JOHN ASHCROFT
Governor

G. TRACY MEHAN III
Director

STATE OF MISSOURI
DEPARTMENT OF NATURAL RESOURCES

Division of Energy
Division of Environmental Quality
Division of Geology and Land Survey
Division of Management Services
Division of Parks, Recreation, and Historic Preservation

DIVISION OF ENVIRONMENTAL QUALITY
Macon Regional Office
Highway 63 North
P.O. Box 489
Macon, MO 63552
816-385-2129

RECEIVED
'91 APR 24 PM 1 50
WASTE MANAGEMENT PROGRAM
MISSOURI DEPARTMENT OF
NATURAL RESOURCES

CERTIFIED MAIL #P 461 505 614
3.800 Ralls
Centerline Industries, Inc.

LOW# 91-NE.011

April 22, 1991

Mr. Leslie Smith, Plant Supervisor
Centerline Industries, Inc.
P.O. Box 211
Saverton, MO 63467

Dear Mr. Smith:

Enclosed is a copy of the Resource Conservation and Recovery Act and Missouri Hazardous Waste Management Law Compliance Evaluation Inspection Report, which I believe is self-explanatory. Please direct your attention to the unsatisfactory features in the report.

Each unsatisfactory feature listed in the report has a subsequent explanation of why it is a violation, including the necessary action to be taken by your facility in order to return to compliance. Please respond to this office in writing, with a copy to the Hazardous Waste Enforcement Unit, Waste Management Program, P.O. Box 176, Jefferson City, MO 65102, no later than May 22, 1991 (30 days). Your response to each unsatisfactory feature should be very specific and should indicate how each item has been or will be corrected and what action has been taken to prevent a reoccurrence. Supporting documents such as photocopies and photographs, where appropriate, should be included with your response to document a return to compliance.

If you have any questions concerning the report, please feel free to contact Don Head in our Northeast Regional Office.

Sincerely,

NORTHEAST REGIONAL OFFICE

Charles S. Decker, P.E.
Regional Administrator

R00129249
RCRA RECORDS CENTER

CSD/DH/cl

Enclosure

cc: Mr. Tom Whitlock, Centerline Industries, Inc.
Mark Twain Regional Council of Governments
Waste Management Program

RESOURCE CONSERVATION AND RECOVERY ACT
AND
MISSOURI HAZARDOUS WASTE MANAGEMENT LAW
COMPLIANCE EVALUATION INSPECTION REPORT

Facility

Centerline Industries, Inc.
Highway 79 South
P.O. Box 211
Saverton, MO 63467
(314) 248-0721

EPA ID: MOD054078324
Mo. Generator ID: 004692

Participants

Department of Natural Resources — Mr. Don Head, Environmental Specialist III, Northeast Regional Office

Centerline Industries, Inc. — Mr. Leslie Smith, Plant Supervisor

Introduction

On April 10, 1991, an inspection was conducted of the hazardous waste management activities at Centerline Industries, Inc. located on Highway 79 South, Ralls County, Missouri, to determine compliance with the Missouri Hazardous Waste Management Law (MHWML) and regulations and the federal Resource Conservation and Recovery Act (RCRA) and regulations. The inspection was conducted under authority of Sections 260.375(9) and 260.377 RSMo.

Facility Description

The Centerline Industries facility in Ralls County, Missouri manufactures and containerizes white and yellow highway striping paint. Various formulas of pigments, solvents, carriers and driers are blended in large mixing tanks and dispensed into 1, 5, 30 and 55-gallon containers for shipment to customers.

Centerline Industries is registered as a large quantity generator of hazardous waste. Waste paint related materials (F003, F005, D007, D008) are generated at about 1,530 kg/month average. Most of the waste is generated at the filter canisters on the paint fill line. According to the plant supervisor, the facility is now doing a better job of segregating the spent paint materials on the fill line so it can be put back into the manufacturing process instead of being handled as a waste product. As a result, future generation of waste paint related materials should be less than the present average. The waste paint related materials are presently being hauled by Clean Up Transport (ARD051962306; H-1568) to Rineco Chemical Industries (ARD981057870) in Benton, Arkansas for use as a supplemental fuel. The facility has also accumulated two 55-gallon drums of waste motor oil (D098) in the past three years.

Unsatisfactory Features (continued)

6. A satellite accumulation container was not marked as required by MHWMC regulation 10 CSR 25-5.262(2)(C)3. referenced to 40 CFR 262.34(c)(ii). There was an unmarked 55-gallon drum partially filled with used paint filters located in the satellite accumulation area at the back side of the paint fill area. All satellite accumulation containers must be labeled as hazardous waste or with other words that identify the contents, and must be marked with the accumulation start date.

7. The waste oil containers were not labeled as required by MHWMC regulation 10 CSR 25-11.010(3)(C)2. Two 55-gallon drums of waste oil located in front of warehouse #1 were unmarked. All waste oil containers which are 5 gallons or larger must be labeled with the words "Waste Oil" in letters at least 1 1/2 inches in height and proportional in width.

8. A waste oil container was not closed as required by MHWMC regulation 10 CSR 25-11.010(3)(C)3. One of the 55-gallon drums of waste oil located in front of warehouse #1 had a loose cover. All waste oil containers which are 5 gallons or larger must be tightly closed at all times except when waste oil is being added into or removed from the container.

SUBMITTED BY:

Don Head

Don Head
Environmental Specialist III
Northeast Regional Office

DH/cl

STATE OF MISSOURI
DEPARTMENT OF NATURAL RESOURCES
P.O. Box 176 (314) 751-3176
Jefferson City, MO 65102

Generator's hazardous waste report summary sheet

part 1
office use only

READ INSTRUCTIONS AND EITHER PRINT OR TYPE

regardless of whether or not any off-site shipment occurred, as a registered generator of hazardous waste you must complete, sign and transmit this form to the department

SECTION A—REPORT IDENTIFICATION

1. type of report (check one) quarterly [x] annual [ ]
2. for the period ending 12 | 31 | 90 (month day year)
3. page 1 of 3

SECTION B—GENERATOR IDENTIFICATION

4. generator's name — CENTERLINE INDUSTRIES, INC.
5. generator's EPA I.D. No. — M O D 0 5 4 0 7 8 3 2 4
6. generator's Missouri I.D. No. — 0 4 6 9 2
7. mailing address —
   street or p.o. box number P.O. BOX 221
   city SAVERTON state MO zip code 63467
8. plant address / location (if different from mailing address) —
   street or route number HWY 79 SOUTH
   city HANNIBAL state MO zip code 63401
9. generator contact person — phone number a.c.(314) 248-0721
   name LES SMITH OR CHARLES SHEARON

SECTION C—STATUS OF WASTE GENERATED (check one)

10. SHIPPED OFF-SITE — [x]
    complete part 2, attach completed hazardous waste manifests, sign certification and transmit to the dept.
11. REGULATED QUANTITY NOT GENERATED — [ ]
    sign certification and transmit to the department

SECTION D—COMMENTS

12.

