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MCB CAMP LEJEUNE
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Final Technical Memorandum

Non-Time-Critical Removal Action Summary Site 89 - Western Wetland, Operable Unit No. 16

Marine Corps Base Camp Lejeune
Jacksonville, North Carolina

Naval Facilities Engineering Command

Prepared for

Department of the Navy

Naval Facilities Engineering Command Mid-Atlantic Division

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Prepared by

CH2MHILL

Non-time-critical Removal Action Summary Site 89—Western Wetland, Operable Unit No. 16

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DATE: July 29, 2010

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7-29-10
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Introduction

This summary technical memorandum describes site work for the Non-time-critical Removal Action (NTCRA) for the Site 89 Western Wetland located within Operable Unit (OU) 16 at Marine Corps Base Camp Lejeune (MCB CamLej) in Onslow County, North Carolina. The NTCRA was conducted to remove soil and sediment with elevated polycyclic aromatic hydrocarbons (PAHs) and pesticide concentrations above ecological risk screening levels. The NTCRA field activities took place from February 22 to March 3, 2010. A photograph log of site activities is provided as **Attachment A**.

CH2M HILL has been tasked with submitting this summary under contract with the Naval Facilities Engineering Command (NAVFAC) Atlantic, Comprehensive Long-term Environmental Action—Navy (CLEAN) 1000 Contract N62470-08-D-1000, Contract Task Order 095. CH2M HILL provided engineering support, construction oversight, and confirmation sampling services only. Implementation of the Western Wetland NTCRA was conducted by Osage of Virginia (Osage) in accordance with the NTCRA Implementation Plan (CH2M HILL, 2010).

Site Background

Site Description

Site 89 is located on Camp Geiger near the intersection of G and 8th Street. Site 89 is the larger of two sites within OU 16. Site 93, the other site in OU 16, is located adjacent to Site 89 on the west. The nearest surface water body is Edwards Creek, which is located along the western and southern portions of the investigation area. The land surface of Site 89 gently slopes in the direction of Edwards Creek, which begins as a series of drainage ditches within Camp Geiger. Edwards Creek begins near 8th Street and flows south for a short distance before turning east, where it tends to widen as it flows through the wooded area east of Site 89. The western portion of the creek flows through the Western Wetland (**Figure 1**).

Only the Western Wetland portion of Site 89 was addressed by this NTCRA. A formal wetlands delineation was conducted for this area in August 2008 during which wetland plants and other hydrologic indicators were observed within the area. A railroad spur is located along the eastern boundary of the Western Wetland area, as shown on **Figure 1**.

Nature and Extent of Contamination

The nature and extent of contamination in the Western Wetland was assessed during a Baseline Ecological Risk Assessment (BERA) and BERA addendum, completed as part of the Comprehensive Remedial Investigation (RI) at Site 89 (CH2M HILL, 2008a; 2008c). Historical sample locations are shown on **Figure 1**. Surface soil and sediment samples were analyzed for metals, pesticides, and semivolatile organic compounds (SVOCs).

During the RI, average concentrations of individual PAHs, total PAHs, and dichlorodiphenyltrichloroethane (DDT) and its derivatives, dichlorodiphenyldichloroethane (DDD), and dichlorodiphenyldichloroethene (DDE) collectively referred to as DDx, exceeded ecological benchmarks (probable effects concentrations [PECs]). PECs for total PAHs and DDx are 22.8 milligrams per kilogram (mg/kg) and 0.572 mg/kg, respectively. Concentrations in sediment sample 89-SD25 had a significant influence on average contaminant concentrations in the wetland.

The BERA Addendum was conducted to further assess ecological risk in the Western Wetland and delineate the area of PAH and DDx impacts. Soil sampling was performed along the eastern boundary of the Western Wetland near the railroad spur. The maximum and average concentrations of individual and total PAHs and DDT and its derivatives exceeded ecological benchmarks. Concentrations in surface soil sample 89-SS75 were the highest for the majority of the analytes. The BERA Addendum concluded that concentrations of PAHs and pesticides detected at sample locations 89-SD25 and 89-SS75 were significantly higher than concentrations from all other sample locations, indicating that 89-SD25 and 89-SS75 are individually isolated areas of elevated contaminant concentrations. The BERA Addendum recommended remedial action for the areas immediately adjacent to 89-SD25 (southern removal area) and 89-SS75 (northern removal area) to prevent migration and reduce the overall ecological risks in the Western Wetland (CH2M HILL, 2008c).

Removal Action Implementation

An Engineering Evaluation/Cost Assessment (EE/CA) was conducted to study alternative removal actions (CH2M HILL, 2009a). The Site 89 Action Memorandum (CH2M HILL, 2009b) documented the selection of excavation with offsite disposal for impacted soil and sediment in the vicinity of 89-SD25 and 89-SS75. The technical approach for the removal action was detailed in the Final NTCRA Implementation Plan (IP) (CH2M HILL, 2010).

The removal action was conducted by Osage with engineering support and construction oversight conducted by CH2M HILL. Removal action activities consisted of erosion and sediment control, general site preparation, soil removal, confirmatory sampling, site restoration, and offsite soil disposal. Representative photographs of the removal action are provided in **Attachment A**.

All site operations were implemented as presented in the IP (CH2M HILL, 2010), Master Field Sampling and Analysis Plan (SAP), and the Master Quality Assurance Project Plan (QAPP) (CH2M HILL, 2008b). Additionally, all activities followed the General Conditions outlined in the United States Army Corps of Engineers (USACE) Nationwide Permit 38 and North Carolina Division of Water Quality General Certification No. 3696.

