

WASTE SHIPMENT RECORDS

S 537486

350 Pigeon Point Road
New Castle, DE 19720
Phone: (302) 658-2005
Fax: (302) 658-6229

175 Bartow Mun. Airport
Bartow, FL 33830
Phone: (863) 533-4599
Fax: (863) 533-1613

5533 Dunham Road
Maple Heights, OH 44137
Phone: (330) 835-3473
Fax: (330) 835-3732

108 Monahan Avenue
Dunmore, PA 18512
Phone: (570) 342-7232
Fax: (570) 342-7367

132 Myrtle Beach Hwy.
Sumter, SC 29153
Phone: (803) 773-2611
Fax: (803) 773-2942

SHIPPER NAME/ADDRESS Fairfield Board of Education 760 Stillson Rd. Fairfield CT		PHONE (AREA CODE) TRACTOR 747		TRAILER		APPOINTMENT TIME :	
FCI REP. LOADING (PRINT) J. P. P. & Co.		PROCEDURE Remove		EQUIP. SPOTTED		EQUIP. REMOVED 0822	
TIME AT SHIPPER 04:15		(MILITARY TIME ONLY)		ARRIVAL TIME 07:00		DEPARTURE TIME	
COMMENTS OR DELAYS AT SHIPPER						EQUIPMENT USED	

BROKER:		MANIFEST / DOCUMENT NO. 010976531	
PO #:	WO #: 1025757		

(X) HM	PROPER U.S. D.O.T. SHIPPING NAME	U.S. D.O.T. HAZARDOUS CLASS	NA/UN/NO.	PACKING GROUP	NO. CONT.	CONT. TYPE	NET QUANTITY	UNIT MEASURE	WASTE NO.	FORM
X 1	See Manifest	9	3432	III	01	cm	30	Y	001 PDI	S
2										
3										

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION NUMBER.

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA and the State. The materials described above were consigned to the Transporter named. The consignee can and will accept the shipment and has a valid permit to do so if required. I certify that the foregoing is true and correct to the best of my knowledge.

Payment to the contractor for waste removal does not constitute payment to the carrier and if the contractor does not pay the carrier, the shipper is obligated to pay the agreed rate offered to the contractor.

PLEASE PRINT NAME/TITLE STANLEY P. HESNER	SHIPPER'S SIGNATURE X [Signature]	DATE LOADED 8/4/14
I HAVE READ THE ABOVE AND UNDERSTAND AND AGREE TO ALL OF ITS CONTENT.		MO. DAY YR.

CONSIGNEE NAME/ADDRESS Wayne Pizzarel 49350 I-94 Service Dr. Dellenville MI		PHONE (AREA CODE) TRACTOR 65007		TRAILER 4500		APPOINTMENT TIME :	
FCI REP. UNLOADING (PRINT) B. Gahimer		PROCEDURE Dump		EQUIP. SPOTTED 0822		EQUIP. REMOVED	
TIME AT CONSIGNEE 010:30		(MILITARY TIME ONLY)		ARRIVAL TIME 14:00		DEPARTURE TIME	
COMMENTS OR DELAYS AT CONSIGNEE						EQUIPMENT USED	

PLEASE PRINT NAME/TITLE Dan Stiller	CONSIGNEE SIGNATURE X [Signature]	DATE UNLOADED 8/28/14
		MO. DAY YR.

AR H-0257	MD HWH-167	MO H-1490	OH UPW-0190713-OH	TX 40705
CT CT-HW-307	2001-OPV-2335	ND WH-429	OK UPW-0190713-OH	WI 11602
DE DE-HW-203	ME ME-HWT-47	NH TNH-0047	ONTARIO, CANADA A 840943	WV UPW-0190713-OH
DE-SW-203	ME-WOT-47	NJ S-2265	PA PA-AH-0067	
UPW-0190713-OH	MI UPW-0190713-OH	15939	QUEBEC, CANADA QC-6ML-047	
MA-294	MN UPW-0190713-OH	NY NJ-113	RI RI-535	

White - FCI Original
Yellow - FCI Billing
Blue - FCI Office/Customer
Green - Retained by TSDF
Gold - Retained by Generator

S 537486

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 40CFRPART761		2. Page 1 of 1	3. Emergency Response Phone 908-415-5607		4. Manifest Tracking Number 010976532 JJK		
		5. Generator's Name and Mailing Address FAIRFIELD BOARD OF EDUCATION 501 KINGS HIGHWAY EAST FAIRFIELD CT 068244		Generator's Site Address (if different than mailing address) 760 STILLSON RD. FAIRFIELD CT 06824					
Generator's Phone:		6. Transporter 1 Company Name FREEHOLD CARTAGE INC.					U.S. EPA ID Number NJD054126164		
		7. Transporter 2 Company Name					U.S. EPA ID Number		
8. Designated Facility Name and Site Address WAYNE DISPOSAL., INC SITE #2 LANDFILL 49350 N I-94 SERVICE DRIVE BELLEVILLE MI 48111		U.S. EPA ID Number MID048090633					Facility's Phone: 800-592-5489		
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	X	1. UN3432, POLYCHLORINATED BIPHENYLS, SOLID, 9, PG111, ERG #171			001 CM		est 1818	K	CR01 PCB1
		2.							
		3.							
		4.							
14. Special Handling Instructions and Additional Information 1) G149126WDI / TSCA DEBRIS <3 FEET UNIQUE ID # CT-4W-307 OUT OF SERVICE DATE 5/4/14 MI LPW-019071324 Photo AEU97, N)									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Offor's Printed/Typed Name STANLEY HILMER					Signature <i>[Signature]</i>		Month Day Year 18 4 14		
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____								
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Robert Daldas Signature Robert Daldas Month Day Year 18 4 14 Transporter 2 Printed/Typed Name Signature Month Day Year								
TRANSPORTER	18. Discrepancy								
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
	18b. Alternate Facility (or Generator) Manifest Reference Number: 010626 CD18-2844								
	U.S. EPA ID Number								
DESIGNATED FACILITY	Facility's Phone:								
	18c. Signature of Alternate Facility (or Generator) Month Day Year								
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
	1. VAD 2. 3. 4.								
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Signature Month Day Year 8 23 14									

DESIGNATED FACILITY

**FREEHOLD CARTAGE INC.**P.O. BOX 5010 • FREEHOLD, NJ 07728-5010
(732) 462-1901 • FAX (732) 308-0924**BILL OF LADING**
FCI EPA ID NO. NJD054126164**S 534921**350 Pigeon Point Road
New Castle, DE 19720
Phone: (302) 658-2005
Fax: (302) 658-6229175 Bartow Mun. Airport
Bartow, FL 33830
Phone: (863) 533-4599
Fax: (863) 533-16135533 Dunham Road
Maple Heights, OH 44137
Phone: (330) 835-3473
Fax: (330) 835-3732108 Monahan Avenue
Dunmore, PA 18512
Phone: (570) 342-7232
Fax: (570) 342-7367132 Myrtle Beach Hwy.
Sumter, SC 29153
Phone: (803) 773-2611
Fax: (803) 773-2942

SHIPPER NAME/ADDRESS Fairfield Board of ED. 760 Stillson Rd. Fairfield CT 06824		PHONE (908) 415-5607		40C F R F A R T 761	
FCI REP. LOADING (PRINT) R. Daldos		PROCEDURE Remove	EQUIP. SPOTTED ---	EQUIP. REMOVED K-38 9458	APPOINTMENT TIME 06:15 (MILITARY TIME ONLY) 06:45 DEPARTURE TIME
COMMENTS OR DELAYS AT SHIPPER				EQUIPMENT USED	

BROKER:		MANIFEST / DOCUMENT NO. 010976532								
PO #:	WO #:	1025753								
(X) HM	PROPER U.S. D.O.T. SHIPPING NAME	U.S. D.O.T. HAZARDOUS CLASS	NA/UN/NO.	PACKING GROUP	NO. CONT.	CONT. TYPE	NET QUANTITY	UNIT MEASURE	WASTE NO.	FORM
1	RQ	9	3432	III	01	Y	EST 18/18	K	0201	S
2	Polychlorinated-Biphenyls								PCB	S
3	See Manifest									

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION NUMBER.
CT-HW-307 MI UPW-0190713-OH Plots AE4974 NJ

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PLEASE PRINT NAME/TITLE STANLEY - PLISNER	SHIPPER'S SIGNATURE X <i>[Signature]</i>	DATE LOADED 8/4/14
I HAVE READ THE ABOVE AND UNDERSTAND AND AGREE TO ALL OF ITS CONTENT.		MO. DAY YR.

CONSIGNEE NAME/ADDRESS Wayne Disposal 49350 NI-94 SERVICE Bellefonte PA 16811		PHONE (800) 592-5489		M1D048090633	
FCI REP. UNLOADING (PRINT) B. Gahimer		PROCEDURE dump	EQUIP. SPOTTED 9458	EQUIP. REMOVED 9458	APPOINTMENT TIME ---
COMMENTS OR DELAYS AT CONSIGNEE		EQUIPMENT USED			

PLEASE PRINT NAME/TITLE Don Shick	CONSIGNEE SIGNATURE X <i>[Signature]</i>	DATE UNLOADED 8/28/14
		MO. DAY YR.

AR H-0257	MD HWH-167	MO H-1490	OH UPW-0190713-OH	TX 40705
CT CT-HW-307	2001-OPV-2335	ND WH-429	OK UPW-0190713-OH	WI 11602
DE-HW-203	ME ME-HWT-47	NH TNH-0047	ONTARIO, CANADA A 840943	WV UPW-0190713-OH
DE-SW-203	ME-WOT-47	NJ S-2265	PA PA-AH-0067	
IL UPW-0190713-OH	MI UPW-0190713-OH	15939	QUEBEC, CANADA QC-6ML-047	
MA MA-294	MN UPW-0190713-OH	NY NJ-113	RI RI-535	

White - FCI Original
Yellow - FCI Billing
Blue - FCI Office/Customer
Green - Retained by TSDF
Gold - Retained by Generator**S 534921**



P.O. BOX 5010 • FREEHOLD, NJ 07728-5010
(732) 462-1001 • FAX (732) 308-0924

FCI FAX NO. NJ 07728-5010

S534921

350 Pigeon Point Road
New Castle, DE 19720
Phone: (302) 658-2005
Fax: (302) 658-6229

175 Bartow Mun. Airport
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Fax: (330) 835-3732

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Fax: (570) 342-7367

132 Myrtle Beach Hwy.
Sumter, SC 29153
Phone: (803) 773-2611
Fax: (803) 773-2942

SHIPPER NAME/ADDRESS Fairfield Board of ED. 760 Stillson R.D. Fairfield CT 06824		PHONE (908) (AREA CODE) 415-5607 TRACTOR 704 TRAILER		400FRPART761	
FCI REP. LOADING (PRINT) R. Daddas	PROCEDURE Remove	EQUIP. SPOTTED	EQUIP. REMOVED 12-30 9458	TIME AT SHIPPER 06:15	(MILITARY TIME ONLY) 06:45
COMMENTS OR DELAYS AT SHIPPER				ARRIVAL TIME DEPARTURE TIME	
EQUIPMENT USED					

BROKER:		MANIFEST / DOCUMENT NO. 010976532J									
PO #:		WO #: 1025753									
(X) HM	PROPER U.S. D.O.T. SHIPPING NAME	U.S. D.O.T. HAZARDOUS CLASS	NA/UN/NO.	PACKING GROUP	NO. CONT.	CONT. TYPE	NET QUANTITY	UNIT MEASURE	WASTE NO.	FORM	
1	RO	9	3432 III	01	Y/M	EST 1818	K	0201	S		
2	Polychlorinated-Biphenyls								PCB1	S	
3	see manifest										

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION NUMBER.