1 SHIPMENT MANIFEST ATTACHED

RECEIVED
APR 24 1991
WASTE MANAGEMENT PROGRAM
MISSOURI DEPARTMENT OF NATURAL RESOURCES

SECTION E—CERTIFICATION STATEMENT

rtify under penalty of law that I have personally examined and am familiar with the information submitted in this all attached documents and that based on my inquiry of those individuals immediately responsible for obtaining the rmation, I believe that the submitted information is true, accurate, and complete. I am aware that there are ificant penalties for submitting false information, including the possibility of fine and imprisonment.

name Joyce Cox, Pres. signature [illegible] date 11/25/91

DEPARTMENT OF NATURAL RESOURCES
P.O. Box 176
Jefferson City, MO 65102

Generator's Hazardous waste report summary sheet

part 4
office use only

READ INSTRUCTIONS AND PRINT OR TYPE

entries made on this page must summarize the total amount of waste transported off-site to an individual facility during the specified quarter. separate sheets must be completed for each facility utilized

SECTION F—REPORT IDENTIFICATION

1 for the quarter ending

12	32	90
month	day	year

2 page 2 of 3

3 generator's Mo. ID. No. 0 4 6 9 2

SECTION G—FACILITY IDENTIFICATION

4 facility name (name of off-site location where waste was delivered)

RINECO CHEMICAL INDUSTRIES

5 facility's EPA ID. No. A R D 9 8 1 0 5 7 8 7 0

6 facility's Missouri ID. No. N A

7 facility site address (street, city, state and zip code)

1007 VULCAN RD HASKELL
BENTON AR 72015

SECTION H—WASTE IDENTIFICATION

line	8 description of waste	9 DOT hazard code	10 EPA hazardous waste No.	11 total amount of waste	12 unit of measure	13 specific gravity	14 handling code
1	RQ WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID NA1263 (D007,D008)	08	D001 D007 D008 F005	700	G		T·0·3
2	RQ WASTE FLAMMABLE SOLID, N.O.S. FLAMMABLE SOLID (TOLUENE) NA1325 D007D008	08	D001 D007 D008 F005	200	G		T·0·3
3							
4							
5							
6							
7							
8							
9							
10							

SECTION I—TRANSPORTATION SERVICES UTILIZED

15

CLEAN UP TRANSPORT
US EPA ID # ARD051962306
STATE ID # PC927 H239

SECTION J—COMMENTS

16

STATE OF ARKANSAS
Department of Pollution Control and Ecology
P. O. Box 8913 Little Rock, Arkansas 72219-8913
Telephone 501-562-7444

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

Form Approved. OMB No. 2050-0039 Expires 3-31-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MOD054078324 Manifest Document No. 000219

2. Page 1 of 2

Information in the shaded areas is not required by Federal law

3. Generator's Name and Mailing Address
Centerline Paint
Hwy. 79 South/P.O. Box 221 Saverton, MO 63467
Attn: Les Smith

4. Generator's Phone (314)248-0721

A. State Manifest Document Number AR- 425821

B. State Generator's ID

5. Transporter 1 Company Name: Clean Up Transport

6. US EPA ID Number: ARD051962306

C. State Transporter's ID PC 927 H 239

D. Transporter's Phone (501)798-2844

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID PC ____ H ___

F. Transporter's Phone

9. Designated Facility Name and Site Address
Rineco Chemical Industries
1007 Vulcan Rd. - Haskell
Benton, AR. 72015

10. US EPA ID Number: ARD981057870

G. State Facility's ID

H. Facility's Phone 501/778-6325

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ Waste Paint Related Material Flammable Liquid NA1263 (D007, D008)	14	DM	700	G	D001, D007, D008, F005
b. RQ WASTE FLAMMABLE SOLID, N.O.S. FLAMMABLE SOLID (TOLUENE) NA1325 (D007, D008)	14	DM	1200	G	D001, D007, D008, F005
c.					
d.					

J. Additional Descriptions for Materials Listed Above
A. 90-0974

if no alternate TSDF, return to generator

K. Handling Codes for Wastes Listed Above

EMERGENCY RESPONSE INFORMATION:
Les Smith
(314) 248-0721

15. Special Handling Instructions and Additional Information

RECEIVED JAN 11 1991

RECEIVED APR 24 1991 WASTE MANAGEMENT PROGRAM MISSOURI DEPARTMENT OF NATURAL RESOURCES

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 and Arkansas state 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: Charlie Shannon
Signature: Charlie Shannon
Month Day Year: 1 2 1 4 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Ronnie K. King Sr
Signature: Ronnie K. King
Month Day Year: 1 2 1 4 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
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: RAYMOND L. REAGAN
Signature: Raymond L. Reagan
Month Day Year: 1 2 1 5 90

EPA Form 8700-22 (Rev. 9-88) Previous edition is obsolete.

Form LQG-INSP
(10-15-88)

LARGE QUANTITY GENERATOR CHECKLIST

Name of Facility: Centerline Industries, Inc. Date: 4-10-91

Address: Hwy 79 South
P.O. Box 221
Saverton, MO 63467

Other Inspections Done:
RR___ TRANS___ LDR___
OTHER___

Phone: (314) 248-0721 MO ID# 04692 EPA ID# MOD054078324

Facility Representative: Leslie Smith Title: Plant Supervisor

Briefly describe manufacturing process(es). (Use continuation sheet, if needed.)

Produces & containerizes white and yellow highway striping paint. Pigments, solvents, carriers & dryers are blended in large mixing tanks and dispensed into 1, 5, 30 and 55-gallon containers for shipment. Most waste generated on the paint fill line.

List of wastes generated. (Use continuation sheet, if needed.)

Waste	Amount/Month	Disposition
1. Waste Paint liquid (D007, D008)	795 Kg/mo	Rineco Chemicals Benton, Ark. (Supplemental fuel)
2. Waste Flammable Solids (Toluene) F003, F005, D001, 008	734 Kg/mo	Rineco Chemicals Benton, Ark "
3.		
4.		
5.		

A. MANIFESTS AND RECORDKEEPING 10 CSR 25-5.262(2) AND 5.262(2)(B) AND (D)

- Generator's MO and EPA I.D. Numbers. . . . . [redacted]
- Manifest document number (MO I.D. & Shipment #). . . . . [redacted]
- EPA Waste I.D. codes . . . . . ✓
- Generator's name, address, phone # . . . . . ✓
- All Transporters' names, phone #'s, MO and EPA I.D. #'s. . . . . [redacted]
- Designated facility name, address, phone # and MO and EPA I.D. # . . . . ✓
- Proper DOT Shipping Name, Hazard Class and I.D. #. . . . . ✓
- Containers, Quantity and Unit Wt/Vol being shipped properly designated . [redacted]
- Proper certification including waste minimization. . . . . ✓
- Manifest properly signed and dated . . . . . ✓
- No more than 10 days time between generator and facility signatures. . . ✓
- Manifests returned within 35 days. . . . . ✓
- If not, exception generator report submitted within 45 days. . . . . ( )
- Completed manifests and Summary Manifest Report and Certification. . . . ✓
- Spills of reportable quantities reported to DNR. . . . . ✓