Erosion and Sediment Control

Prior to soil removal, Osage installed silt fencing around each removal area in accordance with the North Carolina Department of Environment and Natural Resources (NCDENR) Division of Land Resources Land Quality Section Erosion and Sediment Control Field Manual (NCDENR, 1991). Extra-strength synthetic filter fabric with support-wire backing was utilized with 1.33 pounds per linear foot steel support posts spaced 6 feet apart and driven to a depth of 18 inches below grade. Silt fences were inspected daily during excavation activities to ensure there were no rips, tears, or other issues requiring repair. Regular inspections and inspections following any significant rain event were conducted until the areas had become revegetated. Silt fencing was removed on April 20, 2010.

Site Preparation

General site preparation activities were conducted by Osage from February 15 through 19, 2010. A licensed North Carolina surveyor, Lanier Surveying of Cedar Point, North Carolina, located and staked the four corners of each removal area and flagged the locations of the original sample points (89-SD25 and 89-SS75).

Fence and Railroad Spur Removal

Site 89 is bound by a chain link fence with a locked swing gate. As shown on **Figure 1**, approximately 50 feet of fence was removed adjacent to the northern removal area and 45 feet of fence was removed adjacent to the southern removal area to provide access to the wetland while avoiding impact to Edwards Creek. The fence was preserved for re-use after the areas had been completely revegetated and silt fences removed. Additionally, approximately 60 feet of the former railroad spur was removed from the north removal area. The railroad spur was transported to the J&E Salvage and Scrap Yard of Jacksonville, North Carolina for recycling.

Vegetation Clearance

All vegetation within the removal areas was cleared, including trees, brush, stumps, and roots. Removed vegetation was spread in the adjacent wooded and wetland areas to promote ecological habitat.

Buried Utility Locate

Prior to any intrusive activities, the North Carolina One Call Center, Base Public Works drawings, and a professional underground utility locator, Professional Locating Service (PLS) of Jacksonville, North Carolina, were consulted to identify any subsurface utilities within 20 feet of the removal areas that might be impacted by soil removal activities. Utility locating activities took place on February 18, 2010. A 2-foot diameter concrete open channel drainage ditch running north-south was encountered during removal activities in the northern removal area. The channel appears to run parallel to the railroad spur and the

western fence at Site 89 and is covered with soil and vegetation to the north and south of the northern removal area. The channel was left in place during removal activities.

Excavation

Excavation activities were conducted from February 22 through February 25, 2010 and on March 1, 2010. The approximate final dimensions of the northern removal area were 31.5 feet from east to west and 33 feet from north to south. The approximate final dimensions of the south removal area were 34.5 feet from east to west and 36.5 feet from north to south. Excavation extended to a depth of 1 foot below ground surface (bgs) in each area. Approximately 43 cubic yards (yd^3) of soil were excavated from the northern removal area and 55 yd^3 were excavated from the southern removal area using a John Deere model 135C long stick excavator. Soil and sediment was placed in roll-off boxes lined with disposable plastic sheeting.

Confirmatory Sampling

Confirmatory samples were collected by CH2M HILL on February 23 and 24, 2010 to verify that the performance standards specified in the Final NTCRA IP (CH2M HILL, 2010) had been achieved and to determine the final limits of excavation. Five composite samples were collected from each removal area: one from each side wall and one from the base of the excavation (**Figure 1**). Samples were collected by dividing the side wall or base into quadrants and collecting one aliquot from 0 to 3 inches into the wall or below base grade. The four discrete grab samples were thoroughly homogenized into one composite sample. Confirmatory samples were delivered via courier to CompuChem of Raleigh, North Carolina, and analyzed for PAHs by Method 8270 SIM and for DDx by Method 8081A.

Analytical results for the northern and southern removal areas are provided in **Table 1**. All confirmatory samples collected from the northern removal area were below PECs. In the southern removal area, all confirmatory samples were below PECs, with the exception of DDx compounds collected from the west side wall, which exceeded the PEC (572 micrograms per kilogram [µg/kg]) with a concentration of 672 µg/kg. As a result, the excavation was extended an additional 5 feet to the west and another confirmatory sample was collected on March 1, 2010. Analytical results for this additional confirmatory sample indicated that DDx concentrations were below PECs; therefore, excavation was deemed complete.

Site Restoration

After confirming that the excavation limits were achieved (i.e., all confirmatory sample results were below PECs) Osage restored each removal area by backfilling and revegetating disturbed areas. Additional silt fence was installed on the east side of each excavation to fully enclose each soil removal area. Site restoration activities were completed on March 3, 2010.

Backfilling

Clean fill material from a borrow pit operated by Morton Trucking, Inc of Jacksonville, North Carolina was delivered to the site on March 3, 2010. Approximately 33 yd^3 of sandy fill and 22 yd^3 of topsoil were used to backfill the northern removal area. A depression was

created for the drainage ditch that runs through the northern removal area and riprap was placed at the entrance and egress of the drainage channel to minimize sediment impact to and from the removal area. Approximately 44 yd^3 of sandy fill and 22 yd^3 of topsoil were used to backfill the southern removal area. Both removal areas were backfilled to be flush with existing grade to minimize potential erosion and comply with wetlands regulations.

Revegetation of Disturbed Areas

Upon completion of backfilling activities, hay was spread on the removal areas as a temporary erosion control and a rye seed mix was planted. Retention Pond Services of Wilmington, North Carolina was subcontracted to revegetate the northern and southern removal areas with a riparian seed mix and Juncus plants.

Offsite Disposal

Approximately 98 yd^3 of excavated material was placed in five 20-yd^3 and two 15-yd^3 roll-off boxes lined with disposable plastic sheeting. The seven roll-off boxes were filled to approximately three-quarters full to compensate for added weight from saturated soils. The boxes were covered with a secured tarp to prevent rain or other debris from entering while the waste was offsite disposal was coordinated. Roll-off boxes were transported offsite by Shamrock Environmental Corporation of Greensboro, North Carolina from April 12 through April 21, 2010. Waste was disposed of at the Sampson County Disposal facility in Roseboro, North Carolina. Waste disposal manifests are provided in **Attachment B**.