CT-HW-307 MI UPW-0190713-OH Plate AE4974 NJ

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PLEASE PRINT NAME/TITLE STANLEY HIGDON	SHIPPER'S SIGNATURE X [Signature]	DATE LOADED 8/4/14
I HAVE READ THE ABOVE AND UNDERSTAND AND AGREE TO ALL OF ITS CONTENT.		MO. DAY YR.

CONSIGNEE NAME/ADDRESS Wayne DISPOSAL 49350 N.I.-94 Service Belleville Mt 48111		PHONE (800) (AREA CODE) 592-5489 TRACTOR TRAILER		411D048090633	
FCI REP. UNLOADING (PRINT)	PROCEDURE	EQUIP. SPOTTED 9458	EQUIP. REMOVED 9458	TIME AT CONSIGNEE ARRIVAL TIME	(MILITARY TIME ONLY) DEPARTURE TIME
COMMENTS OR DELAYS AT CONSIGNEE				EQUIPMENT USED	
PLEASE PRINT NAME/TITLE	CONSIGNEE SIGNATURE X [Signature]			DATE UNLOADED / /	
			MO. DAY YR.		

AR H-0257	MD HWH-167	MO H-1490	OH UPW-0190713-OH	TX 40705
CT CT-HW-307	2001-OPV-2335	ND WH-429	OK UPW-0190713-OH	WI 11602
DE DE-HW-203	ME ME-HWT-47	NH TNH-0047	ONTARIO, CANADA A 840943	WV UPW-0190713-OH
DE-SW-203	ME-WOT-47	NJ S-2265	PA PA-AH-0067	
UPW-0190713-OH	MI UPW-0190713-OH	15939	QUEBEC, CANADA QC-6ML-047	
MA MA-294	MN UPW-0190713-OH	NY NJ-113	RI RI-535	

White - FCI Original
Yellow - FCI Billing
Blue - FCI Office/Customer
Green - Retained by TSDF
Gold - Retained by Generator

S534921



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S 537486

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Fax: (570) 342-7367

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Sumter, SC 29153
Phone: (803) 773-2611
Fax: (803) 773-2942

SHIPPER NAME/ADDRESS Fairfield School of Education 760 Stillson Rd. Fairfield CT			PHONE (AREA CODE) 747		APPOINTMENT TIME :	
FCI REP. LOADING (PRINT)	PROCEDURE	EQUIP. SPOTTED	EQUIP. REMOVED	TIME AT SHIPPER (MILITARY TIME ONLY)		
2/2000	Remove		0822	ARRIVAL TIME	DEPARTURE TIME	
COMMENTS OR DELAYS AT SHIPPER				EQUIPMENT USED		

BROKER:		MANIFEST / DOCUMENT NO. 010976531
PO #:	WO #: 1025757	

(X) HM	PROPER U.S. D.O.T. SHIPPING NAME	U.S. D.O.T. HAZARDOUS CLASS	NA/UN/NO.	PACKING GROUP	NO. CONT.	CONT. TYPE	NET QUANTITY	UNIT MEASURE	WASTE NO.	FORM
X	1 Solid Waste	9	3432	III	01	cm	30	Y	CR01 R001	S
	2									
	3									

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION NUMBER.

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PLEASE PRINT NAME/TITLE Stanley Pligner	SHIPPER'S SIGNATURE X [Signature]	DATE LOADED 8/4/14 MO. DAY YR.
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CONSIGNEE NAME/ADDRESS Wayne Pizzarel 49350 1st Street Dr. Dallenville ME			PHONE (AREA CODE)		APPOINTMENT TIME :	
FCI REP. UNLOADING (PRINT)			PROCEDURE	EQUIP. SPOTTED	EQUIP. REMOVED	TIME AT CONSIGNEE (MILITARY TIME ONLY)
			Dump	0822		ARRIVAL TIME DEPARTURE TIME
COMMENTS OR DELAYS AT CONSIGNEE					EQUIPMENT USED	

PLEASE PRINT NAME/TITLE	CONSIGNEE SIGNATURE X [Signature]	DATE UNLOADED / / MO. DAY YR.
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AR H-0257	MD HWH-167	MO H-1490	OH UPW-0190713-OH	TX 40705
CT CT-HW-307	2001-OPV-2335	ND WH-429	OK UPW-0190713-OH	WI 11602
DE DE-HW-203	ME ME-HWT-47	NH TNH-0047	ONTARIO, CANADA A 840943	WV UPW-0190713-OH
DE-SW-203	ME-WOT-47	NJ S-2265	PA PA-AH-0067	
" UPW-0190713-OH	MI UPW-0190713-OH	15939	QUEBEC, CANADA QC-6ML-047	
MA-294	MN UPW-0190713-OH	NY NJ-113	RI RI-535	

White - FCI Original
Yellow - FCI Billing
Blue - FCI Office/Customer
Green - Retained by TSDF
Gold - Retained by Generator

S 537486



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S 367028

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Sumter, SC 29153
Phone: (803) 773-2611
Fax: (803) 773-2942

SHIPPER NAME/ADDRESS <i>760 Stillson Road Fairfield, CT. 06424</i>		PHONE (AREA CODE) <i>888</i>		TRAILER <i>275</i>		APPOINTMENT TIME :	
FCI REP. LOADING (PRINT) <i>Sabolewski</i>	PROCEDURE <i>Removal</i>	EQUIP. SPOTTED	EQUIP. REMOVED <i>366</i>	TIME AT SHIPPER (MILITARY TIME ONLY) <i>6:30</i>		ARRIVAL TIME <i>8:15</i>	
COMMENTS OR DELAYS AT SHIPPER				EQUIPMENT USED			

BROKER:		MANIFEST / DOCUMENT NO.									
PO #:		WO #:									
(X) MM	PROPER U.S. D.O.T. SHIPPING NAME	U.S. D.O.T. HAZARDOUS CLASS	NA/IJN/NO.	PACKING GROUP	NO. CONT.	CONT. TYPE	NET QUANTITY	UNIT MEASURE	WASTE NO.	FORM	
1	<i>Non-Haz, Non-DOT Non-RCRA Regulated</i>				1	cm	13,500	lb			
2											
3											

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION NUMBER.

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PLEASE PRINT NAME/TITLE <i>Rob For S</i>	SHIPPER'S SIGNATURE <i>[Signature]</i> X	DATE LOADED <i>9/29/14</i> MO DAY YR.
I HAVE READ THE ABOVE AND UNDERSTAND AND AGREE TO ALL OF ITS CONTENT.		

CONSIGNEE NAME/ADDRESS <i>Greentree Landfill Greentree Landfill Rd Kersey, PA 15846</i>		PHONE (AREA CODE)		TRAILER		APPOINTMENT TIME :	
FCI REP. UNLOADING (PRINT)	PROCEDURE	EQUIP. SPOTTED	EQUIP. REMOVED	TIME AT CONSIGNEE (MILITARY TIME ONLY) :		ARRIVAL TIME :	
COMMENTS OR DELAYS AT CONSIGNEE				EQUIPMENT USED			
PLEASE PRINT NAME/TITLE		CONSIGNEE SIGNATURE X		DATE UNLOADED / / MO DAY YR.			

AR H-0257	MD HWH-167	MO H-1490	OH UPW-0190713-OH	TX 40705
CT CT-HW-307	2001-OPV-2335	ND WH-429	OK UPW-0190713-OH	WI 11602
DE DE-HW-203	ME ME-HWT-47	NH TNH-0047	ONTARIO, CANADA A 840943	WV UPW-0190713-OH
DE DE-SW-203	ME ME-WOT-47	NJ S-2265	PA PA-AH-0067	
IL UPW-0190713-OH	MI UPW-0190713-OH	15939	QUEBEC, CANADA QC-6ML-047	
A MA-294	MN UPW-0190713-OH	NY NJ-113	RI RI-535	

White - FCI Original
Yellow - FCI Billing
Blue - FCI Office/Customer
Green - Retained by TSDF
Gold - Retained by Generator

S 367028

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132 Myrtle Beach Hwy.
Sumter, SC 29153
Phone: (803) 773-2611
Fax: (803) 773-2942

SHIPPER NAME/ADDRESS <i>OSBORN ELEMENTARY SCHOOL 766 STILLSON AV FARMINGDALE CT</i>				PHONE (AREA CODE) TRACTOR <i>755</i>				TRAILER <i>—</i>				APPOINTMENT TIME <i>1:40</i>											
FCI REP. LOADING (PRINT) <i>LARRY SPRANKLING</i>				PROCEDURE <i>REMOVE</i>				EQUIP. SPOTTED <i>—</i>				EQUIP. REMOVED <i>205</i>											
TIME AT SHIPPER (MILITARY TIME ONLY) ARRIVAL TIME DEPARTURE TIME								EQUIPMENT USED															
COMMENTS OR DELAYS AT SHIPPER <i>PINK BOXES OUT FOR DAMAGE</i>																							
BROKER:								MANIFEST/DOCUMENT NO. <i>257375-001</i>															
PO #:				WO #:																			
(X) HM	PROPER U.S. D.O.T. SHIPPING NAME				U.S. D.O.T. HAZARDOUS CLASS		NA/UN/NO.		PACKING GROUP		NO. CONT.		CONT. TYPE		NET QUANTITY		UNIT MEASURE		WASTE NO.		FORM		
1	<i>NON HAZ WASTE</i>				<i>—</i>		<i>—</i>		<i>—</i>		<i>1</i>		<i>CP</i>		<i>20</i>		<i>Y</i>						
2																							
3																							
SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION NUMBER.																							

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PLEASE PRINT NAME/TITLE <i>Rob Ture</i>		SHIPPER'S SIGNATURE <i>X</i> <i>[Signature]</i> I HAVE READ THE ABOVE AND UNDERSTAND AND AGREE TO ALL OF ITS CONTENT.		DATE LOADED <i>7/27/12</i> MO. DAY YR.	
--------------------------------------------	--	-----------------------------------------------------------------------------------------------------------------------------	--	----------------------------------------------	--

CONSIGNEE NAME/ADDRESS <i>ADS ELEMENTARY SCHOOL KILPATRICK PA</i>				PHONE (AREA CODE) TRACTOR <i>—</i>				TRAILER <i>—</i>				APPOINTMENT TIME <i>—</i>											
FCI REP. UNLOADING (PRINT)				PROCEDURE <i>UNLOAD</i>				EQUIP. SPOTTED <i>—</i>				EQUIP. REMOVED <i>205</i>											
TIME AT CONSIGNEE (MILITARY TIME ONLY) ARRIVAL TIME DEPARTURE TIME								EQUIPMENT USED															
COMMENTS OR DELAYS AT CONSIGNEE																							
PLEASE PRINT NAME/TITLE								CONSIGNEE SIGNATURE <i>X</i> _____								DATE UNLOADED <i>7/27/12</i> MO. DAY YR.							