B. PRETRANSPORT, CONTAINERIZATION AND LABELING 10 CSR 25-5.262(2) AND 5.262(2)(C)1

- Waste Packaged, marked and labeled per DOT during entire on-site storage period and prior to transport. . . . . ✓
- Placards available for use by transporters . . . . . ✓
- Satellite accumulation requirements met (if applicable). . . . . ✓
  - a. Stored in satellite areas less than 1 year. . . . . ✓
  - b. Containers marked identifying contents and beginning date . . . . [redacted]
  - c. Containers kept closed/compatible/good condition. . . . . ✓
  - d. Quantities accumulated not exceeding 55 gal. (1 qut. acutely hz. waste). . . . . ✓

C. STORAGE STANDARDS 10 CSR 25-5.262(2) AND 5.262(2)(C)2 AND 3

- Facility inspected and maintained. . . . . ✓
- Date of accumulation marked. . . . . ✓
- Storage less than 90 days (unless small quantity generator). . . . . ✓

D. CONTAINER STORAGE 10 CSR 25-5.262(2) AND 5.262(2)(C)2

- Containers in good condition . . . . . ✓
- Containers kept closed in storage. . . . . ✓
- Containers storing incompatible waste separated or protected from each other. . . . . ✓
- Containers of ignitable or reactive waste stored > 50 feet from property line . . . . . ✓
- Containers stored within a containment system (if applicable) meeting criteria of 10 CSR 25-5.262(2)(C)2.B.

16 empl (one shift)
9 years

Hazardous Waste Workers Training Course 8-9-90 Southern Waste mgmt.

E. STORAGE TANKS 10 CSR 25-5.262(2) AND 5.262(2)(C)2.C.
(See tank checklist)

F. PERSONNEL TRAINING 10 CSR 25-5.262(2)

Documentation of hazardous waste director's qualifications or training. (✓) Leslie Smith

Completed classroom or on-the-job training. . . . . (✓)

Job title, description, and name of person filling position . . . . . (✓)

Written record of the type and amount of training given . . . . . (✓)

Documentation confirming that training has been given . . . . . (✓)

G. PREPAREDNESS AND PREVENTION 10 CSR 25-5.262(2) AND 5.262(2)(C)2.E.

Internal communication or alarm system. . . . . (✓)

Device in the hazardous waste operation area capable of summoning emergency assistance. . . . . (✓)

Fire control, spill control, and decontamination equipment available. . (✓)

Adequate water supply for fire control equipment. . . . . (✓)

Adequate and proper safety equipment available. . . . . (✓)

Adequate aisle space. . . . . (✓)

Arrangements with local emergency agencies. . . . . (✓) Hannibal Rural Fire Dept and (Cyanimid for foam)

H. CONTINGENCY PLAN AND EMERGENCY PROCEDURES 10 CSR 25-5.262(2)

Contingency Plan. . . . . (✓)

Detailed description of procedures that personnel must implement to respond to fires, explosions, or releases of hazardous waste. . . . . (✓)

Describe formal arrangements with emergency agencies. . . . . (✓)

Name, addresses, and phone numbers (home & office) of emergency coordinators. . . . . (✓)

Emergency equipment including its description and location. . . . . (✓)

Evacuation plan if applicable . . . . . (✓)

updated Sept 1990 By Southern Waste mgmt. DALLAS, TX

I. WASTE OIL 10 CSR 25-11.010

Written waste oil contract maintained . . (N/A) . . . . . ( ) NONE SHIPPED 1988, 1989 or 1990

Waste oil properly stored and transported . . . . . (—) Need to label 2 drums. "WASTE OIL" Top was loose on one drum.

COMMENTS: Supervisor's training directed by Collette Morrissey
Southern Waste Management
DALLAS, TX 75229

Inspector Signature & Title: Don Hood

Office: MERO

IN COMPLIANCE (✓)

IN VIOLATION OR ABSENT (—)

LAND DISPOSAL RESTRICTION CHECKLIST
FOR F-SOLVENT AND DIOXIN WASTES

Facility: Centerline Industries, Inc
PO Box 221
Sauerton, MO 63467

Date: 4-10-91

Missouri I.D.#: 04692

EPA I.D.#: MOD054078324

Facility Representative: _____

Title: _____

Phone #: 314-248-0721

Facility Status:
- Large Quanity Generator [X]
- Small Quantity Generator [ ]
- Treatment/Storage Facility [ ]
- Land Disposal Facility [ ]
- Permitted [ ]

A. GENERAL

1. Specify the wastes handled by the facility which are subject to the land disposal restrictions:

	EPA Waste Code (F001)	Waste Description
a.	F003, F005	Waste paint related material, liquid
b.	F003, F005	waste paint related material, solid
c.		
d.		

Are these wastes properly classified? Yes ✓ No ____

2. Which, if any, of the following exemptions or extensions apply to this facility?

- Two-year national capacity extension of the effective date for solvent wastes generated by small quantity generators (268.30) [ ]
- Two-year statutory exemption for solvent wastes generated from RCRA corrective or CERCLA Section 104 and 106 response actions (268.30) [ ]
- Two-year national capacity extension of the effective date for solvent-water mixtures, solvent-containing sludges, or solvent-containing soil (non-CERCLA/RCRA corrective action) containing less than 1% total F001-F005 solvent constituent, (268.30) [ ]
- Other, specify (268.4, 268.5, 268.6, 268.31, 268.44) [ ]

3. Has the facility used dilution of a restricted waste as a substitute for adequate treatment to achieve compliance (268.3)?

yes ____ no ✓

4. List facilities to which off-site shipments of restricted wastes have been sent and/or from which shipments have been received.

a. Rineco Chemical Industries
b. _____

B. GENERATOR REQUIREMENTS

1. Generator has adequately tested his wastes using the TCLP, or applied knowledge, or both. [268.7(a)].....(✓)

2. Generator has determined the appropriate treatment standards for his restricted wastes. [268.7 and Subpart D].....(✓)

3. The generator is not sending restricted waste to a land disposal facility for direct land disposal without treatment.....(✓)

4. a. If restricted wastes require treatment prior to land disposal, then the generator has provided notification to the treatment facility with each off-site shipment. [268.7(a)].....(✓)

4. b. If restricted wastes do not require treatment prior to land disposal, then the generator has provided a notification and certification to the LDF that the wastes meet all applicable treatment standards and prohibitions [268.7(a)].....( )

- Certifications properly worded.....( )

5. If the generator's restricted waste is subject to any exemptions or extensions, then the generator has sent notices with each shipment to the LDF stating the waste is exempt. [268.7(a)] N/A

C. TREATMENT/STORAGE FACILITY REQUIREMENTS N/A

1. The facility is not sending restricted waste to a land disposal facility for direct land disposal without treatment.....(

2. The treatment facility has adequately tested its treatment residues using TCLP, or applied knowledge, or both to determine whether or not they meet the applicable treatment standards specified in 268.41 [268.7(b)].....(

3. The facility has modified its waste analysis plan to include the additional testing requirements of 268.7, referenced in 264.13 and 265.13.....(

4. a. If the waste treatment residues do not meet applicable treatment standards or prohibitions, and are sent to another treatment facility prior to land disposal, then the facility complied with the generator notification requirement of 268.7(a). [268.7(b)].....(