Cost Breakdown

Table 2 lists the cost for each sector of the project and their respective percentages of the project total. As expected, the majority of the cost is the soil removal activity, which included site preparation, excavation, and site restoration. Using these cost numbers, the treated cost is $867 per yd^3.

Attachments

Attachment A—Photograph Log
Attachment B—Disposal Manifests

References

CH2M HILL. 2008a. *Comprehensive Remedial Investigation Site 89 – Operable Unit 16 Former Defense Reutilization and Marketing Office (DRMO), Marine Corps Base Camp Lejeune, Jacksonville, North Carolina.* May.

CH2M HILL. 2008b. *Master Project Plans, Marine Corps Base Camp Lejeune, Jacksonville, North Carolina.* June.

CH2M HILL. 2008c. *Baseline Ecological Risk Assessment Addendum for the Western Wetland, Site 89 – Operable Unit 16, Marine Corps Base Camp Lejeune, Jacksonville, North Carolina*. December.

CH2M HILL. 2009a. *Engineering Evaluation/Cost Assessment Western Wetland at Operable Unit 16 (Site 89) Former Defense Reutilization and Marking Office, Marine Corps Base Camp Lejeune, Jacksonville, North Carolina.* July.

CH2M HILL. 2009b. *Site 89 – Western Wetland Action Memorandum Operable Unit 16, Marine Corps Base Camp Lejeune, Jacksonville, North Carolina.* October.

CH2M HILL. 2010. *Non-time-critical Removal Action Implementation Plan Site 89-Western Wetland Operable Unit No. 16, Marine Corps Base Camp Lejeune, North Carolina.* February

North Carolina Department of Environment and Natural Resources (NCDENR). 1991. *Erosion and Sediment Control Field Manual*. February.

TABLE 1
Confirmatory Sample Results
Site 89 Western Wetland NTCRA
MCB CamLej, Jacksonville, North Carolina

Station ID	IR89-N-B-1	IR89-N-ESW-1	IR89-N-NSW-1	IR89-N-SSW-1	IR89-N-WSW-1	IR89-S-B-1	IR89-S-ESW-1	IR89-S-NSW-1	IR89-S-SSW-1	IR89-S-WSW-1	IR89-S-WSW-2
Sample ID	IR89-N-B-1-10A	IR89-N-ESW-1-10A	IR89-N-NSW-1-10A	IR89-N-SSW-1-10A	IR89-N-WSW-1-10A	IR89-S-B-1-10A	IR89-S-ESW-1-10A	IR89-S-NSW-1-10A	IR89-S-SSW-1-10A	IR89-S-WSW-1-10A	IR89-S-WSW-2-10A
Sample Date	02/24/10	02/24/10	02/24/10	02/24/10	02/24/10	02/23/10	02/23/10	02/23/10	02/23/10	02/23/10	03/01/10
Chemical Name											
PAHS (µg/kg)											
Acenaphthene	5 J	9.2 U	31 U	42 U	1.5 J	130 U	11 U	13 U	13 U	16 U	NA
Acenaphthylene	35	9.2 U	23 J	27 J	43	18 J	0.87 J	1.2 J	1.5 J	3 J	NA
Anthracene	87	9.2 U	49	49	140	49 J	1.9 J	3.1 J	2.9 J	5.8 J	NA
Benzo(a)anthracene	500 D	2 J	180	220	340 D	410	5.1 J	7.3 J	7.3 J	15 J	NA
Benzo(a)pyrene	420 D	2 J	160	200	160	250	4.5 J	7.9 J	9.8 J	26	NA
Benzo(b)fluoranthene	670 D	3.5 J	280	360	1,100 D	350	7.4 J	14	19	39	NA
Benzo(g,h,i)perylene	100	1.6 J	78	100	110	66 J	1.9 J	5.2 J	7 J	19	NA
Benzo(k)fluoranthene	500 D	2.4 J	250	230	520 D	320	6 J	11 J	12 J	25	NA
Chrysene	470 D	2.8 J	220	220	470 D	350	5.7 J	10 J	12 J	25	NA
Dibenz(a,h)anthracene	58	0.46 J	27 J	32 J	35	29 J	0.75 J	1.7 J	2.4 J	5.9 J	NA
Fluoranthene	690 D	1.6 J	210	280	440 D	600	6.7 J	13	14	26	NA
Fluorene	2.7 J	9.2 U	2 J	2.5 J	3.3 J	130 U	11 U	1.1 J	1.3 J	1.9 J	NA
Indeno(1,2,3-cd)pyrene	190	2 J	110	150	140	110 J	2.9 J	6.9 J	8.9 J	23	NA
Naphthalene	2.5 J	1.7 J	5.5 J	4.8 J	2.9 J	130 U	0.95 J	2.7 J	2.3 J	5.5 J	NA
Phenanthrene	8.5 J	1.9 J	16 J	19 J	5.5 J	130 U	2.7 J	6.7 J	6.1 J	10 J	NA
Pyrene	1,200 D	1.8 J	300	460	1,300 D	1,100	12	17	18	28	NA
TOTAL PAHs (µg/Kg)[1]	**4,939**	**23.76**	**1,911**	**2,354**	**4,811**	**3,652**	**59.37**	**108.8**	**124.5**	**258.1**	**NA**
Pesticides (DDx) (µg/Kg)											
4,4'-DDD	3.1 J	33 JD	8.1 JD	2.6 J	4 U	31	0.79 J	8.7 J	74	310	65.3 D
4,4'-DDE	18	270 D	58 D	9	3.3 J	100	5	130	220	310	352 D
4,4'-DDT	12	150 D	78 D	14	15	67	6.1	110	150	27 JP	152 D
Total DDx (µg/Kg)[2]	**33.1**	**453**	**144.1**	**25.6**	**18.3**	**198**	**11.89**	**248.7**	**444**	**647**	**569.3**