AR H-0257
CT CT-HW-307
DE DE-HW-203
DE-SW-203
UPW-0190713-OH
MA MA-294

MD HWH-167
2001-OPV-2335
ME ME-HWT-47
ME-WOT-47
MI UPW-0190713-OH
MN UPW-0190713-OH

MO H-1490
ND WH-429
NH TNH-0047
NJ S-2265
15939
NY NJ-113

OH UPW-0190713-OH
OK UPW-0190713-OH
ONTARIO, CANADA A 840943
PA PA-AH-0067
QUEBEC, CANADA QC-6ML-047
RI RI-535

TX 40705
WI 11602
WV UPW-0190713-OH

White - FCI Original
Yellow - FCI Billing
Blue - FCI Office/Customer
Green - Retained by TSDF
Gold - Retained by Generator

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

N/A

2. Page 1 of 1

3. Emergency Response Phone

905-425-5607

4. Waste Tracking Number

28325-061

5. Generator's Name and Mailing Address

Eastford Board of Education
601 Kings Highway
Fairfield, CT

Generator's Site Address (if different than mailing address)

Ostham Elementary School
750 Shilston Avenue
Fairfield, CT

Generator's Phone:

203-255-8277

U.S. EPA ID Number

NJD054125164

6. Transporter 1 Company Name

Freshford Garbage, Inc.

U.S. EPA ID Number

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

ADG - Greentree Landfill
635 Toby Road
Kersey, PA 15045

N/A

Facility's Phone:

814-285-1744

9. Waste Shipping Name and Description

1. Non Hazardous waste solid, Non DOT,
Non RCRA regulated

10. Containers

No.

Type

001

CM

11. Total
Quantity

12. Unit
Wt./Vol.

13,500

K

13. Special Handling Instructions and Additional Information

Approved #28325
Weight is estimated
RCRA Bulk Product Waste

OSD: 9/29/14

Container # 205

1588

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

Generator's/Offoror's Printed/Typed Name

Elvis Tolisner

Signature

[Signature]

Month Day Year

9 29 14

15. International Shipments

☐ Import to U.S.

☐ Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

LARRY GENTILELLI

Signature

[Signature]

Month Day Year

9 29 14

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

☐ Quantity

☐ Type

☐ Residue

☐ Partial Rejection

☐ Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

17b. Alternate Facility (or Generator)

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

[Signature]

Month Day Year

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number <i>N/A</i>		2. Page 1 of 1		3. Emergency Response Phone <i>805-425-6607</i>		4. Waste Tracking Number <i>280395-002</i>	
		5. Generator's Name and Mailing Address <i>Eastford Board of Education 591 Kings Highway Fairfield, CT</i>		Generator's Site Address (if different than mailing address) <i>Osborn Elementary School 760 Stillson Avenue Fairfield, CT</i>		<i>64,460</i>			
Generator's Phone: <i>203-255-8277</i>		6. Transporter 1 Company Name <i>Freehold Cartage, Inc.</i>						U.S. EPA ID Number <i>NJD054126164</i>	
7. Transporter 2 Company Name						U.S. EPA ID Number			
8. Designated Facility Name and Site Address <i>ADS - Greentree Landfill 625 Toby Road Kersey, PA 15346</i>						U.S. EPA ID Number <i>N/A</i>			
Facility's Phone: <i>814-253-1744</i>									
9. Waste Shipping Name and Description		10. Containers		11. Total Quantity		12. Unit Wt./Vol.			
		No.	Type						
1. Non Hazardous waste sold, Non DOT, Non RCRA regulated		001 CM		13,500		K			
2.									
3.									
4.									
13. Special Handling Instructions and Additional Information <i>Approval #269385 Weight is estimated PCB Bulk Product Waste with Non Friable Asbestos</i>									
14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.									
Generator's/Offor's Printed/Typed Name <i>Elvis Plisner</i>		Signature <i>Elvis Plisner</i>		Month <i>9</i>		Day <i>29</i>		Year <i>14</i>	
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit:		Date leaving U.S.:					
Transporter Signature (for exports only):									
16. Transporter Acknowledgment of Receipt of Materials									
Transporter 1 Printed/Typed Name <i>Chester Sobolewski</i>		Signature <i>Chester Sobolewski</i>		Month <i>09</i>		Day <i>29</i>		Year <i>14</i>	
Transporter 2 Printed/Typed Name		Signature		Month		Day		Year	
17. Discrepancy									
17a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
17b. Alternate Facility (or Generator)		Manifest Reference Number:		U.S. EPA ID Number:					
Facility's Phone:									
17c. Signature of Alternate Facility (or Generator)				Month		Day		Year	
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a									
Printed/Typed Name		Signature <i>[Signature]</i>		Month <i>10</i>		Day <i>11</i>		Year <i>14</i>	

FC 157700

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of 1	3. Emergency Response Phone	4. Waste Tracking Number
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)			
Eastern Board of Education 501 Kings Highway Farmington, CT		Osborn Elementary School 760 Shiloh Avenue Farmington, CT			
Generator's Phone: 863-255-8277		U.S. EPA ID Number: NJDC04126104			
6. Transporter 1 Company Name		7. Transporter 2 Company Name			
Freehold Cattle Co		U.S. EPA ID Number			
8. Designated Facility Name and Site Address		U.S. EPA ID Number			
AGS - Greentree Landfill 535 Tully Road Kersey, PA 15646		NJ			
Facility's Phone: 814-285-1734					
9. Waste Shipping Name and Description		10. Containers		11. Total Quantity	12. Unit Wt./Vol.
		No.	Type		
1. Non Hazardous waste solid, Non DOT, Non RCRA regulated		001	CM	15	R
2.					
3.					
4.					
13. Special Handling Instructions and Additional Information					
Approval #553395 Weight is estimated PCB Bulk Product Waste with Non Fibable Asbestos					
14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.					
Generator's/Offor's Printed/Typed Name		Signature		Month	Day
Elvis Figner		[Signature]		9	29
15. International Shipments		Port of entry/exit:		Year	
<input type="checkbox"/> Import to U.S.		<input type="checkbox"/> Export from U.S.		14	
Transporter Signature (for exports only):		Date leaving U.S.:			
16. Transporter Acknowledgment of Receipt of Materials					
Transporter 1 Printed/Typed Name		Signature		Month	Day
LARRY GAYRICK		[Signature]		9	30
Transporter 2 Printed/Typed Name		Signature		Year	
TODD MUSE		[Signature]		10	1
17. Discrepancy					
17a. Discrepancy Indication Space					
<input type="checkbox"/> Quantity		<input type="checkbox"/> Type			
<input type="checkbox"/> Residue		<input type="checkbox"/> Partial Rejection			
<input type="checkbox"/> Full Rejection					
17b. Alternate Facility (or Generator)		Manifest Reference Number:			
Facility's Phone:		U.S. EPA ID Number			
17c. Signature of Alternate Facility (or Generator)		Month			
		Day			
		Year			
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a					
Printed/Typed Name		Signature		Month	Day
		[Signature]		10	1
		Year			

350 Pigeon Point Road
New Castle, DE 19720
Phone: (302) 658-2005
Fax: (302) 658-6229

175 Bartow Mun. Airport
Bartow, FL 33830
Phone: (863) 533-4599
Fax: (863) 533-1613

5533 Dunham Road
Maple Heights, OH 44137
Phone: (330) 835-3473
Fax: (330) 835-3732

108 Monahan Avenue
Dunmore, PA 18512
Phone: (570) 342-7232
Fax: (570) 342-7367

132 Myrtle Beach Hwy.
Sumter, SC 29153
Phone: (803) 773-2611
Fax: (803) 773-2942

SHIPPER NAME/ADDRESS OSBORN ELEMENTARY SCHOOL FAIRFIELD CT		PHONE (AREA CODE) TRACTOR 755		TRAILER -		APPOINTMENT TIME :	
FCI REP. LOADING (PRINT) LARRY GATBELL	PROCEDURE REMOVE	EQUIP. SPOTTED -	EQUIP. REMOVED 3001	TIME AT SHIPPER (MILITARY TIME ONLY) 03:30 ARRIVAL TIME		DEPARTURE TIME 04:00	
COMMENTS OR DELAYS AT SHIPPER				EQUIPMENT USED 2/6			

BROKER:		MANIFEST / DOCUMENT NO. 259375-003								
PO#:	WO# 1033834									
(X) NM	PROPER U.S. D.O.T. SHIPPING NAME	U.S. D.O.T. HAZARDOUS CLASS	NA/UN/NO.	PACKING GROUP	NO. CONT.	CONT. TYPE	NET QUANTITY	UNIT MEASURE	WASTE NO.	FORM
1	NOX 1132	-	-	-	1	201	30	Y		
2										
3										
SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION NUMBER.										

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA and the State. The materials described above were consigned to the Transporter named. The consignee can and will accept the shipment and has a valid permit to do so if required. I certify that the foregoing is true and correct to the best of my knowledge.

Payment to the contractor for waste removal does not constitute payment to the carrier and if the contractor does not pay the carrier, the shipper is obligated to pay the agreed rate offered to the contractor.

PLEASE PRINT NAME/TITLE	SHIPPER'S SIGNATURE X	DATE LOADED 9/30/14 MO. DAY YR.
I HAVE READ THE ABOVE AND UNDERSTAND AND AGREE TO ALL OF ITS CONTENT.		

CONSIGNEE NAME/ADDRESS AOS GLENVIEW (LAUDERDALE) KANSAS PA		PHONE (AREA CODE) TRACTOR 897		TRAILER 392		APPOINTMENT TIME :	
FCI REP. UNLOADING (PRINT) TOOD	PROCEDURE UNLOAD	EQUIP. SPOTTED -	EQUIP. REMOVED 3001	TIME AT CONSIGNEE (MILITARY TIME ONLY) 2:30 ARRIVAL TIME		DEPARTURE TIME 9:30	
COMMENTS OR DELAYS AT CONSIGNEE				EQUIPMENT USED			
PLEASE PRINT NAME/TITLE	CONSIGNEE SIGNATURE X	DATE UNLOADED 10/1/14 MO. DAY YR.					

