SDMS US EPA REGION V -1

SOME IMAGES WITHIN THIS DOCUMENT MAY BE ILLEGIBLE DUE TO BAD SOURCE DOCUMENTS.

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0776463

Authorization Number 811508

Rockford Division Borg-Warner Corp. (Company Name) | 2020 Harrison Ave (Address) | 815 633 7460 (Phone Number) | 2 0 1 0 3 0 0 0 6 6 (Generator Number)

Rockford (City) | Illinios (State) | 61101 (Zip) | EPA Number

WASTE HAULER(S)

AAA Disposal System (Hauler Name) | Hwy. 51 & Frontage Rd. Roscoe, Ill. (Hauler Address) | S.W.H. Registration Number 0 1 0 6 | 815 226 9803 (Phone Number) | EPA Number

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Belvidere/MIG Investment (Facility Name) | Bus. Rt. 20 (Address) | 0 0 7 0 0 5 0 2 (Site Number)

Belvidere (City) | Illinios (State) | 61008 (Zip) | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME Grind, Shot Blast, Weld Mix | WASTE PHASE Bulk(Solid, liq. powder (Liquid, Gaseous, Solid) Sludge)

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

SHIPPING DESCRIPTION | HAZARD CLASS: Non-Hazardous | UN or NA Number | EPA HW Number

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE _____

WASTE HAULER

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

1. _____ (Authorized Signature) DATE 1/10/84

2. _____ (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE: YES _____ NO _____

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

_____ (Authorized Signature) DATE 1/10/84

COMMENTS OR SPECIAL INSTRUCTIONS _____

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

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

REV. # 4

RT005629

SITE COPY - PART 3

AAA DISPOSAL SYSTEMS, INC.

P.O. Box 359, Roscoe, Il. 61073

Phone: Rockford 226-9803 Beloit 389-3933

Packer Truck Service ( ) Yards ( ) Gal.

Containerized . . . . . .

Compacted . . . . . .

Loose . . . . . .

Drums . . . . . .

Load . . . . . .

Misc.

CUSTOMER NO. 105371

CUSTOMER NAME Borg Warner

SERVICE ADDRESS

Roll Off Container Service (✓) Yards ( ) Gal.

Containerized 12

Compacted . . . . . .

Liquid Disposal . . . . . .

Misc.

ROUTE NO. 1/10/84 ROUTE SEQUENCE NO.

DATE DRIVER Roy CUSTOMER SIGNATURE

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

TO BE COMPLETED BY WASTE GENERATOR

ULL0465

Authorization Number

Rockford Div.
Borg-Warner Corp. (Company Name) | 2020 Harrison Ave. (Address) | 8 15 6 33 74 60 (Phone Number) | 2 0 1 0 3 0 0 0 6 6 (Generator Number)
Rockford (City) | Illinios (State) | 61101 (Zip) | EPA Number

WASTE HAULER(S)

AAA Disposal (Hauler Name) | Hwy 51 & Frontage RD. Roscoe Il. (Hauler Address) | S.W.H. Registration Number 0 1 0 6 C05
8 15 2 26 9 80 3 (Phone Number) | EPA Number

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Belvidere/MIG Investment Bus. Rt. 20 (Facility Name, Address) | 0 0 7 0 0 5 0 2 (Site Number)
Belvidere (City) | Illinois (State) | 61008 (Zip) | Phone Number | EPA Number

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME Grind, Shot Blast, Weld Mix | WASTE PHASE Bulk(Solid,Liq, Powder (Liquid Gaseous Solid) Sludge)

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

SHIPPING DESCRIPTION | HAZARD CLASS
Non-Hazardous | UN or NA Number | EPA HW Number

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL | QUANTITY OF WASTE DELIVERED ____ | 1 GALLONS (Circle One) 2 CU. YDS 12

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 1-23-84

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE 1 23 84

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

[signature] (Authorized Signature) DATE 1-23-84

COMMENTS OR SPECIAL INSTRUCTIONS ____

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

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

REV # 4

RT005642

SITE COPY - PART 3

AAA DISPOSAL SYSTEMS, INC.

P.O. Box 359, Roscoe, Il. 61073

Phone: Rockford 226-9803 Beloit 389-3933

Packer Truck Service ( ) Yards ( ) Gal.

Containerized . . . . . _____

Compacted . . . . . _____

Loose . . . . . _____

Drums . . . . . _____

Load . . . . . _____

Misc. _____

CUSTOMER NO. _____ 106585

CUSTOMER NAME Colg Warner

SERVICE ADDRESS

Roll Off Container Service (✓) ~~Yards~~ ( ) Gal.