Notes:

NA - Not analyzed
D - Compound identified in an analysis at a secondary dilution factor
J - Analyte present, value may or may not be accurate or precise
P - > 25% difference for detected concentrations between the 2 GC columns. The lower of the 2 values is reported.
U - The material was analyzed for, but not detected
µg/Kg - Micrograms per kilogram

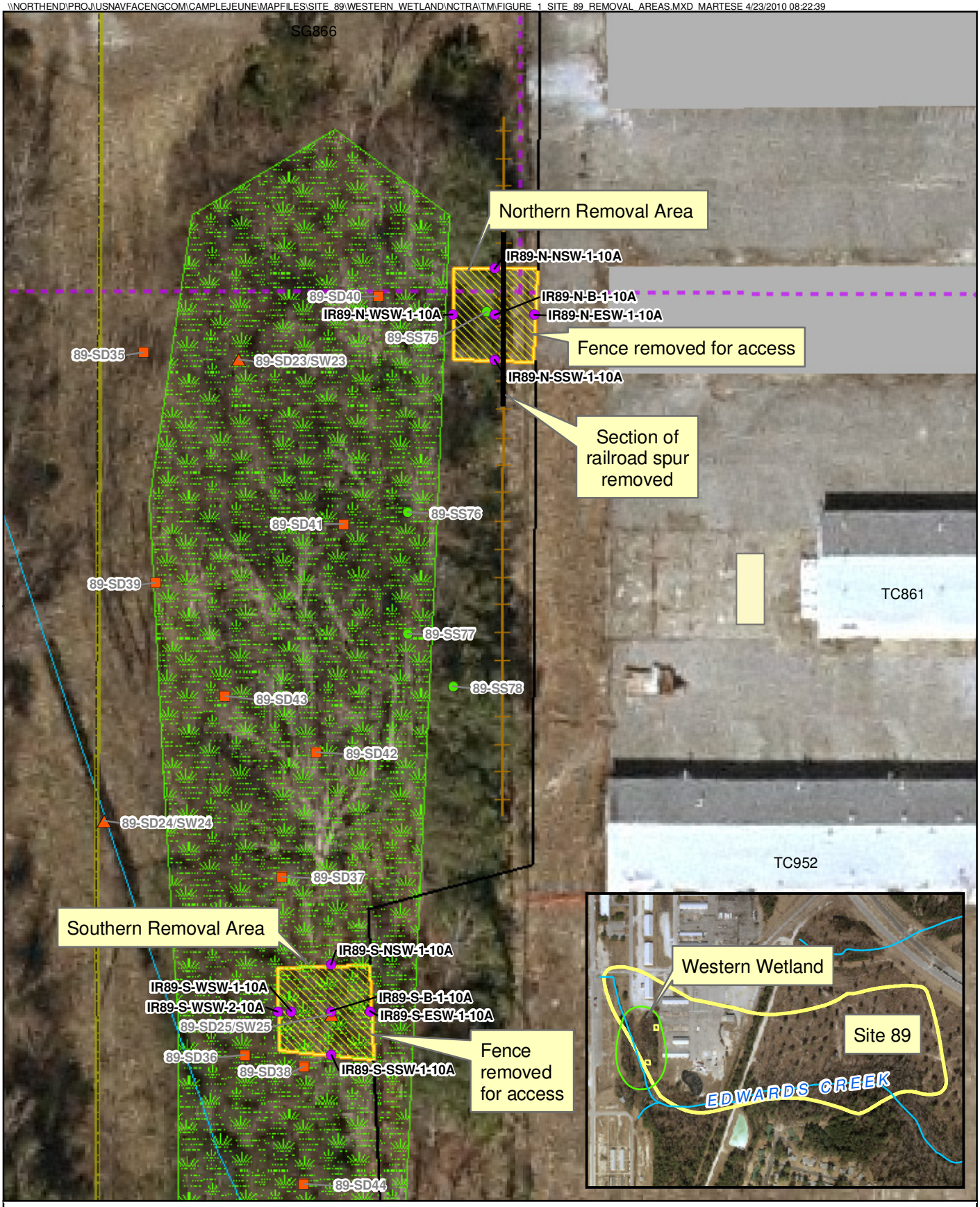
[1]PAH Action Level (µg/kg) = 22,800
[2]DDx Action Level (µg/kg) = 572
Only detected concentrations were used to calculate total PAHs and DDx

Created by: K. Rogers/RDU Checked by: M. Fulkerson/CLT

TABLE 2
Cost Breakdown
Site 89 Western Wetland NTCRA
MCB CamLej, Jacksonville, North Carolina

Engineering Support/Construction Oversight	$	21,200
Laboratory Costs	$	3,800
Soil Removal Activity	$	32,800
Offsite Transportation and Disposal of Waste	$	27,200
Total	$	85,000

Created by: K. Rogers/RDU Checked by: M. Fulkerson/CLT



Legend

- Confirmation Sample Locations
- **Historical Sample Locations**
- Surface Soil Sample
- Sediment Sample
- Sediment\Surface Water Sample
- DRMO Fence Line
- Railroad Spur
- Section of railroad spur removed
- Creek
- Water Utility Line
- Electrical Utility Line
- Removal Action Area
- Slab Area
- Silt Fence
- MCB CamLej Planning Wetlands

N

0 25 50 Feet

1 inch = 50 feet

Figure 1
Removal Areas
Site 89 Western Wetland NTCRA
MCB CamLej
North Carolina

CH2MHILL

Generated By: *K. Rogers/RDU* Checked by: *M. Fulkerson/CLT*

Attachment A
Photograph Log

Northern Removal Area

Site Preparation *Erosion control measures in place, vegetation clearance in progress*

Soil Removal *Removal and railroad tie stockpile*

Northern Removal Area

Soil Removal *Drainage channel detail*

Soil Removal *Drainage channel running through the removal area*

Northern Removal Area

Site Restoration Backfilling

Photo direction: South

Photo direction: North

Site Restoration Drainage ditch after backfilling

Northern Removal Area

Site Restoration Erosion control.