4. b. If the treatment residue does not require further treatment prior to land disposal, then the facility submitted to the LDF with each shipment of waste residue a certification that the waste is in compliance with applicable treatment standards. [268.7(b)].....(

- Certifications properly worded.....(

5. The facility's written operating record has been modified, and now includes the documentation required by 264.73(b)(3)(10)(11)(12) or 265.73(b)(3)(8)(9)(10).....(

6. If the facility has stored restricted wastes for greater than one year, then it can satisfactorily demonstrate that the storage has been for the purpose of accumulating an amount necessary to facilitate proper recovery, treatment or disposal (268.50).....(

7. If the treatment facility is permitted, it has made the necessary minor modifications to its permit to allow it to treat restricted wastes not previously specified in the permit (270.42(D)).....(

D. LAND DISPOSAL FACILITY REQUIREMENTS N/A

1. The facility is not land disposing restricted wastes.....( )

2. The land disposal facility has records of notifications and certifications submitted by all applicable generators and storage and treatment facilities for each shipment of waste or waste treatment residue accepted for land disposal. [268.7(c)].....( )

3. The LDF has modified its waste analysis plan in accordance with the additional requirement of 268.7, referenced in 264.13 and 265.13.....( )

4. The LDF has adequately tested the wastes received using TCLP, applied knowledge, or both. [268.7(c)].....( )

5. The facility's written operating record has been modified, and now includes the documentation required by 264.73(b)(3)(10)(13)(14) or 265.73(b)(3)(8)(11)(12).....( )

COMMENTS: _____

Please mark boxes as shown (✓ In compliance [ ] In violation

Inspector's Signature Don Head

Title E.S. III

Office NERO

STATE OF MISSOURI
DEPARTMENT OF NATURAL RESOURCES
P.O. Box 176 (314) 751-3176
Jefferson City, MO 65102

Generator's hazardous waste report summary sheet

part 1
office use only

READ INSTRUCTIONS AND EITHER PRINT OR TYPE

regardless of whether or not any off-site shipment occurred, as a registered generator of hazardous waste you must complete, sign and transmit this form to the department

SECTION A - REPORT IDENTIFICATION

1. type of report (check one) quarterly [X] annual [ ]
2. for the period ending 09 | 30 | 90 (month day year)
3. page 1 of 3

SECTION B - GENERATOR IDENTIFICATION

4. generator's name — CENTERLINE INDUSTRIES, INC.
5. generator's EPA I.D. No. — M.O.D.0.5.4.0.7.8.3.2.4
6. generator's Missouri I.D. No. — 0.4.6.9.2
7. mailing address —
   street or p.o. box number P.O. BOX 221
   city SAVERTON state MO zip code 63467
8. plant address / location (if different from mailing address) —
   street or route number HWY 79 SOUTH
   city HANNIBAL state MO zip code 63401
9. generator contact person — phone number a.c. (314) 248-0721
   name LES SMITH OR CHARLES SHEARON

SECTION C - STATUS OF WASTE GENERATED (check one)

10. SHIPPED OFF-SITE — [X]
    complete part 2, attach completed hazardous waste manifests, sign certification and transmit to the dept.

11. REGULATED QUANTITY NOT GENERATED — [ ]
    sign certification and transmit to the department

SECTION D - COMMENTS

12.

1 SHIPMENT MANIFEST ATTACHED

RECEIVED
APR 24 1991
WASTE MANAGEMENT PROGRAM
MISSOURI DEPARTMENT OF
NATURAL RESOURCES

SECTION E - CERTIFICATION STATEMENT

certify under penalty of law that I have personally examined and am familiar with the information submitted in this d all attached documents and that based on my inquiry of those individuals immediately responsible for obtaining the formation, I believe that the submitted information is true, accurate, and complete. I am aware that there are gnificant penalties for submitting false information, including the possibility of fine and imprisonment.

rint name Joyce Cook signature Joyce Cook date 10/10/90

STATE OF MISSOURI
DEPARTMENT OF NATURAL RESOURCES
P.O. Box 176
Jefferson City, MO 65102

Generator's hazardous waste report summary sheet

part 2
office use only

READ INSTRUCTIONS AND PRINT OR TYPE

entries made on this page must summarize the total amount of waste transported off-site to an individual facility during the specified quarter. separate sheets must be completed for each facility utilized

SECTION F—REPORT IDENTIFICATION

1. for the quarter ending 09 (month) 30 (day) 90 (year)
2. page 2 of 3
3. generator's Mo. ID. No. 0·4·6·9·2

SECTION G—FACILITY IDENTIFICATION

4. facility name
RINECO CHEMICAL INDUSTRIES

5. facility's EPA ID. No. A·R·D·9·8·1·0·5·7·8·7·0

6. facility's Missouri ID. No. ·····N·A

7. facility site address (street, city, state and zip code)
1007 VULCAN RD HASKELL
BENTON AR 72015

SECTION H—WASTE IDENTIFICATION

line	8. description of waste	9. DOT hazard code	10. EPA hazardous waste No.	11. total amount of waste	12. unit of measure	13. specific gravity	14. handling code
1.	RQ WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID NA1263	0.8	D001 D007 D008 F005	1875	P	83	T 0 3
2.	RQ WASTE FLAMMABLE LIQUID NOS (TOLUENE) FLAMMABLE LIQUID UN1993	0.8	D001 D007 D008 F005	7500	P	75	T 0 4
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							

SECTION I—TRANSPORTATION SERVICES UTILIZED

15.
CLEAN UP TRANSPORT
US EPA ID # ARD051062306
STATE ID # PC 927 H 239

SECTION J—COMMENTS

16.
ITEM A RETURNED TO GENERATOR

HAZARDOUS WASTE MANIFESTS

STATE OF ARKANSAS
Department of Pollution Control and Ecology
P. O. Box 9583 Little Rock, Arkansas 72219
Telephone 501-562-7444

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

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MOD054078324 — Manifest Document No. 10018

2. Page 1 of

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

3. Generator's Name and Mailing Address
Centerline Paint
Hwy. 79 South/ P.O. Box 221 Saverton, MO 63467

4. Generator's Phone (314) 248-0721

5. Transporter 1 Company Name: Clean Up Transport — 6. US EPA ID Number: ARD051962306

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

9. Designated Facility Name and Site Address
Rineco Chemical Industries
1007 Vulcan Rd. - Haskell
Benton, AR. 72015 — 10. US EPA ID Number: ARD981057870

A. State Manifest Document Number: AR- 471290 2

B. State Generator's ID

C. State Transporter's ID: PC 927 H 239

D. Transporter's Phone: 501-798-2844

E. State Transporter's ID: PC ____ H ___

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone: 501/778-9089

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Hazardous Waste Solid NOS Orm-e NA9189 (filters)	001	DM	02000	P	D007/D008
b. RQ Waste Paint Related Material Flammable Liquid NA1263 (sludge)	003	DM	01875	P	D001/D007/D008/F005
c. RQ Waste Flammable Liquid NOS (Toluene) Flammable Liquid UN1993 (liquid)	012	DM	07500	P	D001/D007/D008/F005
d.					