Containerized 12

Compacted . . . . . _____

Liquid Disposal . . . . . _____

Misc. _____

ROUTE NO. _____ ROUTE SEQUENCE NO. _____

DATE 1/23/84 DRIVER Roy CUSTOMER SIGNATURE [signature]

105371

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0825619

Authorization Number

Rockford Div. Borg-Warner Corp. (Company Name) | 2020 Harrison Ave. (Address) | 815-633-7460 (Phone Number) | 2 0 1 0 3 0 0 0 6 6 G (Generator Number)

Rockford (City) | Illinios (State) | 61101 (Zip) | EPA Number

WASTE HAULER(S)

AAA Disposal (Hauler Name) | Hwy 51 & Frontage Rd. Roscoe Il. (Hauler Address) | S W H Registration Number 0 1 0 6 (Phone Number) | EPA Number

815-226-9803

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Belvidere/MIG Investment (Facility Name) | Bus. Rt. 20 (Address) | 0 0 7 0 0 5 0 2 (Site Number)

Belvidere (City) | Illinios (State) | 61008 (Zip) | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Grind, Shot Blast, Weld Mix. WASTE PHASE: Bulk (Solid, Liq, Powder Sludge) (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION | HAZARD CLASS: Non-Hazardous | UN or NA Number | EPA HW Number

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE _____

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE 2/10/84

(2) _____ (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

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

Vernon Rhodes (Authorized Signature) DATE 2/10/84

COMMENTS OR SPECIAL INSTRUCTIONS _____

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

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

REV # 4

SITE COPY—PART 3

RT005592

AAA DISPOSAL SYSTEMS, INC.

P.O. Box 359, Roscoe, Il. 61073

Phone: Rockford 226-9803 Beloit 389-3933

Packer Truck Service ( ) Yards ( ) Gal.

Containerized . . . . . .

Compacted . . . . . .

Loose . . . . . .

Drums . . . . . .

Load . . . . . .

Misc.

CUSTOMER NO. 106012

CUSTOMER NAME Colg Karrer

SERVICE ADDRESS

Roll Off Container Service (✓) Yards ( ) Gal.

Containerized 12

Compacted . . . . . .

Liquid Disposal . . . . . .

Misc.

ROUTE NO. ROUTE SEQUENCE NO.

DATE 2/10/84 DRIVER Ray CUSTOMER SIGNATURE [illegible]

R W000053

IL 532 61
IEC 62 8 6

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0825620
1 7

Authorization Number 8 13

Rockford Div. Borg-Warner Corp. (Company Name) | 2020 Harrison Ave. (Address) | 815-633-7460 (Phone Number) | 2 0 1 0 3 0 0 0 6 6 G (Generator Number) 14 24

Rockford (City) | Illios (State) | 61101 (Zip) | EPA Number

WASTE HAULER(S)

AAA Disposal (Hauler Name) | Hwy 51 & Frontage Rd. Roscoe Il. (Hauler Address) | S W H Registration Number 0 1 0 6 C C 25 31

Phone Number | EPA Number

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Belvidere/MIG Investment (Facility Name) | Bus. Rt. 20 (Address) | 0 0 7 0 0 5 0 2 (Site Number) 39 46

Belvedere (City) | Illios (State) | 61008 (Zip) | Phone Number | EPA Number

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME Grind, Shot Blast, Weld Mix. WASTE PHASE Bulk (Solid, Liq, Powder Sludge) (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION | HAZARD CLASS Non-Hazardous | UN or NA Number | EPA HW Number

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE _____

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE 2/22/84 54 59

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

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

[signature] (Authorized Signature) DATE 2/22/84

COMMENTS OR SPECIAL INSTRUCTIONS _____

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

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

REV # 4

SITE COPY–PART 3

RT005571

AAA DISPOSAL SYSTEMS, INC.

P.O. Box 359, Roscoe, Il. 61073

Phone: Rockford 226-9803 Beloit 389-3933

Packer Truck Service ( ) Yards ( ) Gal.

Containerized . . . . . _____

Compacted . . . . . _____

Loose . . . . . _____

Drums . . . . . _____

Load . . . . . _____

Misc. _____

CUSTOMER NO. _____ 105707

CUSTOMER NAME Folg Warner

SERVICE ADDRESS

Roll Off Container Service ~~( ) Yards~~ ( ) Gal.

Containerized 1

Compacted . . . . . _____

Liquid Disposal . . . . . _____

Misc. _____

ROUTE NO. _____ ROUTE SEQUENCE NO. _____

DATE 2/27/84 DRIVER [illegible] CUSTOMER SIGNATURE [illegible]

0825621

AAA Disposal — Hauler Name
Hwy 51 & Frontage Rd. Roscoe Il. — Hauler Address
S W H Registration Number 0 1 0 6 / 65 (25 – 31)
Phone Number
EPA Number

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Belvidere/MIG Investment — (Facility Name)
Bus. Rt. 20 — Address
0 0 7 0 0 5 0 2 (39 – 46) Site Number

Belvidere — City
Illinios — State
61008 — Zip
Phone Number
EPA Number

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

City
State
Zip
Phone Number
EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME Grind, Shot Blast, Weld Mix.
WASTE PHASE Bulk(Solid,Liq,Powder Sludge) (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION
HAZARD CLASS
Non-Hazardous
UN or NA Number
EPA HW Number

WEIGHT FOR D O T USE _____ LBS TONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU YDS OR GAL
QUANTITY OF WASTE DELIVERED (47 – 52)
1 ~~GALLONS~~ (Circle One)
2 CU YDS 12 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Mark J Hughes (Authorized Signature) DATE 3 7 84

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE 3 / 7 / 84 (54 – 59)

(2) _____ (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

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

Vernon Rhoder (Authorized Signature) DATE 3 / 7 / 84 (60 – 65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

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

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

REV # 4

RT005542

SITE COPY–PART 3

TO BE COMPLETED BY WASTE GENERATOR

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

Authorization Number _____ 8 — 13

Rockford Div. Berg-Harmar Corp. (Company Name) | 2020 Harrison Ave. (Address) | 815-633-7460 (Phone Number) | 2 0 1 0 3 0 0 0 6 6 G (14 — Generator Number — 24)

