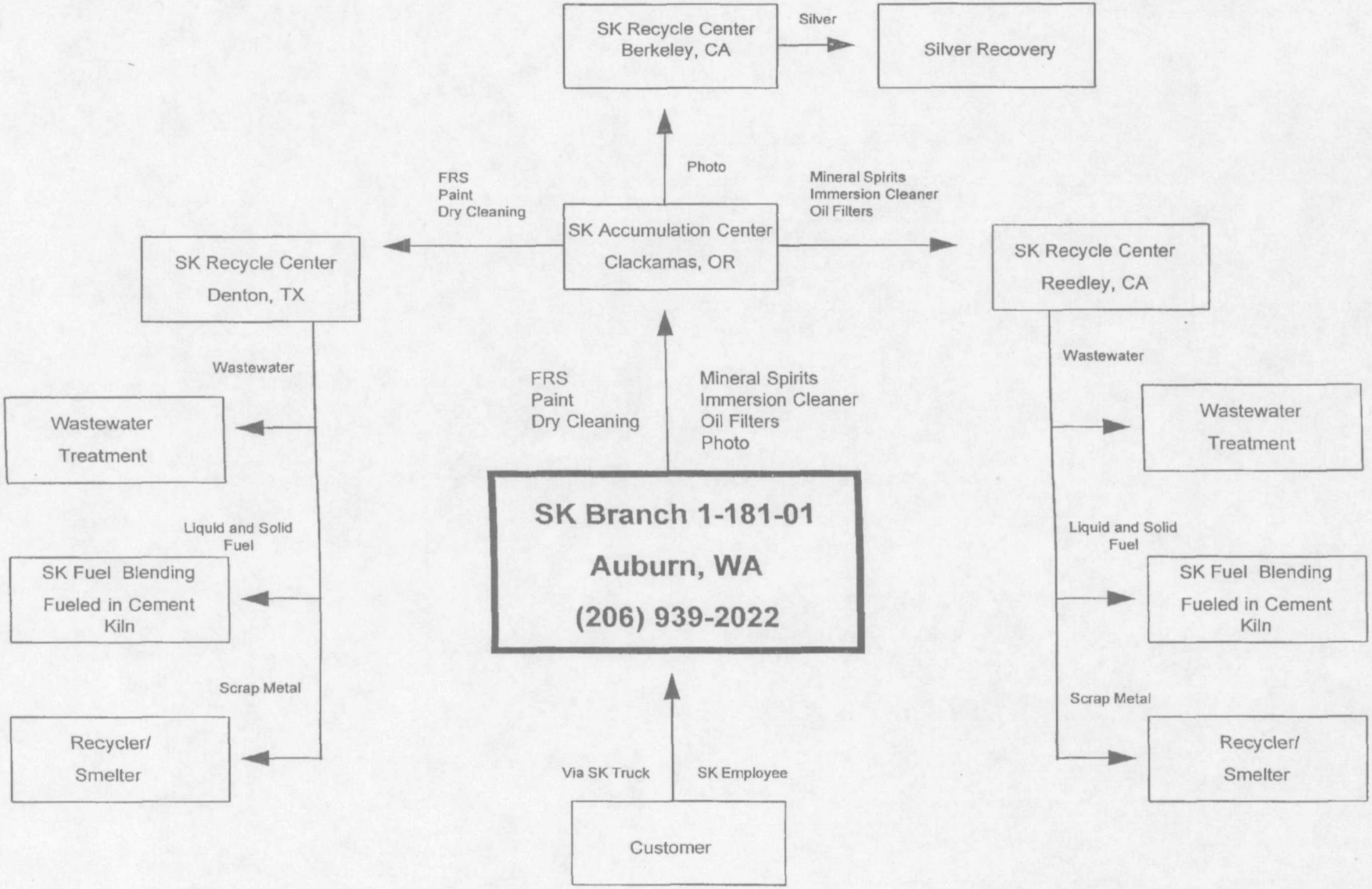
ORIGINAL-RETURN TO GENERATOR

Public reporting burden for this collection of information is estimated to average 30 minutes for generators, 15 minutes for transporters, and 15 minutes for owners/operators of hazardous waste facilities per response including the time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

INSTRUCTIONS FOR COMPLETION OF THIS FORM, REFER CODE OF FEDERAL REGULATIONS 40, PART 262.20

Normal Flow Diagram
for Safety-Kleen's Customer's Waste*

12/95



*Normal Waste Flow may be altered in the event improved processing can be completed at another S-K facility.