J. Additional Descriptions for Materials Listed Above
A. 90-0973 C. 90-0972
B. 90-0974

if no alternate TSDF, return to generator

REC'D SEP 6 1990

K. Handling Codes for Wastes Listed Above

EMERGENCY RESPONSE INFORMATION:
Les Smith
(314) 248-0721

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 and Arkansas state 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: Leslie W. Smith — Signature: Leslie W. Smith — Month Day Year: 08 24 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CLYDE DAVIS — Signature: Clyde Davis — Month Day Year: 08 24 90

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

19. Discrepancy Indication Space
Line A Rejected low BTU

SEP 24 1991
WASTE MANAGEMENT PROGRAM

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: RAYMOND L. REAGAN — Signature: Raymond L. Reagan — Month Day Year: 08 24 90

EPA Form 8700-22 (Rev. 9-88) Previous edition is obsolete.

STATE OF ARKANSAS
Department of Pollution Control and Ecology
P.O. Box 9583 Little Rock, Arkansas 72219
Telephone 501-562-7444

1

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

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MOD054078324 — Manifest Document No. 010118 — 2. Page 1 of — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: Centerline Paint, Hwy. 79 South/ P.O. Box 221, Saverton, MO 63467

4. Generator's Phone: (314) 248-0721

A. State Manifest Document Number: AR- 471290 2

B. State Generator's ID:

5. Transporter 1 Company Name: Clean Up Transport — 6. US EPA ID Number: ARD051962306

C. State Transporter's ID: PC 927 H 239

D. Transporter's Phone: 501-788-2844

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

E. State Transporter's ID: PC H

F. Transporter's Phone:

9. Designated Facility Name and Site Address: Rineco Chemical Industries, 1007 Vulcan Rd. - Haskell, Benton, AR. 72015 — 10. US EPA ID Number: ARD981057870

G. State Facility's ID:

H. Facility's Phone: 501/778-9089

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Hazardous Waste Solid NOS Orm-e NA9189 (Filters) Rejected	001	DM	02000	P	D007/D008
b. RQ Waste Paint Related Material Flammable Liquid NA1263 (sludge)	003	DM	01875	P	D001/D007/D008/F005
c. RQ Waste Flammable Liquid NOS (Toluene) Flammable Liquid UN1993 (liquid)	012	DM	07500	P	D001/D007/D008/F005
d.					

REC'D SEP 10 1990

J. Additional Descriptions for Materials Listed Above: A. 90-0973 C. 90-0972 B. 90-0974

if no alternate TSDF, return to generator

K. Handling Codes for Wastes Listed Above

EMERGENCY RESPONSE INFORMATION: Les Smith (314) 248-0721

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 and Arkansas state 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.

GENERATOR — Printed/Typed Name: Leslie W. Smith — Signature: Leslie W. Smith — Month Day Year: 08 24 90

TRANSPORTER — 17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: CLYDE DAVIS — Signature: Clyde Davis — Month Day Year: 08 24 90

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

FACILITY — 19. Discrepancy Indication Space

APR 24 1991

WASTE MANAGEMENT PROGRAM

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

Printed/Typed Name: RAYMOND L. REAGAN — Signature: Raymond L. Reagan — Month Day Year: 08 24 90

STATE OF MISSOURI
DEPARTMENT OF NATURAL RESOURCES
P.O. Box 176 (314) 751-3176
Jefferson City, MO 65102

Generator's hazardous waste report summary sheet

part 1
office use on

READ INSTRUCTIONS AND EITHER PRINT OR TYPE

regardless of whether or not any off-site shipment occurred, as a registered generator of hazardous waste you must complete, sign and transmit this form to the department

SECTION A—REPORT IDENTIFICATION

1. type of report (check one) quarterly [X] annual [ ]
2. for the period ending 6 | 30 | 90 (month day year)
3. page 1 of 3

SECTION B—GENERATOR IDENTIFICATION

4. generator's name — CENTERLINE INDUSTRIES, INC.
5. generator's EPA I.D. No. — M·O·D·0·5·4·0·7·8·3·2·4
6. generator's Missouri I.D. No. — 0·4·6·9·2
7. mailing address —
   street or p.o. box number P.O. Box 221
   city Saverton state Mo. zip code 63467
8. plant address / location (if different from mailing address) —
   street or route number Hwy. 79 South
   city Hannibal state Mo. zip code 63401
9. generator contact person — phone number a.c. (314) 248-0721
   name Charles Shearon or Les Smith

SECTION C—STATUS OF WASTE GENERATED (check one)

10. SHIPPED OFF-SITE — [X]
    complete part 2, attach completed hazardous waste manifests, sign certification and transmit to the dept.
11. REGULATED QUANTITY NOT GENERATED — [ ]
    sign certification and transmit to the department

SECTION D—COMMENTS

12. 1 Shipment - manifest attached

RECEIVED
APR 24 1991
WASTE MANAGEMENT PROGRAM
DEPARTMENT OF NATURAL RESOURCES

Mailed Certified Rec.t
P-575-969-886
9/4/90

SECTION E—CERTIFICATION STATEMENT

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

print name TOM WHITLOCK signature x Tom Whitlock date x 8-31-90

STATE OF MISSOURI
DEPARTMENT OF NATURAL RESOURCES
P.O. Box 176
Jefferson City, MO 65102

Generator's hazardous waste report summary sheet

part 2
office use only

READ INSTRUCTIONS AND PRINT OR TYPE

entries made on this page must summarize the total amount of waste transported off-site to an individual facility during the specified quarter. separate sheets must be completed for each facility utilized

SECTION F—REPORT IDENTIFICATION

1 for the quarter ending 6 (month) 30 (day) 90 (year)

2 page 2 of 3

3 generator's Mo. ID. No. 0·4·6·9·2

SECTION G—FACILITY IDENTIFICATION

4 facility name
WALL CHEMICAL

5 facility's EPA ID. No. — T N D 9 8 0 8 4 7 0 2 4

6 facility's Missouri ID. No. — N A

7 facility site address (street, city, state and zip code)
552 Rivergate
Memphis, Tn. 38109

SECTION H—WASTE IDENTIFICATION

line	8 description of waste	9 DOT hazard code	10 EPA hazardous waste No.	11 total amount of waste	12 unit of measure	13 specific gravity	14 handling code
1	HAZARDOUS WASTE SOLID, N.O.S. ORM- E NA 9189 (Paint & Soil)	1.5	F005	2500	P	9.4	T·0·4
2							
3							
4							
5							
6							
7							
8							
9							
10							

SECTION I—TRANSPORTATION SERVICES UTILIZED

15
CLEAN UP TRANSPORT
A R D 0 5 1 9 6 2 3 0 6

SECTION J—COMMENTS

16

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

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M|O|D|0|5|4|0|7|8|3|2|4|
Manifest Document No. 1|0|5|0

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Centerline Industries, Inc
P.O. Box 221, Hwy 79S
Bowerton, Mo 63467 (248-0721)
~~CENTERLINE PAINT~~
~~5380 Bircher Blvd. PO Box 6683~~
~~St. Louis, MO 63166-6802~~

4. Generator's Phone (314) ~~389-4555~~

A. State Manifest Document Number 01050

B. State Generator's ID [illegible]

5. Transporter 1 Company Name: Clean UP Transport

6. US EPA ID Number: A|R|D|0|5|1|9|6|2|3|0|6

C. State Transporter's ID

D. Transporter's Phone 501-798-2844

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
Wall Chemical
552 Rivergate
Memphis, TN 38109

10. US EPA ID Number: T|N|D|9|8|0|8|4|7|0|2|4

G. State Facility's ID

H. Facility's Phone 901-774-8146

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.	Hazardous waste solid, NOS ORM-E UN9189 F005	X	01	06 DM	02500	LB. G	F005
b.							
c.							
d.							