Rockford (City) | Illinois (State) | 61101 (Zip) | _____ EPA Number

WASTE HAULER(S)

AAA Disposal (Hauler Name) | Hwy 51 & Frontage Rd. Roscoe Il. (Hauler Address) | S W H Registration Number 0 1 0 6 (25 — 31)

_____ Phone Number | _____ EPA Number

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

_____ Phone Number | _____ EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Belvidere/MIG Investment Bus. Rt. 20 (Facility Name — Address) | 0 0 7 0 0 5 0 2 (39 — Site Number — 46)

Belvidere (City) | Illinois (State) | 61008 (Zip) | _____ Phone Number | _____ EPA Number

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

_____ City | _____ State | _____ Zip | _____ Phone Number | _____ EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Grind, Shot Blast, Weld Mix. WASTE PHASE: Bulk (Solid, Liq, Powder (Liquid, Gaseous, Sludge) Sludge)

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

SHIPPING DESCRIPTION | HAZARD CLASS | _____ DOT UN/NA Number | _____ EPA UNI Number

_____ Non-Hazardous

WEIGHT FOR D.O.T. USE _____ LBS Total (Gross) | WEIGHT FOR U.S. EPA USE MUST BE CONVERTED TO CU. YDS. BELOW | QUANTITY OF WASTE BEING SHIPPED _____ 1 GALLONS (Circle One) 2 CU. YDS. (35)

METHOD OF SHIPMENT (Circle One): [illegible]

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE [illegible] PROPERLY [illegible] FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE [illegible] OF TRANSPORTATION [illegible]

I HEREBY AGREE TO AND CERTIFY THE [illegible] Date _____

WASTE HAULER

[illegible] ACCURACY AND [illegible] RESPONSIBILITY [illegible]

(1) _____ Date _____

(2) _____ Date _____

DISPOSAL, STORAGE OR TREATMENT FACILITY [illegible]

I HEREBY CERTIFY THAT THE [illegible]

_____ Authorized Signature

_____ Date

[illegible]

[illegible]

[illegible]

GENERATOR COPY—PART 5

AAA DISPOSAL SYSTEMS, INC.

P.O. Box 359, Roscoe, Il. 61073

Phone: Rockford 226-9803 Beloit 389-3933

Packer Truck Service ( ) Yards ( ) Gal.

Containerized . . . . . .

Compacted . . . . . .

Loose . . . . . .

Drums . . . . . .

Load . . . . . .

Misc.

CUSTOMER NO. 105734

CUSTOMER NAME Borg Warner

SERVICE ADDRESS

Roll Off Container Service ( ) Yards ( ) Gal.

Containerized 12

Compacted . . . . . .

Liquid Disposal . . . . . .

Misc.

3-74 Y

ROUTE NO. 3/7/84 ROUTE SEQUENCE NO.

DATE 3/7/84 DRIVER Kay CUSTOMER SIGNATURE Mary Hughes

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0825622

Authorization Number ____ 8 ____ 13

Rockford Div. Borg-Warner Corp. (Company Name) | 2020 Harrison Ave (Address) | 815-633-7460 (Phone Number) | 2 0 1 0 3 0 0 0 6 6 G (Generator Number) 14 24

Rockford (City) | Illinios (State) | 61101 (Zip) | EPA Number

WASTE HAULER(S)

AAA Disposal (Hauler Name) | Hwy 51 & Frontage Rd. Roscoe Il. (Hauler Address) | S.W.H. Registration Number 0 1 0 6 1 1 6 (25 31)

Phone Number | EPA Number

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Belvidere/MIG Investment (Facility Name) | Bus. Rt. 20 (Address) | 0 0 7 0 0 5 0 2 (Site Number) 39 46

Belvidere (City) | Illinios (State) | 61008 (Zip) | Phone Number | EPA Number

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME Grind, Shot Blast, Weld Mix WASTE PHASE Bulk(Solid,Liq,Powder Sludge) (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION | HAZARD CLASS: Non-Hazardous | UN or NA Number | EPA HW Number

WEIGHT FOR D.O.T. USE ____ LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL | QUANTITY OF WASTE DELIVERED ____ 47 52 | 1. GALLONS (Circle One) 2. CU. YDS. 12 53

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Mark J Hughes (Authorized Signature) DATE 3/19/84

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE 3/19/84 54 59

(2) ____ (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

Vernon Rhodes (Authorized Signature) DATE 3/19/84 60 65

COMMENTS OR SPECIAL INSTRUCTIONS ____

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

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

REV # 4

SITE COPY–PART 3

RT005534

AAA DISPOSAL SYSTEMS, INC.

P.O. Box 359, Roscoe, Il. 61073

Phone: Rockford 226-9803 Beloit 389-3933

CUSTOMER NO. NO. 1

CUSTOMER NAME Bob Warne

SERVICE ADDRESS

Packer Truck Service ( ) Yards ( ) Gal.

Containerized

Compacted

Loose

Drums

Load

Misc.

Roll Off Container Service ( ) ~~Yards~~ ( ) Gal.

Containerized 12

Compacted

Liquid Disposal

Misc.

ROUTE NO.

ROUTE SEQUENCE NO.