Site Restoration Erosion control – riprap placed in drainage channel at entry and exit points.

Northern Removal Area

Site Restoration Revegetation, 1-month.

Southern Removal Area

Site Preparation *Erosion control in place, general site preparation completed.*

Site Preparation *Erosion control detail*

Southern Removal Area

Soil Removal *Sediment removal activities*

Soil Removal *Sediment removal activities*

Southern Removal Area

Soil Removal *Close-up of removal area*

Soil Removal *Removal of additional 5 feet from west side wall*

Southern Removal Area

Site Restoration Backfilling

Site Restoration Backfilling

Southern Removal Area

Site Restoration Topsoil application

Site Restoration Erosion control in place

Southern Removal Area

Site Restoration Revegetation, 1 month

Attachment B
Disposal Manifests

WASTE INDUSTRIES

No. 818400

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

#656561

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

Section I. GENERATOR (Generator complete all of Section I.)

a. Generator Name: CG AC/S I&E (EMD) MCB

b. Address: McHugh Boulevard, Bldg 12
Camp Lejeune, NC 28542

c. Phone No.: Robert Lowder 910-451-1482

d. Generating Location: MCAS New River

e. Address: Bldg TC-952 Camp Gaiger
Camp Lejuene, NC 28547

f. Phone No.:

If owner of the generating facility differs from the generator, complete d, e, f:

g. Owner's Name:

h. Owner's Phone No.:

i. WI WASTE CODE 21 000124467 021-E5-10030

j. Description of Waste: Soil

k. Quantity 11 22 T Units No. Type
5 5 1 4 0 DP

Containers

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CRF 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.

LARRY LANIER — Generator Authorized Agent Name

Signature

04 13 10 — Shipment Date

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

TRANSPORTER I

a. Name: Shamrock Environmental

b. Address: 6106 Corporate Park Dr, Brown Summit, NC 27214

c. Driver Name/Title: Osby Headen (PRINT / TYPE)

d. Phone No.: Michele Anderson 919 [illegible] e. Truck No.: RO-1

f. Vehicle License No./State:

Acknowledgment of Receipt of Materials.

g. Driver Signature — 04 13 10 Shipment Date

TRANSPORTER II

h. Name:

i. Address:

j. Driver Name/Title: (PRINT / TYPE)

k. Phone No.: l. Truck No.:

m. Vehicle License No./State:

Acknowledgment of Receipt of Materials.

n. Driver Signature — Shipment Date

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

a. Site Name: SAMPSON COUNTY DISPOSAL

b. Physical Address: 7434 ROSEBORO HWY ROSEBORO, NC 28302

c. Phone Number: 910-525-4132

d. Mailing Address: 7434 ROSEBORO HWY, ROSEBORO, NC

e. 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.

f. Name of Authorized Agent — Signature — 04 13 10 Receipt Date

Section IV. CUSTOMER

a. Name: Shamrock Environmental

b. Address: 6106 Corporate Park Dr, Brown Summit, NC 27214

c. Name/Title: Michele Anderson 919-475-7397

d. Phone Number: 919-475-7397

e. Mobile:

f. Customer Number: 21-000124467

Section V. ASBESTOS (Generator complete a-d, f, g; Operator* complete e)

a. Operator's* Name:

b. Operator's* Phone No.:

c. Operator's* Address:

d. Special Handling Instructions and additional information:

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: (Print / Type) — Operator's* Signature — Date

f. Name and Address of Responsible Agency:

g. ☐ Friable; ☐ Non-friable; ☐ Both _____% friable _____% nonfriable

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

0231-720B (1/04)

WASTE INDUSTRIES

No. 818401

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

#656834

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

Section I. GENERATOR (Generator complete all of Section I.)

a. Generator Name: CG AC/S I&E (EMD) MCB

b. Address: McHugh Boulevard, Bldg 12
Camp Lejeune, NC 28542

c. Phone No.: Robert Lowe 910-451-1482

d. Generating Location: MCAS New River

e. Address: Bldg TC-952 Camp Gaiger
Camp Lejuene, NC 28547

f. Phone No.:

If owner of the generating facility differs from the generator, complete d, e, f:

g. Owner's Name:

h. Owner's Phone No.:

i. WI WASTE CODE 21 000124467

j. Description of Waste: Soil

021-E5-10030

Containers

k. Quantity 9.14 T

Quantity	Units	No.	Type
49240	P	1	T

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CRF 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.

Larry Lanier — Generator Authorized Agent Name

Larry Lanier — Signature

Shipment Date 04/14/10

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

TRANSPORTER I

a. Name: Shamrock Environmental

b. Address: 6106 Corporate Park Dr, Brown Summit, NC 27214

c. Driver Name/Title: Christopher Griffin (PRINT / TYPE)

d. Phone No.: Michele Anderson 919-475-7397 e. Truck No.: RO-1

f. Vehicle License No./State:

Acknowledgment of Receipt of Materials.

g. Christopher Griffin — Driver Signature

Shipment Date 04/14/10

TRANSPORTER II

h. Name:

i. Address:

j. Driver Name/Title: (PRINT / TYPE)

k. Phone No.: l. Truck No.:

m. Vehicle License No./State:

Acknowledgment of Receipt of Materials.