AR H-0257	MD HWH-167	MO H-1490	OH UPW-0190713-OH	TX 40705
CT CT-HW-307	2001-OPV-2335	ND WH-429	OK UPW-0190713-OH	WI 11602
DE DE-HW-203	ME ME-HWT-47	NH TNH-0047	ONTARIO, CANADA A 840943	WV UPW-0190713-OH
DE-SW-203	ME-WOT-47	NJ S-2265	PA PA-AH-0067	
UPW-0190713-OH	MI UPW-0190713-OH	15939	QUEBEC, CANADA QC-6ML-047	
MA MA-294	MN UPW-0190713-OH	NY NJ-113	RI RI-535	

White - FCI Original
Yellow - FCI Billing
Blue - FCI Office/Customer
Green - Retained by TSDF
Gold - Retained by Generator



(732) 462-1001 • FAX (732) 308-0924

S 365302

350 Pigeon Point Road
New Castle, DE 19720
Phone: (302) 658-2005
Fax: (302) 658-6229

175 Bartow Mun. Airport
Bartow, FL 33830
Phone: (863) 533-4599
Fax: (863) 533-1613

5533 Dunham Road
Maple Heights, OH 44137
Phone: (330) 835-3473
Fax: (330) 835-3732

108 Monahan Avenue
Dunmore, PA 18512
Phone: (570) 342-7232
Fax: (570) 342-7367

132 Myrtle Beach Hwy.
Sumter, SC 29153
Phone: (803) 773-2611
Fax: (803) 773-2942

SHIPPER NAME/ADDRESS <i>OSCAR MOUNTAIN SCHOOL</i> <i>FAIRFIELD CT</i>		PHONE (AREA CODE) TRACTOR <i>755</i>		TRAILER <i>-</i>		APPOINTMENT TIME :			
FCI REP. LOADING (PRINT) <i>MARK CANNONE</i>		PROCEDURE <i>REMOVE</i>		EQUIP. SPOTTED <i>-</i>		EQUIP. REMOVED <i>3001</i>		TIME AT SHIPPER (MILITARY TIME ONLY) <i>03:30</i> ARRIVAL TIME <i>04:00</i> DEPARTURE TIME	
COMMENTS OR DELAYS AT SHIPPER						EQUIPMENT USED <i>1/2</i>			

BROKER:		MANIFEST/DOCUMENT NO. <i>25931-7-0-2</i>																			
PO#:		WO#:																			
(X) HM	PROPER U.S. D.O.T. SHIPPING NAME			U.S. D.O.T. HAZARDOUS CLASS		NA/UN/NO.		PACKING GROUP		NO. CONT.		CONT. TYPE		NET QUANTITY		UNIT MEASURE		WASTE NO.		FORM	
	<i>1</i>			<i>-</i>		<i>-</i>		<i>-</i>		<i>1</i>		<i>21</i>		<i>30</i>		<i>T</i>					
	<i>2</i>																				
	<i>3</i>																				

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION NUMBER.

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA and the State. The materials described above were consigned to the Transporter named. The consignee can and will accept the shipment and has a valid permit to do so if required. I certify that the foregoing is true and correct to the best of my knowledge.

Payment to the contractor for waste removal does not constitute payment to the carrier and if the contractor does not pay the carrier, the shipper is obligated to pay the agreed rate offered to the contractor.

PLEASE PRINT NAME/TITLE		SHIPPER'S SIGNATURE <i>X</i>		DATE LOADED <i>9/30/14</i> MO. DAY YR.	
		I HAVE READ THE ABOVE AND UNDERSTAND AND AGREE TO ALL OF ITS CONTENT.			

CONSIGNEE NAME/ADDRESS <i>AND CANNONE (2000000)</i> <i>FAIRFIELD CT</i>		PHONE (AREA CODE) TRACTOR <i>755</i>		TRAILER <i>-</i>		APPOINTMENT TIME :			
FCI REP. UNLOADING (PRINT) <i>MARK CANNONE</i>		PROCEDURE <i>REMOVE</i>		EQUIP. SPOTTED <i>-</i>		EQUIP. REMOVED <i>3001</i>		TIME AT CONSIGNEE (MILITARY TIME ONLY) : ARRIVAL TIME : DEPARTURE TIME	
COMMENTS OR DELAYS AT CONSIGNEE						EQUIPMENT USED			

PLEASE PRINT NAME/TITLE		CONSIGNEE SIGNATURE <i>X</i>		DATE UNLOADED <i>/ /</i> MO. DAY YR.	

AR H-0257	MD HWH-167	MO H-1490	OH UPW-0190713-OH	TX 40705
CT CT-HW-307	2001-OPV-2335	ND WH-429	OK UPW-0190713-OH	WI 11602
DE DE-HW-203	ME ME-HWT-47	NH TNH-0047	ONTARIO, CANADA A 840943	WV UPW-0190713-OH
DE-SW-203	ME-WOT-47	NJ S-2265	PA PA-AH-0067	
UPW-0190713-OH	MI UPW-0190713-OH	15939	QUEBEC, CANADA QC-6ML-047	
MA MA-294	MN UPW-0190713-OH	NY NJ-113	RI RI-535	

White - FCI Original
Yellow - FCI Billing
Blue - FCI Office/Customer
Green - Retained by TSD
Gold - Retained by Generator

S 365302

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number <i>N/A</i>		2. Page 1 of 1		3. Emergency Response Phone <i>908-425-5517</i>		4. Waste Tracking Number		
		5. Generator's Name and Mailing Address Eastford Board of Education 501 Kings Highway Fairfield, CT		Generator's Site Address (if different than mailing address) Osborn Elementary School 760 Stillson Avenue Fairfield, CT						
Generator's Phone:		6. Transporter 1 Company Name SRS National				U.S. EPA ID Number N/A				
		7. Transporter 2 Company Name				U.S. EPA ID Number				
8. Designated Facility Name and Site Address ADS - Greentree Landfill 635 Toby Road Kersey, PA 15846		Facility's Phone: 814-265-1744				U.S. EPA ID Number N/A				
GENERATOR	9. Waste Shipping Name and Description			10. Containers		11. Total Quantity	12. Unit Wt./Vol.			
				No.	Type					
	1. Non Hazardous waste solid, Non DOT Non RCRA regulated			001	GM		16			
	2.									
	3.									
	4.									
13. Special Handling Instructions and Additional Information Approval #0259335 Weight is estimated PCB Bulk Product Waste with Non Friable Asbestos <div style="text-align: right; font-size: 2em;">12.33</div>										
14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.										
Generator's/Offor's Printed/Typed Name <i>Elvis Plisner</i>					Signature <i>[Signature]</i>		Month <i>11</i>	Day <i>5</i>	Year <i>14</i>	
TRANSPORTER	15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____									
	16. Transporter Acknowledgment of Receipt of Materials									
	Transporter 1 Printed/Typed Name <i>Kevin Reddy</i>					Signature <i>[Signature]</i>		Month <i>11</i>	Day <i>5</i>	Year <i>14</i>
	Transporter 2 Printed/Typed Name					Signature		Month	Day	Year
SIGNATURE FACILITY	17. Discrepancy									
	17a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
	17b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number _____									
	Facility's Phone: _____									
	17c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____									
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a										
Printed/Typed Name					Signature <i>[Signature]</i>		Month <i>11</i>	Day <i>14</i>	Year <i>14</i>	

**FREEHOLD CARTAGE INC.**P.O. BOX 5010 • FREEHOLD, NJ 07728-5010
(732) 462-1001 • FAX (732) 308-0924**BILL OF LADING**
FCI EPA ID NO. NJD054126164**S 365538**350 Pigeon Point Road
New Castle, DE 19720
Phone: (302) 658-2005
Fax: (302) 658-6229175 Bartow Mun. Airport
Bartow, FL 33830
Phone: (863) 533-4599
Fax: (863) 533-16135533 Dunham Road
Maple Heights, OH 44137
Phone: (330) 835-3473
Fax: (330) 835-3732108 Monahan Avenue
Dunmore, PA 18512
Phone: (570) 342-7232
Fax: (570) 342-7367132 Myrtle Beach Hwy.
Sumter, SC 29153
Phone: (803) 773-2611
Fax: (803) 773-2942

SHIPPER NAME/ADDRESS <i>OSBORN ELEMENTARY SCHOOL 700 STILLSON AV FAIRFIELD CT</i>		PHONE <i>(203) 255-8277</i>			
		(AREA CODE)			
FCI REP. LOADING (PRINT) <i>LARRY GAMBERLING</i>		PROCEDURE <i>RETURN</i>		EQUIP. SPOTTED <i>-</i>	
		EQUIP. REMOVED <i>9619</i>		APPOINTMENT TIME <i>: 45 MIN</i>	
COMMENTS OR DELAYS AT SHIPPER				EQUIPMENT USED <i>R/O</i>	

BROKER:		MANIFEST / DOCUMENT NO. <i>111714</i>	
PO#:	WO#:		

(X) HM	PROPER U.S. D.O.T. SHIPPING NAME	U.S. D.O.T. HAZARDOUS CLASS	NA/UN/NO.	PACKING GROUP	NO. CONT.	CONT. TYPE	NET QUANTITY	UNIT MEASURE	WASTE NO.	FORM
1	<i>NEW HAZ WASTE SAND</i>				1	<i>CM</i>	<i>30</i>	<i>Y</i>		
2	<i>NEW HAZ WASTE SOLID</i>									
3										

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION NUMBER.

APPROVAL # 259395

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA and the State. The materials described above were consigned to the Transporter named. The consignee can and will accept the shipment and has a valid permit to do so if required. I certify that the foregoing is true and correct to the best of my knowledge.

Payment to the contractor for waste removal does not constitute payment to the carrier and if the contractor does not pay the carrier, the shipper is obligated to pay the agreed rate offered to the contractor.

PLEASE PRINT NAME/TITLE	SHIPPER'S SIGNATURE <i>X [Signature]</i>	DATE LOADED <i>11/17/14</i>
I HAVE READ THE ABOVE AND UNDERSTAND AND AGREE TO ALL OF ITS CONTENT.		MO. DAY YR.

CONSIGNEE NAME/ADDRESS <i>ANDS GLENNVILLE (LALAFIN) 635 TOWN RD KILLSWY PA</i>		PHONE <i>(814) 255-1744</i>			
		(AREA CODE)			
FCI REP. UNLOADING (PRINT) <i>BOB Smith</i>		PROCEDURE <i>UNACAD</i>		EQUIP. SPOTTED <i>-</i>	
		EQUIP. REMOVED <i>9619</i>		APPOINTMENT TIME <i>: 09:30</i>	
COMMENTS OR DELAYS AT CONSIGNEE				EQUIPMENT USED	
PLEASE PRINT NAME/TITLE		CONSIGNEE SIGNATURE <i>X [Signature]</i>		DATE UNLOADED <i>11/21/14</i>	
				MO. DAY YR.	