DATE 3/19/84 DRIVER Tony CUSTOMER SIGNATURE Mary Hayes

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0825623

Authorization Number ___ (8–13)

Rockford Div. Borg-Warner (Company Name) | 2020 Harrison Ave. (Address) | 815-633-7460 (Phone Number) | 2 0 1 0 3 0 0 0 6 6 G (14–24) Generator Number

Rockford (City) | Illinios (State) | 61101 (Zip) | EPA Number

WASTE HAULER(S)

AAA Disposal (Hauler Name) | Hwy 51 & Frontage Rd. Roscoe Il. (Hauler Address) | S W H Registration Number 0 1 0 6 (25–31) | Phone Number | EPA Number

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Belvidere/MIG Investment (Facility Name) | Bus Rt. 20 (Address) | 0 0 7 0 0 5 0 2 (39–46) Site Number

Belvidere (City) | Illinios (State) | 61008 (Zip) | Phone Number | EPA Number

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

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME Grind, Shot Blast, Weld Mix. WASTE PHASE Bulk(Solid,Liq,Powder (Liquid, Gaseous, Solid) Sludge)

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

SHIPPING DESCRIPTION | HAZARD CLASS: Non-Hazardous | UN or NA Number | EPA HW Number

WEIGHT FOR D O T USE ___ LBS / TONS (circle one) | WEIGHT FOR I E P A USE MUST BE CONVERTED TO CU YDS OR GAL | QUANTITY OF WASTE DELIVERED ___ (47–52) | 1 GALLONS (Circle One) / 2 CU YDS | 12 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ___ (Authorized Signature) DATE 1 2 8 1

WASTE HAULER

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

(1) ___ (Authorized Signature) DATE 4 / 2 / 84 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ___

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

___ (Authorized Signature) DATE 4 / 2 / 84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS ___

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

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

REV # 4

RT005506

SITE COPY–PART 3

AAA DISPOSAL SYSTEMS, INC.

P.O. Box 359, Roscoe, Il. 61073

Phone: Rockford 226-9803 Beloit 389-3933

CUSTOMER NO. NO. 5

CUSTOMER NAME
SERVICE ADDRESS Borg Warner

Packer Truck Service ( ) Yards ( ) Gal.

Containerized

Compacted

Loose

Drums

Load

Misc.

Roll Off Container Service (~~) Yards~~ ( ) Gal.

Containerized 12

Compacted

Liquid Disposal

Misc. Restocked

ROUTE NO.

ROUTE SEQUENCE NO.

DATE 4/2/84

DRIVER Ray

CUSTOMER SIGNATURE Mary Hughes

IL 532-6
IPC 128

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0825624

Authorization Number

Rockford Div. Borg-Warner (Company Name) | 2020 Harrison Ave. (Address) | 815-633-7460 (Phone Number) | 2 0 1 0 3 0 0 0 6 6 G (Generator Number)

Rockford (City) | Illinios (State) | 61101 (Zip) | EPA Number

WASTE HAULER(S)

AAA Disposal (Hauler Name) | Hwy 51 & Frontage Rd. Roscoe Il. (Hauler Address) | S W H Registration Number 0 1 0 6 CC | Phone Number | EPA Number

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Belvidere/MIG Investment (Facility Name) | Bus Rt. 20 (Address) | 0 0 7 0 0 5 0 2 (Site Number)

Belvidere (City) | Illinios (State) | 61008 (Zip) | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME Grind, Shot Blast, Weld Mix. WASTE PHASE Bulk(Solid,Liq,Powder (Liquid, Gaseous, Solid) Sludge)

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

SHIPPING DESCRIPTION | HAZARD CLASS | UN or NA Number | EPA HW Number

Non-Hazardous

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) DATE 4/11/

WASTE HAULER

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

(1) (Authorized Signature) DATE 4/11/84

(2) (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

(Authorized Signature) DATE 4/11/84

COMMENTS OR SPECIAL INSTRUCTIONS ____

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

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

REV 8 4

RT005483

SITE COPY–PART 3

AAA DISPOSAL SYSTEMS, INC.

P.O. Box 359, Roscoe, Il. 61073

Phone: Rockford 226-9803 Beloit 389-3933

CUSTOMER NO. NO. 6

CUSTOMER NAME
SERVICE ADDRESS Borg Warner

Packer Truck Service ( ) Yards ( ) Gal.

Containerized . . . . . .

Compacted . . . . . .

Loose . . . . . .

Drums . . . . . .

Load . . . . . .

Misc.

Roll Off Container Service ( ) Yards ( ) Gal.

Containerized 12

Compacted . . . . . .

Liquid Disposal . . . . . .

Misc.

ROUTE NO. ROUTE SEQUENCE NO.