n. Driver Signature

Shipment Date

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

a. Site Name: SAMPSON COUNTY DISPOSAL

b. Physical Address: 7434 ROSEBORO HWY, ROSEBORO, NC 28302

c. Phone Number: 910-525-4132

d. Mailing Address: 7434 ROSEBORO HWY, ROSEBORO, NC

e. 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.

f. Name of Authorized Agent

Signature

Receipt Date 04/14/10

Section IV. CUSTOMER

a. Name: Shamrock Environmental

b. Address: 6106 Corporate Park Dr, Brown Summit, NC 27214

c. Name/Title: Michele Anderson 919-475-7397

d. Phone Number: 919-475-7397

e. Mobile:

f. Customer Number: 21-000124467

Section V. ASBESTOS (Generator complete a-d, f, g; Operator* complete e)

a. Operator's* Name:

b. Operator's* Phone No.:

c. Operator's* Address:

d. Special Handling Instructions and additional information:

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: (Print / Type)

Operator's* Signature

Date

f. Name and Address of Responsible Agency:

go to pad

g. ☐ Friable; ☐ Non-friable; ☐ Both _____% friable _____% nonfriable

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

0231-720B (1/04)

WASTE INDUSTRIES

No. 818402

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

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

Section I. GENERATOR (Generator complete all of Section I.)

a. Generator Name: CG A/C/S I&E (EMD) MCB

b. Address: McHugh Boulevard, Bldg 12
Camp Lejeune, NC 28542
Robert Lowder 910-451-1462

c. Phone No.:

d. Generating Location: MCAS New River

e. Address: Bldg TC-952 Camp Gaiger
Camp Lejuene, NC 28547

f. Phone No.:

If owner of the generating facility differs from the generator, complete d, e, f:

g. Owner's Name:

h. Owner's Phone No.:

i. WI WASTE CODE: 21 | 000124467 | 021-E5-10030

j. Description of Waste: Soil

k. Quantity: 5278 | Units: P | Containers No.: 1 | Type: T

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CRF 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: [illegible] Signature: [illegible] Shipment Date: 04/15/19

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

TRANSPORTER I

a. Name: Shamrock Environmental

b. Address: 6106 Corporate Park Dr, Brown Summit, NC 27214

c. Driver Name/Title: [illegible] (PRINT / TYPE)

d. Phone No.: Michele Anderson 919-[illegible] e. Truck No.: [illegible]

f. Vehicle License No./State:

Acknowledgment of Receipt of Materials.

g. Driver Signature: [illegible] Shipment Date: [illegible]

TRANSPORTER II

h. Name:

i. Address:

j. Driver Name/Title: (PRINT / TYPE)

k. Phone No.: l. Truck No.:

m. Vehicle License No./State:

Acknowledgment of Receipt of Materials.

n. Driver Signature: Shipment Date:

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

a. Site Name: SAMPSON COUNTY DISPOSAL

b. Physical Address: 7434 ROSEBORO HWY, ROSEBORO, NC 28382

c. Phone Number: 910-525-4132

d. Mailing Address: 7423 ROSEBORO HWY, ROSEBORO, NC

e. 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.

f. Name of Authorized Agent: Signature: Receipt Date: 04/15/19

Section IV. CUSTOMER

a. Name: Shamrock Environmental

b. Address: 6106 Corporate Park Dr, Brown Summit, NC 27214
Michele Anderson 919-475-7397

c. Name/Title:

d. Phone Number: 919-475-7397

e. Mobile:

f. Customer Number: 21-000124467

Section V. ASBESTOS (Generator complete a-d, f, g; Operator* complete e)

a. Operator's* Name:

b. Operator's* Phone No.:

c. Operator's* Address:

d. Special Handling Instructions and additional information:

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: (Print / Type) Operator's* Signature: Date:

f. Name and Address of Responsible Agency:

g. ☐ Friable; ☐ Non-friable; ☐ Both _____% friable _____% nonfriable

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

0231-720B (1/04)

TRANSPORTER RETAIN

WASTE INDUSTRIES

08109 No. 818403 #656315

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

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

Section I. GENERATOR (Generator complete all of Section I.)

a. Generator Name: CG AC/S I&E (EMD) MCB

b. Address: McHugh Boulevard, Bldg 12
Camp Lejeune, NC 28542

c. Phone No.: Robert Lowder 910-451-1482

d. Generating Location: MCAS New River

e. Address: Bldg TC-952 Camp Gaiger
Camp Lejuene, NC 28547

f. Phone No.:

If owner of the generating facility differs from the generator, complete d, e, f:

g. Owner's Name:

h. Owner's Phone No.:

i. WI WASTE CODE 21 000124467 021-E5-10030

j. Description of Waste: Soil

k. Quantity 10.29 T

Quantity	Units	No.	Type
25700	P	01	T

Containers

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CRF 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.

John Hamilton MCAS Neg Rev — Generator Authorized Agent Name

[signature] — Signature

041210 — Shipment Date

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

TRANSPORTER I

a. Name: Shamrock Environmental

b. Address: 6106 Corporate Park Dr, Brown Summit, NC 27214

c. Driver Name/Title: PRINT / TYPE

d. Phone No.: Michele Anderson 919-475-7397

e. Truck No.: R01

f. Vehicle License No./State: 7697061 NC

Acknowledgment of Receipt of Materials.

g. [signature] — Driver Signature

011210 — Shipment Date

TRANSPORTER II

h. Name:

i. Address:

j. Driver Name/Title: PRINT / TYPE

k. Phone No.:

l. Truck No.:

m. Vehicle License No./State:

Acknowledgment of Receipt of Materials.

n. Driver Signature

Shipment Date

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

a. Site Name: SAMPSON COUNTY DISPOSAL

b. Physical Address: 7434 ROSEBORO HWY, ROSEBORO, NC 28302

c. Phone Number: 910-525-4132

d. Mailing Address: 7423 ROSEBORO HWY, ROSEBORO, NC

e. 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.