AR H-0257	MD HWH-167	MO H-1490	OH UPW-0190713-OH	TX 40705
CT CT-HW-307	2001-OPV-2335	ND WH-429	OK UPW-0190713-OH	WI 11602
DE-HW-203	ME ME-HWT-47	NH TNH-0047	ONTARIO, CANADA A 840943	WV UPW-0190713-OH
DE-SW-203	ME-WOT-47	NJ S-2265	PA PA-AH-0067	
IL UPW-0190713-OH	MI UPW-0190713-OH	15939	QUEBEC, CANADA QC-6ML-047	
MA MA-294	MN UPW-0190713-OH	NY NJ-113	RI RI-535	

White - FCI Original
Yellow - FCI Billing
Blue - FCI Office/Customer
Green - Retained by TSDF
Gold - Retained by Generator**S 365538**

350 Pigeon Point Road
New Castle, DE 19720
Phone: (302) 658-2005
Fax: (302) 658-6229

175 Bartow Mun. Airport
Bartow, FL 33830
Phone: (863) 533-4599
Fax: (863) 533-1613

5533 Dunham Road
Maple Heights, OH 44137
Phone: (330) 835-3473
Fax: (330) 835-3732

108 Monahan Avenue
Dunmore, PA 18512
Phone: (570) 342-7232
Fax: (570) 342-7367

132 Myrtle Beach Hwy.
Sumter, SC 29153
Phone: (803) 773-2611
Fax: (803) 773-2942

SHIPPER NAME/ADDRESS <i>OSCEOLA ELEMENTARY SCHOOL 700 STILLER AV FAIRFIELD CT</i>		PHONE <i>(203) 658-8277</i>			
		(AREA CODE)			
TRACTOR <i>755</i>		TRAILER <i>-</i>		APPOINTMENT TIME :	
FCI REP. LOADING (PRINT)	PROCEDURE	EQUIP. SPOTTED	EQUIP. REMOVED	TIME AT SHIPPER (MILITARY TIME ONLY)	
<i>LARRY GAMBINO</i>	<i>REMOVE</i>	<i>-</i>		ARRIVAL TIME : DEPARTURE TIME :	
COMMENTS OR DELAYS AT SHIPPER				EQUIPMENT USED <i>NO</i>	

BROKER:		MANIFEST / DOCUMENT NO. <i>111714</i>									
PO #:		WO #:									
(X) HM	PROPER U.S. D.O.T. SHIPPING NAME	U.S. D.O.T. HAZARDOUS CLASS	NA/UN/NO.	PACKING GROUP	NO. CONT.	CONT. TYPE	NET QUANTITY	UNIT MEASURE	WASTE NO.	FORM	
1	<i>NEW 1/2 TON WHEEL</i>				1	<i>CH</i>	<i>30</i>	<i>Y</i>			
2											
3											

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION NUMBER.

APPROVAL *259395*

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA and the State. The materials described above were consigned to the Transporter named. The consignee can and will accept the shipment and has a valid permit to do so if required. I certify that the foregoing is true and correct to the best of my knowledge.

Payment to the contractor for waste removal does not constitute payment to the carrier and if the contractor does not pay the carrier, the shipper is obligated to pay the agreed rate offered to the contractor.

PLEASE PRINT NAME/TITLE	SHIPPER'S SIGNATURE <i>X</i> <i>[Signature]</i>	DATE LOADED <i>11/17/14</i>
I HAVE READ THE ABOVE AND UNDERSTAND AND AGREE TO ALL OF ITS CONTENT.		MO. DAY YR.

CONSIGNEE NAME/ADDRESS <i>AUS. COLUMBIAN (1400000) 605 700Y LA KANSAS IA</i>		PHONE <i>(814) 255-1744</i>			
		(AREA CODE)			
TRACTOR		TRAILER		APPOINTMENT TIME :	
FCI REP. UNLOADING (PRINT)	PROCEDURE	EQUIP. SPOTTED	EQUIP. REMOVED	TIME AT CONSIGNEE (MILITARY TIME ONLY)	
	<i>UNLOAD</i>			ARRIVAL TIME : DEPARTURE TIME :	
COMMENTS OR DELAYS AT CONSIGNEE				EQUIPMENT USED	
PLEASE PRINT NAME/TITLE		CONSIGNEE SIGNATURE <i>X</i> <i>[Signature]</i>		DATE UNLOADED <i>/ /</i>	
				MO. DAY YR.	

AR H-0257

CT CT-HW-307

DE DE-HW-203

DE-SW-203

IL UPW-0190713-OH

MA-294

MD HWH-167

2001-OPV-2335

ME ME-HWT-47

ME-WOT-47

MI UPW-0190713-OH

MN UPW-0190713-OH

MO H-1490

ND WH-429

NH TNH-0047

NJ S-2265

15939

NY NJ-113

OH UPW-0190713-OH

OK UPW-0190713-OH

ONTARIO, CANADA A 840943

PA PA-AH-0067

QUEBEC, CANADA QC-6ML-047

RI RI-535

TX 40705

WI 11602

WV UPW-0190713-OH

White - FCI Original

Yellow - FCI Billing

Blue - FCI Office/Customer

Green - Retained by TSDF

Gold - Retained by Generator

555110 BOL 111714

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number N/A	2. Page 1 of 1	3. Emergency Response Phone 908-415-5607	4. Waste Tracking Number 111714		
5. Generator's Name and Mailing Address Fairfield Board of Education 501 Kings Highway Fairfield, CT Generator's Phone: 203-255-8277			Generator's Site Address (if different than mailing address) Osborn Elementary School 760 Stillson Avenue Fairfield, CT				
6. Transporter 1 Company Name Freehold Cartage, Inc.				U.S. EPA ID Number NMD054126154			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address ADS Greentree Landfill 635 Toby Road Kersey, PA 15846 Facility's Phone: 814-255-1744				U.S. EPA ID Number N/A			
9. Waste Shipping Name and Description			10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
			No.	Type			
1. Non Hazardous waste solid, Non Dot Non RCRA regulated			001	CM	157 9000	X	
2.							
3.							
4.							
13. Special Handling Instructions and Additional Information Approval #259395 Weight is estimated PCB Bulk Product Waste with Non Friable Asbestos Box 9619							
14. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.							
Generator's/Officer's Printed/Typed Name			Signature		Month	Day	Year
					11	17	14
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:							
16. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name			Signature		Month	Day	Year
LARRY GEMBERLINE					11	17	14
Transporter 2 Printed/Typed Name			Signature		Month	Day	Year
17. Discrepancy							
17a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
17b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number							
Facility's Phone:							
17c. Signature of Alternate Facility (or Generator) Month Day Year							
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a							
Printed/Typed Name			Signature		Month	Day	Year

1/26/06
2506

GENERATOR	NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number NLP		2. Page 1 of		3. Emergency Response Phone 203-254-5071		4. Waste Tracking Number 259397	
	5. Generator's Name and Mailing Address Fairfield Board of Education 301 Kings Highway Fairfield, CT				Generator's Site Address (if different than mailing address) Gedon Elementary School 760 Bursen Avenue Fairfield, CT					
	Generator's Phone: 203-255-6277								U.S. EPA ID Number	
	6. Transporter 1 Company Name SRS National								U.S. EPA ID Number	
	7. Transporter 2 Company Name								U.S. EPA ID Number	
	8. Designated Facility Name and Site Address ADS - Greentree Landfill 636 Toby Road Meriden, CT 06465								U.S. EPA ID Number	
	Facility's Phone: 203-265-1744									
	9. Waste Shipping Name and Description				10. Containers		11. Total Quantity		12. Unit Wt./Vol.	
					No. Type					
	1. Non Hazardous waste 5046 Non DOT Non RCRA regulated				001 CB		10,000			
2.										
3.										
4.										
13. Special Handling Instructions and Additional Information Approval #259395 Weight is estimated PCB Bulk Product waste with non friable asbestos 7.51										
14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.										
Generator's/Offor's Printed/Typed Name					Signature			Month Day Year 12 17 14		
INT'L	15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.					Port of entry/exit: _____ Date leaving U.S.: _____				
	Transporter Signature (for exports only):									
TRANSPORTER	16. Transporter Acknowledgment of Receipt of Materials									
	Transporter 1 Printed/Typed Name				Signature			Month Day Year 12 17 14		
SIGNED FACILITY	Transporter 2 Printed/Typed Name				Signature			Month Day Year		
	17. Discrepancy									
17a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					Manifest Reference Number:					
17b. Alternate Facility (or Generator)					U.S. EPA ID Number					
Facility's Phone:										
17c. Signature of Alternate Facility (or Generator)					Month Day Year					
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a										
Printed/Typed Name					Signature			Month Day Year 12 17 14		

5 CB 56 T 3.0 ... 620

GENERATOR	NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number 194	2. Page 1 of 1	3. Emergency Response Phone 203-654-9141	4. Waste Tracking Number		
	5. Generator's Name and Mailing Address Fairfield Board of Education 501 Kings Highway Fairfield, CT			Generator's Site Address (if different than mailing address) Osborn Elementary School 760 Stillson Avenue Fairfield, CT				
	Generator's Phone: 203-255-8277							
	6. Transporter 1 Company Name SFB National			U.S. EPA ID Number N/A				
	7. Transporter 2 Company Name			U.S. EPA ID Number				
TRANSPORTER	8. Designated Facility Name and Site Address AGS - Greentree Landfill 655 Tedy Road Kersey, PA 15346			U.S. EPA ID Number 124				
	Facility's Phone: 814-255-1744							
	9. Waste Shipping Name and Description		10. Containers		11. Total Quantity	12. Unit Wt./Vol.		
			No.	Type				
	1. Non Hazardous waste solid Non OOD, Non RCRA regulated		001	CM		K		
DESIGNATED FACILITY	2.							
	3.							
	4.							
	13. Special Handling Instructions and Additional Information Approval #259395 weight is estimated PCB Bulk Product waste with Non Friable Asbestos							
	14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.							
INT'L	Generator's/Offoror's Printed/Typed Name			Signature		Month	Day	Year
	15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.			Port of entry/exit:				
	Transporter Signature (for exports only):			Date leaving U.S.:				
	16. Transporter Acknowledgment of Receipt of Materials							
	Transporter 1 Printed/Typed Name MAT GEEBEE			Signature		Month	Day	Year
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name			Signature		Month	Day	Year
	17. Discrepancy							
	17a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
	Manifest Reference Number:							
	17b. Alternate Facility (or Generator) U.S. EPA ID Number							
DESIGNATED FACILITY	Facility's Phone:							
	17c. Signature of Alternate Facility (or Generator)							
	18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a							
	Printed/Typed Name Signature Date 1/8/15 Month Day Year							

GENERATOR	NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number N/A		2. Page 1 of		3. Emergency Response Phone 203-553-5011		4. Waste Tracking Number 050305			
	5. Generator's Name and Mailing Address Fairfield Board of Education 901 Kings Highway Fairfield CT						Generator's Site Address (if different than mailing address) Osborn Elementary School 750 Guilford Avenue Fairfield, CT					
	Generator's Phone: 203-255-8277											
	6. Transporter 1 Company Name SRP National						U.S. EPA ID Number 1019					
	7. Transporter 2 Company Name						U.S. EPA ID Number					
TRANSPORTER	8. Designated Facility Name and Site Address ADS - Greentree Landfill 635 Toby Road Mersey, PA 15845						U.S. EPA ID Number N/A					
	Facility's Phone: 814-265-1744											
	9. Waste Shipping Name and Description						10. Containers		11. Total Quantity	12. Unit Wt./Vol.		
							No.	Type				
	1. Non Hazardous waste solid, non DOT, non RCRA regulated						001	CM	10,000			
2.												
3.												
4.												
DESIGNATED FACILITY	13. Special Handling Instructions and Additional Information Approval #259395 weight is estimated PCB Bulk Product Waste with non friable Asbestos <div style="text-align: right; font-size: 2em;">9.00</div>											
	14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.											
	Generator's/Offor's Printed/Typed Name MICRO 12						Signature 		Month 1	Day 6	Year 1	
	15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.						Port of entry/exit: Date leaving U.S.:					
	16. Transporter Acknowledgment of Receipt of Materials											
Transporter 1 Printed/Typed Name						Signature 		Month 1	Day 6	Year 1		
Transporter 2 Printed/Typed Name						Signature		Month	Day	Year		
DESIGNATED FACILITY	17. Discrepancy											
	17a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection											
	Manifest Reference Number:											
	17b. Alternate Facility (or Generator)						U.S. EPA ID Number					
	Facility's Phone:											
17c. Signature of Alternate Facility (or Generator)								Month	Day	Year		
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a												
Printed/Typed Name						Signature 		Month 1	Day 6	Year 1		