DATE 4/11/84 DRIVER Ray CUSTOMER SIGNATURE Mark Hughes 4-11-84

0825625

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

Authorization Number ____ (8 – 13)

Rockford Div. Borg-Warner (Company Name) | 2020 Harrison Ave. (Address) | 815-633-7460 (Phone Number) | 2 0 1 0 3 0 0 0 6 6 G (Generator Number) (14 – 24)

Rockford (City) | Illinios (State) | 61101 (Zip) | ____ (EPA Number)

WASTE HAULER(S)

AAA Disposal (Hauler Name) | Hwy 51 & Frontage Rd. Roscoe Il. (Hauler Address) | S W H Registration Number 0 1 0 6 (25 – 31)

____ (Phone Number) | ____ (EPA Number)

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

____ (Phone Number) | ____ (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Belvidere/MIG Investment (Facility Name) | Bus. Rt. 20 (Address) | 0 0 7 0 0 5 0 2 (Site Number) (39 – 46)

Belvidere (City) | Illinios (State) | 61008 (Zip) | ____ (Phone Number) | ____ (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME Grind, Shot Blast, Weld Mix. WASTE PHASE Bulk (Solid, Liq, Powder Sludge) (Liquid Gaseous Solid)

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

SHIPPING DESCRIPTION ____ HAZARD CLASS Non-Hazardous ____ UN or NA Number ____ EPA HW Number

WEIGHT FOR D O T USE ____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU YDS OR GAL QUANTITY OF WASTE DELIVERED ____ (47 – 52) 1 GALLONS (Circle One) 2 CU YDS 12 (53)

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 4-27-84

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE 4/27/84 (54 – 59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

[signature] (Authorized Signature) DATE 4/27/84 (60 – 65)

COMMENTS OR SPECIAL INSTRUCTIONS ____

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

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

REV # 4

SITE COPY–PART 3

RT005455

AAA DISPOSAL SYSTEMS, INC.

P.O. Box 359, Roscoe, Il. 61073

Phone: Rockford 226-9803 Beloit 389-3933

Packer Truck Service ( ) Yards ( ) Gal.

Containerized . . . . . _____

Compacted . . . . . _____

Loose . . . . . _____

Drums . . . . . _____

Load . . . . . _____

Misc. _____

CUSTOMER NO. _____ 001421

CUSTOMER NAME Bolg Warne

SERVICE ADDRESS

Roll Off Container Service (~~) Yards~~ ( ) Gal.

Containerized 12

Compacted . . . . . _____

Liquid Disposal . . . . . _____

Misc. _____

ROUTE NO. _____ ROUTE SEQUENCE NO. _____

DATE 4/27/84 DRIVER [illegible] CUSTOMER SIGNATURE [illegible]

B W000085

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0825627

Authorization Number

Rockford Div. Borg-Warner (Company Name) | 2020 Harrison Ave. (Address) | 815-633-7460 (Phone Number) | 2 0 1 0 3 0 0 0 6 6 G (Generator Number)

Rockford (City) | Illinios (State) | 61101 (Zip) | EPA Number

WASTE HAULER(S)

AAA Disposal (Hauler Name) | Hwy 51 & Frontage Rd. Roscoe Il. (Hauler Address) | S W H Registration Number 61 [illegible]

Phone Number | EPA Number

Hauler Name | Hauler Address | S W H Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Belvidere/MIG Investment (Facility Name) | Bus. Rt. 20 (Address) | 0 0 7 0 0 5 0 2 (Site Number)

Belvidere (City) | Illinios (State) | 61008 (Zip) | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME Grind, Shot Blast, Weld Mix. WASTE PHASE Bulk (Solid, Liq, Powder Sludge) (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION | HAZARD CLASS Non-Hazardous | UN or NA Number | EPA HW Number

WEIGHT FOR D O T USE _____ LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU YDS OR GAL | QUANTITY OF WASTE DELIVERED _____ 1 GALLONS (Circle One) 2 CU YDS 12

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 5 15 84

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE 5 / 15 / 84

(2) _____ (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

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

[signature] (Authorized Signature) DATE 5 / 15 / 84

RT005411

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 4[illegible] 02 or 202 / 426-2675

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

REV # 4

SITE COPY–PART 3

AAA DISPOSAL SYSTEMS, INC.

P.O. Box 359, Roscoe, Il. 61073

Phone: Rockford 226-9803 Beloit 389-3933

Packer Truck Service ( ) Yards ( ) Gal.

Containerized . . . . . .

Compacted . . . . . .

Loose . . . . . .

Drums . . . . . .

Load . . . . . .

Misc.

CUSTOMER NO. 002375

CUSTOMER NAME Borg Warner

SERVICE ADDRESS

Roll Off Container Service ~~( ) Yards~~ ( ) Gal.

Containerized 12

Compacted . . . . . .

Liquid Disposal . . . . . .

Misc.

ROUTE NO. ROUTE SEQUENCE NO.

DATE 5/15/84 DRIVER Kay CUSTOMER SIGNATURE Mary Kay

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0940503

Authorization Number

Rockford Div. Borg-Warner (Company Name) | 2020 Harrison Ave. (Address) | 815-633-7460 (Phone Number) | 2 0 1 0 3 0 0 0 6 6 (Generator Number)

Rocford (City) | Illinios (State) | 61101 (Zip) | EPA Number

WASTE HAULER(S)

AAA Disposal (Hauler Name) | Hwy 51 & Frontage Rd. Roscoe Il. (Hauler Address) | S.W.H. Registration Number 0 1 0 6 OCE

815-226-9803 (Phone Number) | EPA Number

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Belvidere/MIG Investment (Facility Name) | Bus. Rt. 20 (Address) | 0 0 7 0 0 5 0 2 (Site Number)

Belvidere (City) | Illinios (State) | 61008 (Zip) | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME Grind,Shot Blast,Weld Mix. WASTE PHASE Bulk(Solid,Liq,Powder (Liquid, Gaseous, Solid) Sludge)

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

SHIPPING DESCRIPTION | HAZARD CLASS

Non-Hazardous | UN or NA Number | EPA HW Number

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED | GALLONS (Circle One) / CU. YDS. 12

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 6-6-84

WASTE HAULER

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

(1) Ray Brunsmeyer (Authorized Signature) DATE 6 6 84

(2) ____ (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

Vernon Rhoda (Authorized Signature) DATE 6/6/84

RT005381

COMMENTS OR SPECIAL INSTRUCTIONS ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV 8 4

SITE COPY - PART 3

AAA DISPOSAL SYSTEMS, INC.

