SPECIAL WASTE DISPOSAL NOTIFICATION
PROFILE NUMBER 394323 Rev. Date: 10/15/98

GENERATOR INFORMATION

Generator Name: Milbank Manufacturing Technical Contact: Roger Glendening
(Location of Waste)
Street Address: 1400 E. Havens

City/Town: Kokomo State: IN Zip: 46901-3184

Emergency Response Phone Number: 765/452.5694 Origin of Waste (by County): Howard

WASTE INFORMATION

Waste Name	Certification No. (if applicable)	Verification No. (if applicable)	Profile Expiration	Category A or B
WWT Filter Cake	80144	N/A	07/30/01	N/A

Please check the appropriate box (to be completed by Generator)

✓ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of the waste.

( ) 1 The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined that the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste. (Describe change here)_____

( ) 1 The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined that this change did not cause a change in regulatory status. (Describe change here)_____

( ) 1 The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary).

I hereby certify that the above information is true and accurate to the best of my knowledge.

Rich and Tyler PLANT MGR. Richard Tyler 5-24-01
Name (print or type) and Title Signature Date (MM/DD/YY)

DISPOSAL SITE INFORMATION

Site Name: Oak Ridge FP Number: 09-2
Amount:

Authorized Signature Date (MM/DD/YY)

1 – If a change is made in the waste process or raw materials and the waste is being shipped under a current Certification Number, attach documentation from IDEM acknowledging acceptability of the change under that Certification. Indiana regulations 329 IAC 10-8.1-9(I) prohibits further disposal of the waste unless such documentation is provided.

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (Facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (The special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, these photocopied signatures will be considered to have the same authority as original signature.