GENERATOR

INT'L

TRANSPORTER

SIGNATURE FACILITY

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number N/A		2. Page 1 of 1	3. Emergency Response Phone DOT 284-5011		4. Waste Tracking Number		
5. Generator's Name and Mailing Address Fairfield Board of Education 501 Kings Highway Fairfield, CT					Generator's Site Address (if different than mailing address) Osgood Elementary School 750 Silsbee Avenue Fairfield, CT				
Generator's Phone: 203-255-8277									
6. Transporter 1 Company Name SRS National					U.S. EPA ID Number N/A				
7. Transporter 2 Company Name					U.S. EPA ID Number				
8. Designated Facility Name and Site Address ADS - Greentree Landfill 635 Toby Road Mersey, PA 15845					U.S. EPA ID Number N/A				
Facility's Phone: 814-268-1744									
9. Waste Shipping Name and Description					10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
					No.	Type			
1. Non Hazardous waste solid Non DOT, Non RCRA regulated					001	CM			
2.									
3.									
4.									
13. Special Handling Instructions and Additional Information Approval #259395 weight is estimated PCB Bulk Product waste									
14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.									
Generator's/Offor's Printed/Typed Name J. T. ...					Signature [Signature]		Month 1	Day 14	Year 15
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____									
16. Transporter Acknowledgment of Receipt of Materials									
Transporter 1 Printed/Typed Name [Name]					Signature [Signature]		Month 1	Day 16	Year 15
Transporter 2 Printed/Typed Name					Signature		Month	Day	Year
17. Discrepancy									
17a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
17b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number _____									
Facility's Phone: _____									
17c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____									
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a									
Printed/Typed Name					Signature [Signature]		Month 1	Day 17	Year 15

956

Can # 500 308

NON-HAZARDOUS
WASTE MANIFEST

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

5. Generator's Name and Mailing Address

Generator's Site Address (if different than mailing address)

Fairfield Board of Education
500 Kings Highway
Fairfield, CT

Cisbom Elementary School
750 Shiloh Avenue
Fairfield, CT

Generator's Phone: 203-255-8277

6. Transporter 1 Company Name

SPD National

U.S. EPA ID Number

NA

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

ADS - Greentree Landfill
635 Toby Road
Kersey, PA 15545

U.S. EPA ID Number

NA

Facility's Phone: 814-255-1744

9. Waste Shipping Name and Description

10. Containers

11. Total
Quantity

12. Unit
Wt./Vol.

No.

Type

1. Non Hazardous waste solid non DOT Non HCR regulated

DOT

CIA

10

K

2.

3.

4.

13. Special Handling Instructions and Additional Information

Approval # 259385
weight is estimated
RCF Bulk Product Waste

ADA - Approved
9/10/15

7.65

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

Generator's/Offor's Printed/Typed Name

Signature

Month Day Year

1 10 15

15. International Shipments

☐

Import to U.S.

☐

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

1 10 15

Transporter 2 Printed/Typed Name

Signature

Month Day Year

1 10 15

17. Discrepancy

17a. Discrepancy Indication Space

☐

Quantity

☐

Type

☐

Residue

☐

Partial Rejection

☐

Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

1 10 15

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

1 10 15

GENERATOR	NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number 000		2. Page 1 of 1		3. Emergency Response Phone 203-654-5041		4. Waste Tracking Number			
	5. Generator's Name and Mailing Address Fairfield Board of Education 801 Kings Highway Fairfield, CT						Generator's Site Address (if different than mailing address) Osdont Elementary School 760 Shelton Avenue Fairfield, CT					
	Generator's Phone: 203-255-8277											
	6. Transporter 1 Company Name SRS National						U.S. EPA ID Number N/A					
	7. Transporter 2 Company Name						U.S. EPA ID Number					
TRANSPORTER	8. Designated Facility Name and Site Address ADS - Greentree Landfill 635 Toby Road Kersey, PA 15646						U.S. EPA ID Number N/A					
	Facility's Phone: 814-368-1744											
	9. Waste Shipping Name and Description						10. Containers		11. Total Quantity	12. Unit Wt./Vol.		
							No.	Type				
	1. Non Hazardous waste solid non DOT, Non RCRA regulated						001	GM				
2.												
3.												
4.												
SIGNATURE FACILITY	13. Special Handling Instructions and Additional Information Approval # 259395 weight is estimated PUB Bulk Product Waste with non friable asbestos											
	14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.											
	Generator's/Offor's Printed/Typed Name					Signature			Month	Day	Year	
									1	26	15	
	15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.					Port of entry/exit: Date leaving U.S.:						
TRANSPORTER	16. Transporter Acknowledgment of Receipt of Materials											
	Transporter 1 Printed/Typed Name					Signature			Month	Day	Year	
									1	26	15	
	Transporter 2 Printed/Typed Name					Signature			Month	Day	Year	
SIGNATURE FACILITY	17. Discrepancy											
	17a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection											
	Manifest Reference Number:											
	17b. Alternate Facility (or Generator)					U.S. EPA ID Number						
	Facility's Phone:											
17c. Signature of Alternate Facility (or Generator)								Month	Day	Year		
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a												
Printed/Typed Name					Signature			Month	Day	Year		

Cont # 2006

GENERATOR	NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Waste Tracking Number		
	5. Generator's Name and Mailing Address Fairfield Board of Education 501 Kings Highway Fairfield CT			Generator's Site Address (if different than mailing address) Osborn Elementary School 750 Stillson Avenue Fairfield, CT				
	Generator's Phone: 203-255-8077							
	6. Transporter 1 Company Name ARS National			U.S. EPA ID Number 1475				
	7. Transporter 2 Company Name			U.S. EPA ID Number				
	8. Designated Facility Name and Site Address HQS - Greentree Landfill 635 Toby Road Norsey, PA 15045			U.S. EPA ID Number 1034				
	Facility's Phone: 614-265-1744							
	9. Waste Shipping Name and Description		10. Containers		11. Total Quantity	12. Unit Wt./Vol.		
			No.	Type				
	1. Non Hazardous waste solid non DOT Non RCRA regulated		001	GM	304			
2.								
3.								
4.								
TRANSPORTER	13. Special Handling Instructions and Additional Information Approval #251395 Weight is estimated PCB Bulk Product Waste with non friable asbestos 4/90							
	14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.							
	Generator's/Offeror's Printed/Typed Name			Signature		Month	Day	Year
	2/16/95					2	16	95
	15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:							
	16. Transporter Acknowledgment of Receipt of Materials							
	Transporter 1 Printed/Typed Name			Signature		Month	Day	Year
	2/16/95					2	16	95
	Transporter 2 Printed/Typed Name			Signature		Month	Day	Year
DESIGNATED FACILITY	17. Discrepancy							
	17a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
	Manifest Reference Number:							
	17b. Alternate Facility (or Generator)			U.S. EPA ID Number				
	Facility's Phone:							
	17c. Signature of Alternate Facility (or Generator)			Signature		Month	Day	Year
	18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a							
	Printed/Typed Name			Signature		Month	Day	Year



☐ 15 Mullen Road
Enfield, CT 06082
(860) 746-3200
Fax (860) 741-5927

☐ 184 Municipal Road
Waterbury, CT 06708
(203) 596-8913
Fax (203) 753-6614

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

Nº 7523

If waste is asbestos waste, complete sections I, III, and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

ACC# 0012040011
WO# 2638547

31129

Section I GENERATOR (Generator completes all of section I)

a. Generator Name: Gennarini Construction
c. Address: 25 Maple St
Bridgewater, CT 06608
e. Phone No.: (203) 366-8957

b. Generating Location: Osborne Hill School
d. Address: 760 Stillson Rd
FAIRFIELD CT
f. Phone No.: _____
i. County Service Code: _____

If owner of the generating facility differs from the generator provide:

j. Description of Waste	Waste Code	Qty (%#)
1. <u>Vapor barrier paper</u>	<u>Non-friable</u>	<u>100 bags</u>
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____

Shipped In:
☒ Rolloff
☐ Fiber Drum
☐ Truck
☐ Other
Truck Weight (Tons) _____

Generators certification; I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations: AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

Section II TRANSPORTER (Generator completes a-d. Transporter I completed e-g. Transporter II completed h-n)

TRANSPORTER I
a. Name: USA
b. Address: 184 Municipal Rd
Waterbury, CT 06708
c. Driver Name/Title: (Print/Type)
Phone No.: (203) 596-8913
e. Truck No.: 163

TRANSPORTER II
h. Name: Duce Trucking
i. Address: 28 Stillson Ave
FAIRFIELD CT
j. Driver Name/Title: (Print/Type)
k. Phone No.: (203) 596-8913
l. Truck No.: 4657

TRANSPORTER III
o. Name: _____
p. Address: _____
q. Driver Name/Title: (Print/Type)
r. Phone No.: _____
s. Truck No.: _____

f. Vehicle License No./State: 5509042

m. Vehicle License No./State: CT

t. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

Acknowledgement of Receipt of Materials.

Acknowledgement of Receipt of Materials.

g. [Signature] 031415
Driver Signature Shipment Date

n. [Signature] 9112015
Driver Signature Shipment Date

u. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d. Destination site completes e-f)

a. Site ☐: REK Tech LLC
b. Mailing 203 Parkway 7
Address: Portland CT 06480
Phone: 870 343 1011

c. Site ☒: Minerva Ent.
d. Mailing 9000 Minerva Rd
Address: Waterbury, CT 06708
Phone: 203-811-3435

e. Site ☐: _____
f. Mailing _____
Address: _____
Phone: _____

g. Discrepancy Indication Space:

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

h. [Signature]
Name of Authorized Agent

[Signature]
Signature

031415
Receipt Date

Section IV ASBESTOS (Generator completes a-d, f, g. Operator completes e)

a. Operator's* Name: ENCO
c. Operator's* Address: P.O. Box 2654
d. Special Handling Instructions and additional information: _____

a. Operator's* Phone No.: (203) 754-5959

Waterbury, CT 06723

OPERATOR'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 government regulations.

e. Operator's Name & Title: Edmond I. Robichaud, Manager
Print/Type

E. Robichaud (U.S.)
Operator's Signature

031415
Date

f. Name and Address
of Responsible Agency: U.S. - E.P.A., Region 1, JFK Bldg: Boston, MA 02203

g. ☐ Friable ☐ Non-friable ☐ Both _____ % friable _____ % non-friable

* Operator refers to the company which owns, operates, controls, or supervises the facility being demolished or renovated, or demolition or renovation operation, or both.