P.O. Box 359, Roscoe, Il. 61073

Phone: Rockford 226-9803 Beloit 389-3933

Packer Truck Service ( ) Yards ( ) Gal.

Containerized . . . . . .

Compacted . . . . . .

Loose . . . . . .

Drums . . . . . .

Load . . . . . .

Misc.

CUSTOMER NO. 002981

CUSTOMER NAME Bob Werner

SERVICE ADDRESS

Roll Off Container Service ( ) Yards ( ) Gal.

Containerized 12

Compacted . . . . . .

Liquid Disposal . . . . . .

Misc.

ROUTE NO. ROUTE SEQUENCE NO.

DATE 6/6/88 DRIVER Ray CUSTOMER SIGNATURE Mary Hughes

R 000000

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0940504

Authorization Number

Rockford Div. Borg-Warner (Company Name) | 2029 Harrison Ave. (Address) | 815-633-7460 (Phone Number) | 2 0 1 0 3 0 0 0 6 6 G (Generator Number)

Rockford (City) | Illinios (State) | 61101 (Zip) | EPA Number

WASTE HAULER(S)

AAA Disposal (Hauler Name) | Hwy 51 & Frontage Rd. Roscoe Il. (Hauler Address) | S W H Registration Number 0 1 0 6 0 0 1

815-226-9803 (Phone Number) | EPA Number

Hauler Name | Hauler Address | S W H Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Belvidere/MIC Investment (Facility Name) | Bus. Rt. 20 (Address) | 0 0 7 0 0 5 0 2 (Site Number)

Belvidere (City) | Illinios (State) | 61008 (Zip) | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME Grind,Shot Blast,Weld Mix. WASTE PHASE Bulk(Solid,Liq,Powder (Liquid, Gaseous Solid) Sludge)

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

SHIPPING DESCRIPTION | HAZARD CLASS: Non-Hazardous | UN or NA Number | EPA HW Number

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Mary Hughes (Authorized Signature) DATE 7-13-84

WASTE HAULER

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

(1) Kirk Roberts (Authorized Signature) DATE 7/13/84

(2) AAA (Authorized Signature) DATE 7/13/84

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

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

Vernon Rhodes (Authorized Signature) DATE 7/13/84

COMMENTS OR SPECIAL INSTRUCTIONS _____ RT005319

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV 8 4

SITE COPY - PART 3

AAA DISPOSAL SYSTEMS, INC.

P.O. Box 359, Roscoe, Il. 61073

Phone: Rockford 226-9803 Beloit 389-3933

Packer Truck Service ( ) Yards ( ) Gal.

Containerized . . . . . .

Compacted . . . . . .

Loose . . . . . .

Drums . . . . . .

Lead . . . . . .

Misc.

CUSTOMER NO. 004982

CUSTOMER NAME B Warner

SERVICE ADDRESS

Roll Off Container Service ( ) Yards ( ) Gal.

Containerized . . . . . .

Compacted . . . . . .

Liquid Disposal . . . . . .

Misc.

ROUTE NO. ROUTE SEQUENCE NO.

DATE 7-13-84 DRIVER Corkey CUSTOMER SIGNATURE

R 000071

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0940505

Authorization Number

Rockford Div. Borg-Warner. (Company Name) | 2020 Harrison Ave. (Address) | 815-633-7460 (Phone Number) | 2 0 1 0 3 0 0 0 6 6 G (Generator Number)

Rockford (City) | Illinios (State) | 61101 (Zip) | EPA Number

WASTE HAULER(S)

A A A Disposal (Hauler Name) | Hwy 51 & Frontage Rd. Roscoe IL. (Hauler Address) | S W H Registration Number 0 1 0 6 001

815-226-9803 (Phone Number) | EPA Number

Hauler Name | Hauler Address | S W H Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Belvidere/MIC Investment Bus. Rt. 20 (Facility Name) (Address) | 0 0 7 0 0 5 0 2 (Site Number)

Belvidere (City) | Illinios (State) | 61008 (Zip) | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME Grind,ShotBlast,Weld Mix. WASTE PHASE Bulk(Solid,Liq,Powder (Liquid, Gaseous, Solid) Sludge)

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

SHIPPING DESCRIPTION | HAZARD CLASS | UN or NA Number | EPA HW Number

Non-Hazardous

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Mark Hugh (Authorized Signature) DATE 7-13-84

WASTE HAULER

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

(1) Kirk Roberts (Authorized Signature) DATE 7/13/84

(2) AAA (Authorized Signature) DATE 7/13/84

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

Vernon Rhodes (Authorized Signature) DATE 7/13/84

COMMENTS OR SPECIAL INSTRUCTIONS

RT005318

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3

AAA DISPOSAL SYSTEMS, INC.