RECEIVED APR 24 1991 WASTE MANAGEMENT PROGRAM MISSOURI DEPARTMENT OF NATURAL RESOURCES

J. Additional Descriptions for Materials Listed Above
Paint Soil from Cleanup of Traffic Paint Spill

K. Handling Codes for Wastes Listed Above
Joyce Cook
314-389-4555

15. Special Handling Instructions and Additional Information
Pick up location:
~~Centerline Industries Inc~~
~~5380 Bircher Blvd PO Box 6683~~
~~St. Louis, Mo 63166-6802~~

MAY 6 1990

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: MICHAEL GREENE
Signature: [signature]
Month Day Year: 04 12 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Tommy Ashcraft
Signature: Tommy Ashcraft
Month Day Year: 04 12 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Ron Harrington
Signature: [signature]
Month Day Year: 04 16 90

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: PHILLIP YEAGER
Signature: Philip Yeager
Month Day Year: 04 16 90

Style F15 REV-6 LABELMASTER, Div. of AMERICAN LABELMARK CO., CHICAGO, IL 60646

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

SOUTHERN

P.O. BOX 59847 DALLAS, TEXAS 75229 TEXAS WATS 1-800-442-3065

DALLAS 869-0447 HOUSTON 333-2144

August 16, 1990

Mr. Tom Whitlock
Centerline Industries, Inc.
P.O. Box 6
Ennis, Texas

Dear Tom:

See the attached manifest for the corrections needed to report this shipment.

1. I will send a letter with this same information to Clean-up Transport and Wall Chemical having them make the same corrections on their copy of the manifest.

2. Corrections needed:

   a) Item 3: Change generators name and mailing address as highlighted on the attached copy to: Centerline Industries, Inc.
      P.O. Box 221, Hwy 79 South
      Saverton, Mo 63467.

   b) Item 4: Change phone number to 314-248-0721

   c) Item B: Add State Generator's ID - 04692

   d) Item J: Add statement - Paint & Soil from cleanup of traffic paint spill.

e) Item 15: Add: Pick up Location:
Centerline Industries, Inc.
5380 Bircher Blvd.
P.O. Box 6682
St. Louis, Mo. 63166-6802

Should you have any questions, please call so I can get this situation resolved immediately. I will not proceed until I hear from you.

Sincerely,

Collette Morrissey

Collette Morrissey
Southern Waste Management

STATE OF MISSOURI
DEPARTMENT OF NATURAL RESOURCES
P.O. Box 176 (314) 751-3176
Jefferson City, MO 65102

Generator's hazardous waste report summary sheet

part 1
office use only

READ INSTRUCTIONS AND EITHER PRINT OR TYPE

regardless of whether or not any off-site shipment occurred, as a registered generator of hazardous waste you must complete, sign and transmit this form to the department

SECTION A—REPORT IDENTIFICATION

1 type of report (check one) quarterly [X] annual [ ]

2 for the period ending 03/31/90 (month day year)

3 page 1 of 3

SECTION B—GENERATOR IDENTIFICATION

4 generator's name: CENTERLINE INDUSTRIES INC

5 generator's EPA I.D. No. MOD054078324

6 generator's Missouri I.D. No. 04692

7 mailing address

street or p.o. box number: P.O. Box 221

city: SAVERTON state: MO zip code: 63467

8 plant address / location (if different from mailing address)

street or route number: HWY 79 South

city: HANNIBAL state: MO zip code: 63401

9 generator contact person

name: CHARLES SHEARON OR LES SMITH phone number a.c. (314) 248-0721

SECTION C—STATUS OF WASTE GENERATED (check one)

10 SHIPPED OFF-SITE [X]
complete part 2, attach completed hazardous waste manifests, sign certification and transmit to the dept.

11 REGULATED QUANTITY NOT GENERATED [ ]
sign certification and transmit to the department

SECTION D—COMMENTS

12 1 Shipment manifest attached

RECEIVED
APR 24 1991
WASTE MANAGEMENT PROGRAM
MISSOURI DEPARTMENT OF NATURAL RESOURCES

SECTION E—CERTIFICATION STATEMENT

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

print name: Joyce Cook, Pres. signature: Joyce Cook date: 4/30/90

STATE OF MISSOURI
DEPARTMENT OF NATURAL RESOURCES
P.O. Box 176
Jefferson City, MO 65102

Generator's hazardous waste report summary sheet

part 2
office use only

READ INSTRUCTIONS AND PRINT OR TYPE

entries made on this page must summarize the total amount of waste transported off-site to an individual facility during the specified quarter. separate sheets must be completed for each facility utilized.

SECTION F—REPORT IDENTIFICATION

1 for the quarter ending 03 | 31 | 90 (month day year)

2 page 2 of 3

3 generator's Mo. I.D. No. — 04.6.9.2 —

SECTION G—FACILITY IDENTIFICATION

4 facility name: AMERICAN RESOURCE RECOVERY

5 facility's EPA I.D. No. — TND 9 9 1 2 7 9 4 8 0 1

6 facility's Missouri I.D. No. —

7 facility site address (street, city, state and zip code)
901 E. Bodley
Memphis TN 38106

SECTION H—WASTE IDENTIFICATION

line	8 description of waste	9 DOT hazard code	10 EPA hazardous waste No.	11 total amount of waste	12 unit of measure	13 specific gravity	14 handling code
1	"RQ" Waste Paint Related Material, Flammable Liquid, NA1263 (E.P.A.-Ignitability-F003, F005) "RQ"	08	D001	385	G		T04
2							
3							
4							
5							
6							
7							
8							
9							
10							

SECTION I—TRANSPORTATION SERVICES UTILIZED

15
SCHIBER TRUCK
ILD 006493191
N-1427

SECTION J—COMMENTS

16

STRUCTIONS FOR THE COM-
LETION OF THIS FORM ARE ON A
EPARATE SHEET.
IS DOCUMENT MUST BE USED
OR ALL MISSOURI-DESTINED
HIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES
Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3176

REC'D JAN 10 1990

EMERGENCY RESPONSE
NATIONAL COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT OF NATURAL RESOURCES
314-634-2436

HAZARDOUS WASTE MANIFEST

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

Form Approved. OMB No. 2050-0039, Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MOD054078324
Manifest Document No.: 00016

2. Page 1 of 1

Information in the shaded areas is required by State law.