GREENTREE LANDFILL, LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

202382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE		CELL	TICKET #	OPERATOR	
01		6263	966293	40049	
TRUCK			CONTAINER	LICENSE	
FCI897T30				AM549R NJ	
REFERENCE				IN	OUT
003 365302				10/1/14 8:26 am	10/1/14 9:38 am

CONTRACT: 259395

BOL:

GROSS 64,800.00 LBS Scale In
TARE 42,140.00 LBS Scale Out
NET 22,660.00 LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
11.33	tn	ASBN	CB	100.00			

MC69935, RC61268, GC68619, BP17086, AR64954

Tax Total

Total

Paid

Change

Check#

Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: _____

VOID - DO NOT ACCEPT - FACILITY

GREENTREE LANDFILL, LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

202382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE	CELL	TICKET #	OPERATOR	
01	6263	966293	40049	
TRUCK		CONTAINER	LICENSE	
FCI897T30			AM549R NJ	
REFERENCE			IN	OUT
003 365302			10/1/14 8:26 am	10/1/14 9:38 am

CONTRACT: 259395

BOL:

GROSS 64,800.00LBS Scale In
TARE 42,140.00LBS Scale Out
NET 22,660.00LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
11.33	tn	ASBN	CB	100.00			

MC69935, RC61268, GC68619, BP17086, AR64954

Total

Paid

Change

Check#

Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: _____

CUSTOMER COPY

KERSEY, PA 15846
8142651744

202382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE	CELL	TICKET #	OPERATOR	
01	6263	966317	40049	
TRUCK		CONTAINER	LICENSE	
FCI888T30			AA234G NJ	
REFERENCE			IN	OUT
002 367028			10/1/14 8:50 am	10/1/14 10:33 am

CONTRACT: 259395

BOL:

GROSS 64,460.00 LBS Scale In
TARE 39,700.00 LBS Scale Out
NET 24,760.00 LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
12.38	tn	ASBN	CB	100.00			

MC69935, RC61268, GC68619, BP17086, AR64954

Tax Total

Total

hereby certify that this load does not contain any unauthorized hazardous waste.

Paid

Change

Check#

Recpt #

SIGNATURE: _____

VOID - DO NOT ACCEPT - FACILITY

GREENTREE LANDFILL, LLC
TOBY ROAD
KERSEY, PA 15846
8142651744

202382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE	CELL	TICKET #	OPERATOR	
01	6263	966317	40049	
TRUCK		CONTAINER	LICENSE	
FCI888T30			AA234G NJ	
REFERENCE			IN	OUT
002 367028			10/1/14 8:50 am	10/1/14 10:33 am

CONTRACT: 259395

BOL:

GROSS 64,460.00LBS Scale In
TARE 39,700.00LBS Scale Out
NET 24,760.00 LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
12.38	tn	ASBN	CB	100.00			

MC69935, RC61268, GC68619, BP17086, AR64954

hereby certify that this load does not contain any unauthorized hazardous waste.

Total

Paid

Change

Check#

Recpt #

SIGNATURE: _____

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GREEN TREE ENVIRONMENTAL LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

202382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE		CELL	TICKET #	OPERATOR	
01		6263	966455	40049	
TRUCK			CONTAINER	LICENSE	
FCI888T20				AA234G NJ	
REFERENCE				IN	OUT
001 365301				10/2/14 7:40 am	10/2/14 7:40 am

CONTRACT: 259395
BOL:

GROSS 72,740.00 LBS Scale In
TARE 40,980.00 LBS Tare Out
NET 31,760.00 LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
15.88	TN	ASBN	CB	100.00			

MC69935, RC61268, GC68619, BP17086, AR64954

Tax Total
Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: _____

VOID - DO NOT ACCEPT - FACILITY

GREEN TREE ENVIRONMENTAL LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

202382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE	CELL	TICKET #	OPERATOR	
01	6263	966455	40049	
TRUCK		CONTAINER	LICENSE	
FCI888T20			AA234G NJ	
REFERENCE			IN	OUT
001 365301			10/2/14 7:40 am	10/2/14 7:40 am

CONTRACT: 259395
BOL:

GROSS 72,740.00LBS Scale In
TARE 40,980.00LBS Tare Out
NET 31,760.00 LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
15.88	TN	ASBN	CB	100.00			

MC69935, RC61268, GC68619, BP17086, AR64954

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE: _____

CUSTOMER COPY

GREENTREE LANDFILL, LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

202382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE		CELL	TICKET #	OPERATOR	
01		6224	971231	40036	
TRUCK			CONTAINER	LICENSE	
SRSXXLT33B				52630A CN	
REFERENCE				IN	OUT
				11/7/14 6:48 am	11/7/14 6:48 am

CONTRACT: 259395

BOL:

GROSS 60,020.00LBS Scale In
TARE 35,360.00LBS Tare Out
NET 24,660.00 LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
12.33	TN	ASBN	CB	100.00			

MC69935, RC61268, GC68619, BP17086, AR64954

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: 

Total
Paid
Change
Check#
Recpt #

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GREENTREE LANDFILL, LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

202382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE		CELL	TICKET #	OPERATOR	
01		6227	973001	40036	
TRUCK			CONTAINER	LICENSE	
FCI892T30				AA273G NJ	
REFERENCE				IN	OUT
111714				11/21/14 10:05 am	11/21/14 10:45 am

CONTRACT: 259395

BOL:

GROSS 53,540.00LBS Scale In
TARE 36,440.00LBS Scale Out
NET 17,100.00 LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
8.55	tn	ASBN	CB	100.00			

935, RC61268, GC68619, BP17086, AR64954

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: 

Total
Paid
Change
Check#
Recpt #

CUSTOMER COPY

GREENTREE LANDFILL, LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

REPRINT

2382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE		CE	TICKET #	OPERATOR	
01		6242	977754	40036	
TRUCK		CONTAINER		LICENSE	
SRSXXLT20				52630A CN	
REFERENCE				IN	OUT
				1/5/15 10:35 am	1/5/15 10:35 am

CONTRACT: 259395

BOL:

GROSS 57,680.00 LBS Scale In
TARE 42,660.00 LBS Tare Out
NET 15,020.00 LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
7.51	TN	ASBN	CB	100.00			

MC69935, RC61268, GC68619, BP17086, AR64954

Tax Total

Total

Paid

Change

Check#

Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: _____

VOID - DO NOT ACCEPT - FACILITY

GREENTREE LANDFILL, LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

REPRINT

202382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE		CELL	TICKET #	OPERATOR	
01		6242	977754	40036	
TRUCK		CONTAINER		LICENSE	
SRSXXLT20				52630A CN	
REFERENCE				IN	OUT
				1/5/15 10:35 am	1/5/15 10:35 am

CONTRACT: 259395

BOL:

GROSS 57,680.00LBS Scale In
TARE 42,660.00LBS Tare Out
NET 15,020.00LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
7.51	TN	ASBN	CB	100.00			

MC69935, RC61268, GC68619, BP17086, AR64954

Total

Paid

Change

Check#

Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: _____

CUSTOMER COPY

GREENTREE LANDFILL, LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

202382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE	CELL	TICKET #	OPERATOR	
01	6225	977979	40049	
TRUCK		CONTAINER	LICENSE	
SRSXXLT20			52630A CN	
REFERENCE			IN	OUT
259395			1/6/15 2:03 pm	1/6/15 2:03 pm

CONTRACT: 259395

BOL:

GROSS 61,060.00 LBS Scale In
TARE 42,660.00 LBS Tare Out
NET 18,400.00 LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
9.20	TN	ASBN	CB	100.00			

MC69935, RC61268, GC68619, BP17086, AR64954

Tax Total
Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: _____

VOID - DO NOT ACCEPT - FACILITY

GREENTREE LANDFILL, LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

202382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE	CELL	TICKET #	OPERATOR	
01	6225	977979	40049	
TRUCK		CONTAINER	LICENSE	
SRSXXLT20			52630A CN	
REFERENCE			IN	OUT
259395			1/6/15 2:03 pm	1/6/15 2:03 pm

CONTRACT: 259395

BOL:

GROSS 61,060.00LBS Scale In
TARE 42,660.00LBS Tare Out
NET 18,400.00LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
9.20	TN	ASBN	CB	100.00			

MC69935, RC61268, GC68619, BP17086, AR64954

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: _____

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#7002 XVL

GREENTREE LANDFILL, LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

2382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE		CELL	TICKET #	OPERATOR	
01		6242	978327	40049	
TRUCK		CONTAINER		LICENSE	
SCB56T20				50957A CN	
REFERENCE				IN	OUT
NONE				1/8/15 2:35 pm	1/8/15 3:46 pm

CONTRACT: 259395

BOL:

GROSS 61,820.00 LBS Scale In
TARE 43,220.00 LBS Scale Out
NET 18,600.00 LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
9.30	tn	ASBN	CB	100.00			

MC69935, RC61268, GC68619, BP17086, AR64954

Tax Total

Total

Paid

Change

Check#

Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: _____

VOID - DO NOT ACCEPT - FACILITY

GREENTREE LANDFILL, LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

202382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE		CELL	TICKET #	OPERATOR	
01		6242	978327	40049	
TRUCK		CONTAINER		LICENSE	
SCB56T20				50957A CN	
REFERENCE				IN	OUT
NONE				1/8/15 2:35 pm	1/8/15 3:46 pm

CONTRACT: 259395

BOL:

GROSS 61,820.00LBS Scale In
TARE 43,220.00LBS Scale Out
NET 18,600.00 LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
-9.30	tn	ASBN	CB	100.00			

MC69935, RC61268, GC68619, BP17086, AR64954

Total

Paid

Change

Check#

Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: _____

CUSTOMER COPY

GREENTREE LANDFILL, LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

202382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE	CELL	TICKET #	OPERATOR	
01	6226	979360	40049	
TRUCK		CONTAINER	LICENSE	
SRSXXLT20			52630A CN	
REFERENCE			IN	OUT
2092			1/19/15 1:56 pm	1/19/15 1:56 pm

CONTRACT: 259395

BOL:

GROSS 61,780.00 LBS Scale In
TARE 42,660.00 LBS Tare Out
NET 19,120.00 LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
9.56	TN	ASBN	CB	100.00			

MC69935, RC61268, GC68619, BP17086, AR64954

Tax Total
Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: _____

VOID - DO NOT ACCEPT - FACILITY

GREENTREE LANDFILL, LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

202382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE	CELL	TICKET #	OPERATOR	
01	6226	979360	40049	
TRUCK		CONTAINER	LICENSE	
SRSXXLT20			52630A CN	
REFERENCE			IN	OUT
2092			1/19/15 1:56 pm	1/19/15 1:56 pm

CONTRACT: 259395

BOL:

GROSS 61,780.00LBS Scale In
TARE 42,660.00LBS Tare Out
NET 19,120.00LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
9.56	TN	ASBN	CB	100.00			

MC69935, RC61268, GC68619, BP17086, AR64954

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: _____

CUSTOMER COPY

XX/ /

GREENTREE LANDFILL, LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

202382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE		CELL	TICKET #	OPERATOR	
01		6262	980284	40049	
TRUCK		CONTAINER		LICENSE	
SRSXXLT20				52630A CN	
REFERENCE				IN	OUT
NONE				1/28/15 12:57 pm	1/28/15 12:57 pm

CONTRACT: 259395
BOL:

GROSS 57,960.00 LBS Scale In
TARE 42,660.00 LBS Tare Out
NET 15,300.00 LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
7.65	TN	ASBN	CB	100.00			