P.O. Box 359, Roscoe, Il. 61073

Phone: Rockford 226-9803 Beloit 389-3933

Packer Truck Service ( ) Yards ( ) Gal.

Containerized . . . . . .

Compacted . . . . . .

Loose . . . . . .

Drums . . . . . .

Load . . . . . .

Misc.

CUSTOMER NO. 004933

CUSTOMER NAME B - Warner

SERVICE ADDRESS

Roll Off Container Service (✓) Yards ( ) Gal. 15

Containerized . . . . . .

Compacted . . . . . .

Liquid Disposal . . . . . .

Misc.

ROUTE NO. ROUTE SEQUENCE NO.

DATE 7-13-92 DRIVER CUSTOMER SIGNATURE

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0940508

Authorization Number

Rockford Div. Borg-Warner (Company Name) | 2020 Harrison Ave. (Address) | 815-633-7460 (Phone Number) | 2 0 1 0 3 0 0 0 5 9 (Generator Number)

Rockford (City) | Illinios (State) | 61101 (Zip) | EPA Number

WASTE HAULER(S)

AAA Disposal (Hauler Name) | Hwy 51 & Frontage Rd. Roscoe Il. (Hauler Address) | S W H Registration Number 0 1 0 6 005

815-226-9803 (Phone Number) | EPA Number

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Belvidere/MIG Investment Bus. Rt. 20 (Facility Name, Address) | 0 0 7 0 0 5 0 2 (Site Number)

Belvidere (City) | Illinios (State) | 61008 (Zip) | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME Grind, Shotblast, Weldmix | WASTE PHASE Bulk (Solid, Liq, Powder (Liquid, Gaseous, Solid) Sludge)

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

SHIPPING DESCRIPTION | HAZARD CLASS | UN or NA Number | EPA HW Number

Non-Hazardous

WEIGHT FOR D O T USE ____ LBS / TONS (circle one) | WEIGHT FOR I.E P A USE MUST BE CONVERTED TO CU YDS OR GAL | QUANTITY OF WASTE DELIVERED ____ 1 GALLONS (Circle One) 2 CU YDS 12

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Mark J Hughes (Authorized Signature) DATE 10/3/84

WASTE HAULER

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

(1) Ray Bunkemeyer (Authorized Signature) DATE 10 3 84

(2) ____ (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

Vernon Rhoades (Authorized Signature) DATE 10/3/84

COMMENTS OR SPECIAL INSTRUCTIONS ____

RT005204

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 / 426-2675

DISTRIBUTION PART 1 GENERATOR PART 2 IEPA PART 3 SITE PART 4 HAULER PART 5 IEPA PART 6 GEN.

REV # 4

SITE COPY - PART 3

AAA DISPOSAL SYSTEMS, INC.

P.O. Box 359, Roscoe, Il. 61073

Phone: Rockford 226-9803 Beloit 389-3933

Packer Truck Service ( ) Yards ( ) Gal.

Containerized . . . . . .

Compacted . . . . . .

Loose . . . . . .

Drums . . . . . .

Load . . . . . .

Misc.

CUSTOMER NO. 011984

CUSTOMER NAME

SERVICE ADDRESS

Roll Off Container Service ( ) Yards ( ) Gal.

Containerized . . . . . .

Compacted . . . . . .

Liquid Disposal . . . . . .

Misc.

ROUTE NO. ROUTE SEQUENCE NO.

DATE 10/1/89 DRIVER CUSTOMER SIGNATURE

R 5
LPC 62 8 81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0940509

Authorization Number ____ 8 ____ 13

Rockford Div. Borg-Warner (Company Name) | -2020 HarrisonAve. (Address) | 815-633-7460 (Phone Number) | 2 0 1 0 3 0 0 0 5 9 G (14 Generator Number 24)

Rockford (City) | Illinios (State) | 61101 (Zip) | ____ EPA Number

WASTE HAULER(S)

AAA Disposal (Hauler Name) | Hwy 51 & Frontage Rd. Roscoe Il. (Hauler Address) | S W H Registration Number 0 1 0 6 005 (25 31)

815-226-9803 (Phone Number) | ____ EPA Number

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

____ Phone Number | ____ EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Belvidere/MIG Investment (Facility Name) | Bus. Rt. 20 (Address) | 0 0 7 0 0 5 0 2 (39 Site Number 46)

Belvidere (City) | Illinios (State) | 61008 (Zip) | ____ Phone Number | ____ EPA Number

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME Grind, Shotblast, Weld Mix | WASTE PHASE Bulk (Solid, Liq, Powder Sludge) (Liquid, Gaseous, Solid)

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

SHIPPING DESCRIPTION ____ | HAZARD CLASS Non-Hazardous | ____ UN or NA Number | ____ EPA HW Number

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

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

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

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 9-12-84

WASTE HAULER

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

(1) Roy Brinkmeyer (Authorized Signature) RT005233 DATE 9/12/84 (54 59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

Vernon Rhodes (Authorized Signature) DATE 9/12/84 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3

AAA DISPOSAL SYSTEMS, INC.

P.O. Box 359, Roscoe, Il. 61073

Phone: Rockford 226-9803 Beloit 389-3933

Packer Truck Service ( ) Yards ( ) Gal.

Containerized . . . . . _____

Compacted . . . . . _____

Loose . . . . . _____

Drums . . . . . _____

Load . . . . . _____

Misc. _____

CUSTOMER NO. _____ 011293

CUSTOMER NAME Bolg Warren

SERVICE ADDRESS

Roll Off Container Service (✓) Yards ( ) Gal.