f. Name of Authorized Agent

[signature] — Signature

041210 — Receipt Date

Section IV. CUSTOMER

a. Name: Shamrock Environmental

b. Address: 6106 Corporate Park Dr, Brown Summit, NC 27214

c. Name/Title: Michele Anderson 919-475-7397

d. Phone Number: 919-475-7397

e. Mobile:

f. Customer Number: 21-000124467

Section V. ASBESTOS (Generator complete a-d, f, g; Operator* complete e)

a. Operator's* Name:

b. Operator's* Phone No.:

c. Operator's* Address:

d. Special Handling Instructions and additional information:

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: Print / Type

Operator's* Signature

Date

f. Name and Address of Responsible Agency:

g. ☐ Friable; ☐ Non-friable; ☐ Both _____% friable _____% nonfriable

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

0231-720B (1/04)

RETURN TO GENERATOR

WASTE INDUSTRIES

65 #657302 No. 824521

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

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

Section I. GENERATOR (Generator complete all of Section I.)

a. Generator Name: CG AC/S I&E (EMD) MCB

b. Address: McHugh Boulevard, Bldg 12 Camp Lejeune, NC 28542

Robert Lowder 910-451-1482

c. Phone No.:

d. Generating Location: MCAS New River

e. Address: Bldg TC-952 Camp Galger Camp Lejeune, NC 28547

f. Phone No.:

If owner of the generating facility differs from the generator, complete d, e, f:

g. Owner's Name:

h. Owner's Phone No.:

i. WI WASTE CODE: 21 | 000124467 | 021-E5-10030

Soil

j. Description of Waste:

k. Quantity 1.17 Units: 5 4 9 4 0 P | Containers No.: 1 | Type: T

TYPE
- DM - METAL DRUM
- DP - PLASTIC DRUM
- B - BAG
- BA - 6 MIL. PLASTIC BAG or WRAP
- T - TRUCK
- O - OTHER

UNITS
- P - POUNDS
- Y - YARDS
- M³ - CUBIC METERS
- Y³ - CUBIC YARDS
- O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CRF 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.

Anthony L. MARTIN — Generator Authorized Agent Name

Anthony L. Martin — Signature

041610 — Shipment Date

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

TRANSPORTER I

a. Name: Shamrock Environmental 6106 Corporate Park Dr, Brown Summit, NC 27214

b. Address:

c. Driver Name/Title: Christopher Griffin (PRINT / TYPE)

Michele Anderson 919-475-7397

d. Phone No.: e. Truck No.:

f. Vehicle License No./State:

Acknowledgment of Receipt of Materials.

g. Christopher Griffin — Driver Signature

041610 — Shipment Date

TRANSPORTER II

h. Name:

i. Address:

j. Driver Name/Title: (PRINT / TYPE)

k. Phone No.: l. Truck No.:

m. Vehicle License No./State:

Acknowledgment of Receipt of Materials.

n. Driver Signature — Shipment Date

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

a. Site Name: SAMPSON COUNTY DISPOSAL

b. Physical Address: 7434 ROSEBORO HWY, ROSEBORO, NC 28302

c. Phone Number: 910-525-4132

d. Mailing Address: 7423 ROSEBORO HWY ROSEBORO, NC

e. 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.

f. Name of Authorized Agent — Signature — 041610 Receipt Date

Section IV. CUSTOMER

a. Name: Shamrock Environmental 6106 Corporate Park Dr, Brown Summit, NC 27214

b. Address: Michele Anderson 919-475-7397

c. Name/Title:

d. Phone Number: 919-475-7397

e. Mobile: 21-000124467

f. Customer Number:

Section V. ASBESTOS (Generator complete a-d, f, g; Operator* complete e)

a. Operator's* Name:

b. Operator's* Phone No.:

c. Operator's* Address:

d. Special Handling Instructions and additional information:

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: (Print / Type) — Operator's* Signature — Date

f. Name and Address of Responsible Agency:

g. ☐ Friable; ☐ Non-friable; ☐ Both _____% friable _____% nonfriable

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

0231-720B (1/04)

TRANSPORTER RETAIN

WASTE INDUSTRIES

No. 824522

#657661

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

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

Section I. GENERATOR (Generator complete all of Section I.)

a. Generator Name: CG AC/S I&E (EMD) MCB

b. Address: McHugh Boulevard, Bldg 12 Camp Lejeune, NC 28542

Robert Lowder 910-451-1482

c. Phone No.:

d. Generating Location: MCAS New River

e. Address: Bldg TC-952 Camp Gaiger Camp Lejeune, NC 28547

f. Phone No.:

If owner of the generating facility differs from the generator, complete d, e, f:

g. Owner's Name:

h. Owner's Phone No.:

i. WI WASTE CODE: 21 | 00012446 | 021-E5-10030

Soil

j. Description of Waste:

k. Quantity 12.36 T | Containers: Units 6 7 4 2 0 | No. P | Type 1 | T

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CRF 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.

Anthony L. Martin — Generator Authorized Agent Name

Signature

Shipment Date: 0 4 1 9 1 0

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

TRANSPORTER I

a. Name: Shamrock Environmental 6106 Corporate Park Dr, Brown Summit, NC 27214

b. Address:

c. Driver Name/Title: Michele Anderson 919-475-7397 PRINT / TYPE

d. Phone No.:

e. Truck No.:

f. Vehicle License No./State:

Acknowledgment of Receipt of Materials.

g. Driver Signature

Shipment Date: 0 4 1 9 1 0

TRANSPORTER II

h. Name:

i. Address:

j. Driver Name/Title: PRINT / TYPE

k. Phone No.:

l. Truck No.:

m. Vehicle License No./State:

Acknowledgment of Receipt of Materials.