MC69935, RC61268, GC68619, BP17086, AR64954

Tax Total
Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: _____

VOID - DO NOT ACCEPT - FACILITY

GREENTREE LANDFILL, LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

202382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE		CELL	TICKET #	OPERATOR	
01		6262	980284	40049	
TRUCK		CONTAINER		LICENSE	
SRSXXLT20				52630A CN	
REFERENCE				IN	OUT
NONE				1/28/15 12:57 pm	1/28/15 12:57 pm

CONTRACT: 259395
BOL:

GROSS 57,960.00LBS Scale In
TARE 42,660.00LBS Tare Out
NET 15,300.00 LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
7.65	TN	ASBN	CB	100.00			

935, RC61268, GC68619, BP17086, AR64954

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: _____

CUSTOMER COPY **XXL**

GREENTREE LANDFILL, LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

202382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE	CELL	TICKET #		OPERATOR	
01	6226	979495		40049	
TRUCK		CONTAINER		LICENSE	
SRSXXLT20				52630A CN	
REFERENCE				IN	OUT
NONE				1/20/15 12:43 pm	1/20/15 12:43 pm

CONTRACT: 259395

BOL:

GROSS 57,960.00 LBS Scale In
TARE 42,660.00 LBS Tare Out
NET 15,300.00 LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
7.65	TN	ASBN	CB	100.00			

MC69935, RC61268, GC68619, BP17086, AR64954

Tax Total
Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: _____

VOID - DO NOT ACCEPT - FACILITY

GREENTREE LANDFILL, LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

202382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE	CELL	TICKET #	OPERATOR	
01	6226	979495	40049	
TRUCK		CONTAINER	LICENSE	
SRSXXLT20			52630A CN	
REFERENCE			IN	OUT
NONE			1/20/15 12:43 pm	1/20/15 12:43 pm

CONTRACT: 259395

BOL:

GROSS 57,960.00LBS Scale In
TARE 42,660.00LBS Tare Out
NET 15,300.00LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
7.65	TN	ASBN	CB	100.00			

935, RC61268, GC68619, BP17086, AR64954

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: _____

CUSTOMER COPY

GREENTREE LANDFILL, LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

2382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE		CELL	TICKET #	OPERATOR	
01		10B4	982133	40036	
TRUCK		CONTAINER		LICENSE	
SRSXXLT20				52630A CN	
REFERENCE				IN	OUT
259395-021615				2/18/15 10:56 am	2/18/15 10:56 am

CONTRACT: 259395

BOL:

GROSS 52,460.00 LBS Scale In
TARE 42,660.00 LBS Tare Out
NET 9,800.00 LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
4.90	TN	ASBN	CB	100.00			

MC69935, RC61268, GC68619, BP17086, AR64954

Tax Total

Total

Paid

Change

Check#

Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: _____

VOID - DO NOT ACCEPT - FACILITY

GREENTREE LANDFILL, LLC
635 TOBY ROAD
KERSEY, PA 15846
8142651744

202382
VEOLIA TECH SOLUTIONS
136 ROCKWELL RD
NEWINGTON, CT 06111

INVOICE
INBOUND

SITE		CELL	TICKET #	OPERATOR	
01		10B4	982133	40036	
TRUCK		CONTAINER		LICENSE	
SRSXXLT20				52630A CN	
REFERENCE				IN	OUT
259395-021615				2/18/15 10:56 am	2/18/15 10:56 am

CONTRACT: 259395

BOL:

GROSS 52,460.00LBS Scale In
TARE 42,660.00LBS Tare Out
NET 9,800.00LBS

QTY	UNIT	DESCRIPTION	ORIGIN	%	RATE	TAX	TOTAL
4.90	TN	ASBN	CB	100.00			

935, RC61268, GC68619, BP17086, AR64954

Total

Paid

Change

Check#

Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: _____

CUSTOMER COPY

SITE SUPERVISOR DOCUMENTAION

Superior Industries LLC

**SUPERIOR
INDUSTRIES L.L.C.**



Committed to a Clean Environment

**Certificate of Completion
Awarded to**

Stanley Plisner

(SSN XXX-XX-5155) (DOB 01/24/1953)

*Has completed a 8 Hour 1 day Approved Course of Instruction in
Hazardous Waste Operations & Emergency Response (HAZWOPER)*



HAZWOPER Refresher Training

August 2, 2013

Required by 29 CFR 1910.120

**SUPERIOR INDUSTRIES LLC
342 Carter Lane
Southington, Ct. 06489
860-620-1133 (voice)
860-620-1134 (fax)**

**Examination Date: August 2, 2013
Expiration Date: August 2, 2014
Certificate Number: HWR-SP-01-24-53-13**


Earl Clark, Training Coordinator

WALLET CARD

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

NAME
STANLEY PLISNER

VALIDATION NO. **03-721069** CERTIFICATION NO. **002633** CURRENT THROUGH **01/31/15**

PROFESSION
ASBESTOS ABATEMENT SUPERVISOR

SIGNATURE *James Mullins*
COORDINATOR

TRAINING CERTIFICATE

Presented to

STANLEY PLISNER

094-50-5155

D.O.B. 01/24/53

417 Eddy Glover Blvd., New Britain, CT 06053

Has successfully completed an 8 (eight) hour
ASBESTOS SUPERVISOR/CONTRACTOR REFRESHER COURSE

December 21, 2013

This training is approved & given in accordance with the Department of Health Standards
required as per Section 19a-332 of the Connecticut General Statutes, and complies with the
requirements of the EPA Revised MAP under TSCA Title II of 4/4/94

Presented By

ENCO Environmental Training

70 West Liberty Street, Waterbury, CT

P.O. Box 2654 Waterbury, CT 06723 1-(203)-754-5959

Certificate No: ASR 130506

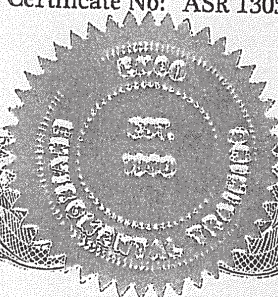
Exam Date: 12/21/2013

Exam Grade: 94 %

EXPIRATION DATE: 12/21/2014

E. Rosiland

Training Director



CERTIFICATE OF COMPLETION

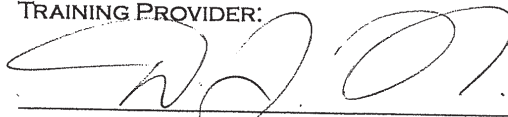
STANLEY PLISNER

HAS SUCCESSFULLY COMPLETED THE OSHA
HAZARDOUS WASTE OPERATIONS AND EMERGENCY
RESPONSE 40-HOUR INITIAL TRAINING IN
ACCORDANCE WITH 29 CFR 1910.120.

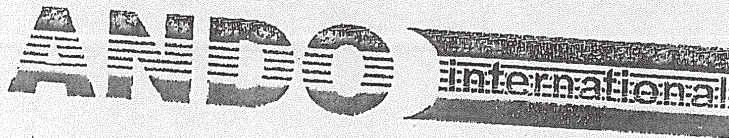
DATES OF TRAINING: MAY 5, 2012 THROUGH JUNE 2, 2012

EXPIRATION DATE: JUNE 2, 2013
CERTIFICATION#: ALO1

TRAINING PROVIDER:



DOUGLAS J. RHOADS, CHMM
RHOADS ENVIRONMENTAL CONSULTING, LLC



Asbestos and Lead Abatement Training

44-01 21st St, Long Island City, NY 11101

Tel: (718) 349-3235; fax: (718) 349-3238

HEREBY CERTIFIES THAT

Stanley Plisner

HAS SUCCESSFULLY COMPLETED N.Y.S. D.O.H. / US E.P.A. / A.H.E.R.A. 40 Hour Course Entitled

ASBESTOS SUPERVISOR CONTRACTOR

FOR THE PURPOSE OF ICR 10 N.Y.C.P.R. PART 73 AND E.P.A.-40 CFR Part 763

THE OFFICIAL RECORD OF SUCCESSFUL COMPLETION OF THIS COURSE IS

THE DOH 2832 CERTIFICATE OF COMPLETION OF ASBESTOS SAFETY TRAINING

On This 15th Day of April, 2005

Date(s) of course: 04/11/05 to 04/15/05

Certificate #: 041505ASCNYSC-07

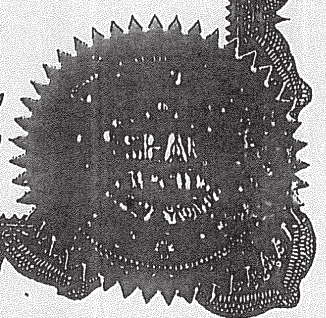
Director: Tomasz Chabowski

Exp. Date: 04/15/06

Exam Date: 04/15/05

Exam Grade: 73%

A handwritten signature in dark ink, appearing to be "Stanley Plisner", written over the printed name.



OSHA

002324611



U.S. Department of Labor
Occupational Safety and Health Administration

Stanley Plisner

has successfully completed a 10-hour Occupational Safety and Health
Training Course in

Construction Safety & Health

(Trainer)

(Date)

6/19/09

QUALITATIVE FIT TEST

AND

RESPIRATOR INSTRUCTION CERTIFICATE OF ATTENDANCE

NAME STANLEY PLISNER

DATE 4-14-14 SS# 5155

LICENSE # 002633

TYPE OF RESPITATOR 1/2 FACE

MANUFACTURER NORTH NIOSH No.

MODEL No. SIZE S MD L

TEST AGENT Irritant Smoke PASS ✓ FAIL

ADMINISTERED BY Elvis Plisner Signature Elvis Plisner

The training administered covered the following:

1. Respirator types, their function, capabilities, and limitations
2. Daily inspection procedures, and cleaning methods
3. Performing the negative and positive USER SEAL CHECK
4. Proper cartridge (filter) selection
5. Various protection factors and MCL's
6. Proper methods of donning and doffing
7. Maintenance and proper storage
8. Proper selection for oxygen deficient atmospheres

The undersigned has attended and successfully completed a respirator Training class and a qualitative fit test.

EMPLOYEE SIGNATURE Stanley Plisner DATE 4-14-14

ENCO Environmental Training

P.O. Box 2654
Waterbury, CT. 06723
Phone (203) 754-5939

70 West Liberty Street
Waterbury, Ct. 06706
Fax (203) 757-5979

New York City Department of Environmental Protection
Asbestos Control Program
59-17 Junction Boulevard, 8th Floor
Flushing, New York 11373

Application for Asbestos

Appendix A

Medical Examination for Asbestos

Applicant Name: Stanley Plisner
Home Address: 417 Eddy Glover Blvd.
City, State and Zip Code: New Britain, Ct. 06053
Telephone Number: 860, 466-9747
Date of Birth: 01-24-1953
Social Security Number: 5155

Based upon the medical examination which included pulmonary function tests of vital capacity (FVC) and forced expiratory volume at one second (FEV₁), and an evaluation of a recent chest roentgenogram, it is my opinion that the above named patient (please check appropriate box)




☐ is not

physically qualified to wear a respirator in the performance of his/her job.

Limitations: _____

Dr. Rozo Alberto
Print Name of Physician


Signature of Physician

187 566
State License Number

April 12 2014
Date of Examination

40 46 74 St
Address

718 458 1515
Telephone Number

Please do not include any other medical information with this form.

Dr. Alberto Rozo
40-46 74th St
Elmhurst, N.Y. 11373
License #187566

Updated 12/2003