Containerized 12

Compacted . . . . . _____

Liquid Disposal . . . . . _____

Misc. _____

ROUTE NO. _____ ROUTE SEQUENCE NO. _____

DATE 4/12/04 DRIVER [illegible] CUSTOMER SIGNATURE [illegible] 9/12

R W000077

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

LPC 628 81

Please print or type (Form designed for use on elite (12-pitch) typewriter) **EPA Form 8700-22 (3-84)** Form Approved OMB No. 2000-0404 Expires

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal law but is required by Illinois law

GENERATOR

3. Generator's Name and Mailing Address: Rockford Div., Borg-Warner Corp.
2020 Harrison Avenue
Rockford, Illinois 61101

4. Generator's Phone (815) 633-7460

A. Illinois Manifest Document Number: IL 1216479

B. Illinois Generator's ID: 2 0 1 0 3 0 0 0 5 9

5. Transporter 1 Company Name: AAA Disposal

6. US EPA ID Number

C. Illinois Tranporter's ID: 0 1 0 6

D. (815) 226-9003 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
Belvidere/MIG Investment
Bus. Rt. 20
Belvidere, Illinois 61108

10. US EPA ID Number

G. Illinois Facility's ID: 0 0 7 0 0 5 0 0 0 2

H. Facility's Phone ( )

	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.	Grind, Shotblast, Weld Mix Non-Hazardous		001	CM	0012	2	EPA HW Number / Authorization Number 81 1 50 8
b.							EPA HW Number / Authorization Number
c.							EPA HW Number / Authorization Number
d.							EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
In Item #14: 1 = Gallons
2 = Cubic Yards

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 governmental regulations, and Illinois regulations.

Printed/Typed Name: Mark J. Hughes | Signature: Mark J. Hughes | Date: Month 10 Day 31 Year 84

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: TONY McCONNELL | Signature: Tony McConnell | Date: Month 10 Day 31 Year 84

18. Transporter 2 Acknowledgement or Receipt of Materials

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

FACILITY

19. Discrepancy Indication Space

RT005160

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 10 Day 31 Year 84

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

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

AAA DISPOSAL SYSTEMS, INC.

P.O. Box 359, Roscoe, Il. 61073

Phone. Rockford 226-9803 Beloit 389-3933

Packer Truck Service ( ) Yards ( ) Gal.

Containerized . . . . . _____

Compacted . . . . . _____

Loose . . . . . _____

Drums . . . . . _____

Load . . . . . _____

Misc. _____

CUSTOMER NO. _____ 013530

CUSTOMER NAME BORGWARNER

SERVICE ADDRESS

Roll Off Container Service (✓) Yards ( ) Gal.

Containerized 12

Compacted . . . . . _____

Liquid Disposal . . . . . _____

Misc. _____

ROUTE NO. _____ ROUTE SEQUENCE NO. _____

DATE 10-31-84 DRIVER [illegible] CUSTOMER SIGNATURE [illegible]

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8 81

Please print or type (Form designed for use on elite (12-pitch) typewriter) **EPA Form 8700-22 (3-84)** Form Approved OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal law, but is required by Illinois law

3. Generator's Name and Mailing Address
Rockford Div. Borg-Warner Corp
2020 Harrison Ave.
Rockford, Illinois 61101

A. Illinois Manifest Document Number
IL 1216480

B. Illinois Generator's ID [illegible]

4. Generator's Phone (815) 633-7460

5. Transporter 1 Company Name
AAA Disposal

6. US EPA ID Number

C. Illinois Transporter's ID [illegible]

D. ( ) [illegible] Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
Belvidere/MIC Investment
Bus. Rt. 20
Belvidere, Illinois 61108

10. US EPA ID Number

G. Illinois Facility [illegible]

H. [illegible]

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.		Grind, Shotblast, Weld Mix. Non-Hazardous			12	2	EPA HW Number / Authorization Number
b.							EPA HW Number / Authorization Number
c.							EPA HW Number / Authorization Number
d.							EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above
[illegible]

K. Handling Codes for Wastes Listed Above
In Item #14: 1 = Gallons
2 = Cubic Yards

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 governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
MARK J HUGHES	[signature]	11 30 84

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
RAY Brinkmeyer	[signature]	

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

19. Discrepancy Indication Space
RT005106

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)
VERNON RHODES	[signature]	11 30 84

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

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

AAA DISPOSAL SYSTEMS, INC.

P.O. Box 359, Roscoe, Il. 61073

Phone: Rockford 226-9803 Beloit 389-3933

CUSTOMER NO. _____ 5652

CUSTOMER NAME Bolg Warner

SERVICE ADDRESS

Packer Truck Service ( ) Yards ( ) Gal.

Containerized . . . . . _____

Compacted . . . . . _____

Loose . . . . . _____

Drums . . . . . _____

Load . . . . . _____

Misc. _____

Roll Off Container Service (~~) Yards~~ ( ) Gal. 12

Containerized . . . . . _____

Compacted . . . . . _____

Liquid Disposal . . . . . _____

Misc. _____

ROUTE NO. _____ ROUTE SEQUENCE NO. _____

DATE 11/30/84 DRIVER Kay CUSTOMER SIGNATURE Mary Hay