3. Generator's Name and Mailing Address
Traffic Paint
P.O. Box 221 - Hwy. 79 So. Saverton, MO 63467

A. Missouri Manifest Document Number: 0 10 4 1 6 9 3 2 [redacted] 0 0 1 1 6

B. State Generator's ID - other: 004692

4. Generator's Phone: 314) 248-0721

5. Transporter 1 Company Name: Schiber Truck

6. US EPA ID Number: ILD006493191

C. MO. Transporter's ID: H-1427

D. Transporter's Phone: 618-254-2514

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. MO. Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Resource Recovery
901 E. Bodley
Memphis, TN 38106

10. US EPA ID Number: TND991279480

G. State Facility's ID: N/A

H. Facility's Phone: 901-774-2340

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers		13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. "RQ" Waste Paint Related Material, Flammable Liquid, NA1263 (E.P.A.-Ignitability-F003, F005) "RQ" 1 LB	067	DM	00385	G	EPA WASTE CODE D001/ F003, F005
b.					EPA WASTE CODE
c.					EPA WASTE CODE
d.					EPA WASTE CODE

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

a.
b.
c.
d.

15. Special Handling Instructions and Additional Information
If undeliverable return to generator. In event of spill, fire or other emergency it may be necessary to call N.R.C. at 1-800-424-8802.

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 and applicable state 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 available to me that I can afford.

Printed/Typed Name: Charlie Shearon
Signature: Charlie Shearon
Date: Month 01 Day 03 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MICHAEL KLOPMEIER
Signature: Michael Klopmeier
Date: Month 01 Day 03 Year 90

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: JEFF C. MAYS
Signature: Jeff C. Mays
Date: Month 01 Day 04 Year 90

GENERATOR
TRANSPORTER
FACILITY

MISSOURI DNR FINAL COPY — PART 1

THIS COPY MUST BE SENT BACK TO THE GENERATOR BY THE DESIGNATED FACILITY THEN TRANSMITTED TO THE DEPARTMENT BY THE GENERATOR.

EPA Form 8700-22 (Rev. 9-88) MDNR-HWG 10 PREVIOUS EDITIONS ARE OBSOLETE

STATE OF MISSOURI
DEPARTMENT OF NATURAL RESOURCES
P.O. Box 176 (314) 751-3176
Jefferson City, MO 65102

Generator's hazardous waste report summary sheet

part 1
office use only

READ INSTRUCTIONS AND EITHER PRINT OR TYPE

regardless of whether or not any off-site shipment occurred, as a registered generator of hazardous waste you must complete, sign and transmit this form to the department

SECTION A—REPORT IDENTIFICATION

1 type of report (check one) quarterly [X] annual [ ]

2 for the period ending 03 | 31 | 90 (month day year)

3 page 1 of 3

SECTION B—GENERATOR IDENTIFICATION

4 generator's name — CENTERLINE INDUSTRIES INC

5 generator's EPA I.D. No. M·O·D·O·5·4·0·7·8·3·2·4

6 generator's Missouri I.D. No. 0·4·6·9·2

7 mailing address —

street or p.o. box number P.O. Box 221

city Saverton state MO zip code 63467

8 plant address / location (if different from mailing address) —

street or route number HWY 79 SOUTH

city HANNIBAL state MO zip code 63401

9 generator contact person — phone number a.c. (314) 248-0721

name CHARLES SHEARON OR LES SMITH

SECTION C—STATUS OF WASTE GENERATED (Check one)

10 SHIPPED OFF-SITE — [X]
complete part 2, attach completed hazardous waste manifests, sign certification and transmit to the dept.

11 REGULATED QUANTITY NOT GENERATED — [ ]
sign certification and transmit to the department

SECTION D—COMMENTS

12 1-Shipment manifest attached

RECEIVED
APR 2 : '99

SECTION E—CERTIFICATION STATEMENT

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

print name Joyce Cook, Pres. signature Joyce Cook date 4/30/90

STATE OF MISSOURI
DEPARTMENT OF NATURAL RESOURCES
P.O. Box 176
Jefferson City, MO 65102

Generator hazardous waste report summary sheet

part 2
office use only

READ INSTRUCTIONS AND PRINT OR TYPE

entries made on this page must summarize the total amount of waste transported off-site to an individual facility during the specified quarter. separate sheets must be completed for each facility utilized

SECTION F—REPORT IDENTIFICATION

1 for the quarter ending 03|31|90 (month day year)

2 page 2 of 3

3 generator's Mo. I.D. No. —04692—

SECTION G—FACILITY IDENTIFICATION

4 facility name (name of off-site location where waste was delivered)
CHEM-MET SERVICES

5 facility's EPA I.D. No. — MID096963194

6 facility's Missouri I.D. No. — RRMI03

7 facility site address (street, city, state and zip code)
18550 ALLEN ROAD
WYANDOTTE, MI 48192

SECTION H—WASTE IDENTIFICATION

line	8 description of waste	9 DOT hazard code	10 EPA hazardous waste No.		11 total amount of waste	12 unit of measure	13 specific gravity	14 handling code
1	"RQ" HAZARDOUS WASTE Solid/Liquid NOS ORM-E WASTE Paint Filters with Paint Solids NA9189	0.9	D007	D008	55	G		T04
2	"RQ" HAZARDOUS WASTE Solid/Liquid, NOS, ORM-E Waste Paint Pigment with Dirt, NA9189	0.9	D007	D008	935	G		T04
3								
4								
5								
6								
7								
8								
9								
10								

SECTION I—TRANSPORTATION SERVICES UTILIZED

15 COMMERCIAL SEWER CLEANING CO
IND984866780
H-1613

SECTION J—COMMENTS

16

DNR
MICHIGAN DEPARTMENT OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Please print or type.

Form Approved. OMB No. 2050-0039 Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MOD054078324 Manifest Document No. 00017

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Traffic Paint
P.O. Box 221 - Hwy. 79 So. Saverton, MO 63467

4. Generator's Phone (314) 248-0721

5. Transporter 1 Company Name: Commercial Sewer Cleaning Co.

6. US EPA ID Number: IND984866780

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address
Chem-Met Services, Inc.
18550 Allen Road
Wyandotte, MI 48192

10. US EPA ID Number: MID096963194

A. State Manifest Document Number: MI 1334324
B. State Generator's ID: 004692
C. State Transporter's ID: B-1613
D. Transporter's Phone: 312-782-0020
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID: BRH103
H. Facility's Phone: 313-282-9250

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a.	"RQ" Hazardous Waste Solid/Liquid, NOS, ORM-E Waste Paint Filters with Paint Solids NA9189	1	DM	55	G	D007	H
b.	"RQ" Hazardous Waste Solid/Liquid, NOS, ORM-E Waste Paint Pigment with Dirt, NA9189	17	DM	935	G	D007	H
c.							
d.							

REC'D MAR 26 1990

J. Additional Descriptions for Materials Listed Above
XAnalysis #TRA32402
Analysis #TRA32401
Bill To: American Resource
901 E. Bodley
Memphis, TN 38106

K. Handling Codes for Wastes Listed Above
a/ /
b/ /
c/ /
d/ /

15. Special Handling Instructions and Additional Information
(Also D008)

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: [illegible] | Signature | Date Month Day Year: 3/21/90

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

RECEIVED

19. Discrepancy Indication Space
Line I Needed "H" - OK. Linda, Am Res. Rec.
3-21-90

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Kevin Ecan | Signature: Kevin Ecan | Date Month Day Year: 3 19 90

GENERATOR
TRANSPORTER
FACILITY

FOR SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (Rev. 9/86)

PR 5110 Rev 9/86

NID

MISSOURI DEPARTMENT OF NATURAL RESOURCE
DIVISION OF ENVIRONMENAL QUALITY
WASTE MANAGEMENT PROGRAM
WASTE REPORT FOR A SELECTED REGION, LISTED BY EPA ID

WASTE DESCRIPTION	DOT CODE	EPA WASTE CODE	WASTE AMOUNT	UNIT OF MEASURE	SPECIFIC GRAVITY	3241 HANDLING CODE	RECEIVING FACILITY EPA ID	RECEIVING FACILITY MO ID	CONVERSION TO KKG
BULK CONSOLIDATION	8	F001	725.3333	GAL	1.5	T04	MOD980962849	RR0188	4.1181
GASOLINE	8	F001	17571.6666	GAL	1.5	T04	MOD981505655	RR0188	99.7631
SOLVENTS	8	F002	51159.5000	GAL	1.5	T04	ILD066918327	RR0188	290.4581
FLAMMABLE AQUEOUS WASTE	8	F002	84691.6666	GAL	1.5	T04	IND980590947	RR0188	480.8369
PAINT PIGMENTS	8	F002	153156.3332	GAL	1.5	T04	MOD000610766	RR0188	869.5451
OFF SPEC PRODUCTS	8	F002	1472.3333	GAL	1.5	T04	MOD067944702	RR0188	8.3592
WASTE OIL	8	F002	1250.0000	GAL	1.5	T04	MOD079888871	RR0188	7.0969
BULK CONSOLIDATION	8	F002	725.3333	GAL	1.5	T04	MOD980962849	RR0188	4.1181
GASOLINE	8	F002	17571.6666	GAL	1.5	T04	MOD981505655	RR0188	99.7631
SOLVENTS	8	F003	51159.5000	GAL	1.5	T04	ILD066918327	RR0188	290.4581
SPENT SOLVENT	8	F003	68597.3332	GAL	1.5	T04	ILD085349264	RR0188	389.4614
FLAMMABLE AND COMBUSTIBLE LIQ.	8	F003	2000.0000	GAL	1.5	T04	IND991279480	RR0188	11.3550
TENTS AND TARPS	8	F003	9627.0000	GAL	1.5	T04	MOD000610659	RR0188	54.6573
PAINT PIGMENTS	8	F003	153156.3332	GAL	1.5	T04	MOD000610766	RR0188	869.5451
PAINT, RESIN & VARNISH	8	F003	5029.0000	GAL	1.5	T04	MOD006274732	RR0188	28.5521
OFF SPEC PRODUCTS	8	F003	1472.3333	GAL	1.5	T04	MOD067944702	RR0188	8.3592
BULK CONSOLIDATION	8	F003	725.3333	GAL	1.5	T04	MOD980962849	RR0188	4.1181
GASOLINE	8	F003	17571.6666	GAL	1.5	T04	MOD981505655	RR0188	99.7631
STILL BOTTOMS	15	F003	216720.6666	LBS	N/A	T04	IND980590947	RR0188	98.3045
BULK CONSOLIDATION	8	F004	725.3333	GAL	1.5	T04	MOD980962849	RR0188	4.1181
GASOLINE	8	F004	17571.6666	GAL	1.5	T04	MOD981505655	RR0188	99.7631
SOLVENTS	8	F005	51159.5000	GAL	1.5	T04	ILD066918327	RR0188	290.4581
SPENT SOLVENT	8	F005	68597.3332	GAL	1.5	T04	ILD085349264	RR0188	389.4614
BLENDING MATERIAL	8	F005	16994.6666	GAL	1.5	T04	IND093219012	RR0188	96.4872
FLAMMABLE AQUEOUS WASTE	8	F005	84691.6666	GAL	1.5	T04	IND980590947	RR0188	480.8369
FLAMMABLE AND COMBUSTIBLE LIQ.	8	F005	2000.0000	GAL	1.5	T04	IND991279480	RR0188	11.3550
OFF SPEC PRODUCTS	8	F005	1472.3333	GAL	1.5	T04	MOD067944702	RR0188	8.3592
BULK CONSOLIDATION	8	F005	725.3333	GAL	1.5	T04	MOD980962849	RR0188	4.1181
GASOLINE	8	F005	17571.6666	GAL	1.5	T04	MOD981505655	RR0188	99.7631
STILL BOTTOMS	15	F005	216720.6666	LBS	N/A	T04	IND980590947	RR0188	98.3045
STILL BOTTOMS	15	K024	216720.6666	LBS	N/A	T04	IND980590947	RR0188	98.3045
									==========
									19720.4785

GENERATOR	CONTACT	SIC CODE(S)	COUNTY (REGION)	EPA ID	MO ID
TRAFFIC PAINT MANUFACTURING HWY 79 S. HANNIBAL, MO 63401	CHARLES SHEARON (314) 248-0721	2851	[redacted] Ralls (MACON)	MOD054078324	004692

WASTE DESCRIPTION	DOT CODE	EPA WASTE CODE	WASTE AMOUNT	UNIT OF MEASURE	SPECIFIC GRAVITY	HANDLING CODE	RECEIVING FACILITY EPA ID	RECEIVING FACILITY MO ID	CONVERSION TO KKG
FLAMMABLE SOLIDS	9	D001	2393.7500	GAL	1.5	T04	TND991279480	RRTN15	13.5905
HAZARDOUS WASTE SOLID	9	D007	583.3332	GAL	1.5	T04	MOD981123391	RR0133	3.3119
HAZARDOUS WASTE SOLIDS	9	D008	546.6666	GAL	1.5	T04	MOD981123391	RR0133	3.1037
FLAMMABLE SOLID	9	D008	1058.7500	GAL	1.5	T04	TND991279480	RRTN15	6.0111
FLAMMABLE SOLIDS	9	F003	233.7500	GAL	1.5	T04	TND991279480	RRTN15	1.3271
FLAMAMBLE LIQUID	8	F005	27.5000	GAL	1.5	T04	TND991279480	RRTN15	0.1561
FLAMMABLE SOLIDS	9	F008	206.2500	GAL	1.5	T04	TND991279480	RRTN15	1.1710
									==========
									28.6714

GENERATOR	CONTACT	SIC CODE(S)	COUNTY (REGION)	EPA ID	MO ID
WATLOW INDUSTRIES, INC. 401 S. MAPLE HANNIBAL, MO 63401	THOMAS LYONS (314) 221-2816	3629	MARION (MACON)	MOD056963200	003273

WASTE DESCRIPTION	DOT CODE	EPA WASTE CODE	WASTE AMOUNT	UNIT OF MEASURE	SPECIFIC GRAVITY	HANDLING CODE	RECEIVING FACILITY EPA ID	RECEIVING FACILITY MO ID	CONVERSION TO KKG
TRICHLOROETHANE/ACETONE	8	D001	18.3333	GAL	1.2	T04	MID980615298	RRMI05	0.0833
MINERAL SPIRITS & OIL	1	D001	2600.0000	LBS	N/A	T04	MOD980971626	HH0020	1.1794