n. Driver Signature

Shipment Date

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

a. Site Name: SAMPSON COUNTY DISPOSAL 7434 ROSEBORO HWY, ROSEBORO, NC 28302

b. Physical Address:

c. Phone Number: 910-525-4132

d. Mailing Address: 7423 ROSEBORO HWY, ROSEBORO, NC

e. 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.

f. Name of Authorized Agent

Signature

Receipt Date: 0 4 1 9 1 0

Section IV. CUSTOMER

a. Name: Shamrock Environmental 6106 Corporate Park Dr, Brown Summit, NC 27214

b. Address: Michele Anderson 919-475-7397

c. Name/Title:

d. Phone Number: 919-475-7397

e. Mobile: 21-000124467

f. Customer Number:

Section V. ASBESTOS (Generator complete a-d, f, g; Operator* complete e)

a. Operator's* Name:

b. Operator's* Phone No.:

c. Operator's* Address:

d. Special Handling Instructions and additional information:

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: Print / Type

Operator's* Signature

Date

f. Name and Address of Responsible Agency:

g. ☐ Friable; ☐ Non-friable; ☐ Both _____ % friable _____ % nonfriable

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

0231-720B (1/04)

GENERATOR RETAIN

WASTE INDUSTRIES

No. 824523 #65760

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

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

Section I. GENERATOR (Generator complete all of Section I.)

a. Generator Name: CG AC/S I&E (EMD) MCB

b. Address: McHugh Boulevard, Bldg 12
Camp Lejeune, NC 28542
Robert Lowder 910-451-1482

c. Phone No.:

d. Generating Location: MCAS New River

e. Address: Bldg TC-952 Camp Gaiger
Camp Lejuene, NC 28547

f. Phone No.:

If owner of the generating facility differs from the generator, complete d, e, f:

g. Owner's Name:

h. Owner's Phone No.:

i. WI WASTE CODE: 21 | 000124467 | 021-E5-10030 Containers

j. Description of Waste: Soil

k. Quantity 13.05 T | Units | No. | Type
68920 | P | Y | T

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CRF 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.

Anthony L. Martin — Generator Authorized Agent Name
A. L. Mt — Signature
042010 — Shipment Date

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

TRANSPORTER I

a. Name: Shamrock Environmental
6106 Corporate Park Dr, Brown Summit, NC 27214

b. Address:

c. Driver Name/Title: Kenneth Eanes
PRINT / TYPE
Michele Anderson 919-475-7397

d. Phone No.:

e. Truck No.: RT-9

f. Vehicle License No./State:
Acknowledgment of Receipt of Materials.

g. Kenneth Eanes — Driver Signature
042010 — Shipment Date

TRANSPORTER II

h. Name:

i. Address:

j. Driver Name/Title:
PRINT / TYPE

k. Phone No.:

l. Truck No.:

m. Vehicle License No./State:
Acknowledgment of Receipt of Materials.

n. Driver Signature — Shipment Date

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

a. Site Name: SAMPSON COUNTY DISPOSAL

b. Physical Address: 7434 ROSEBORO HWY, ROSEBORO, NC 28302

c. Phone Number: 910-525-4132

d. Mailing Address: 7423 ROSEBORO HWY, ROSEBORO, NC

e. 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.

f. Name of Authorized Agent — Signature — 042010 Receipt Date

Section IV. CUSTOMER

a. Name: Shamrock Environmental
6106 Corporate Park Dr, Brown Summit, NC 27214

b. Address: Michele Anderson 919-475-7397

c. Name/Title:

d. Phone Number: 919-475-7397

e. Mobile: 21-000124467

f. Customer Number:

Section V. ASBESTOS (Generator complete a-d, f, g; Operator* complete e)

a. Operator's* Name:

b. Operator's* Phone No.:

c. Operator's* Address:

d. Special Handling Instructions and additional information:

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: Print / Type — Operator's* Signature — Date

f. Name and Address of Responsible Agency:

g. ☐ Friable; ☐ Non-friable; ☐ Both _____% friable _____% nonfriable

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

0231-720B (1/04)

WASTE INDUSTRIES

No. 824524 #657 658

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

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

Section I. GENERATOR (Generator complete all of Section I.)

a. Generator Name: CG AC/S I&E (EMD) MCB

b. Address: McHugh Boulevard, Bldg 12
Camp Lejeune, NC 28542
Robert Lowder 910-451-1480

c. Phone No.:

d. Generating Location: MCAS New River

e. Address: Bldg TC-952 Camp Gaiger
Camp Lejeune NC 28547

f. Phone No.:

If owner of the generating facility differs from the generator, complete d, e, f:

g. Owner's Name:

h. Owner's Phone No.:

i. WI WASTE CODE: 21 | 000124467 | 021-E5-10030

j. Description of Waste: Soil

Containers

k. Quantity 7.11 T

Quantity	Units	No.	Type
45480	P	1	T

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CRF 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.

Anthony L. Mack — Generator Authorized Agent Name

Signature

Shipment Date 04/19/10

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

TRANSPORTER I

a. Name: Shamrock Environmental
6106 Corporate Park Dr, Brown Summit, NC 27214

b. Address:

c. Driver Name/Title: Christopher Griffin
PRINT / TYPE
Michele Anderson 919-475-7397

d. Phone No.: e. Truck No.:

f. Vehicle License No./State:

Acknowledgment of Receipt of Materials.

g. Driver Signature — Shipment Date 04/19/10

TRANSPORTER II

h. Name:

i. Address:

j. Driver Name/Title:
PRINT / TYPE

k. Phone No.: l. Truck No.:

m. Vehicle License No./State:

Acknowledgment of Receipt of Materials.

n. Driver Signature — Shipment Date

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

a. Site Name: SAMPSON COUNTY DISPOSAL
7434 ROSEBORO HWY, ROSEBORO, NC 28382

b. Physical Address:

c. Phone Number: 910-525-4132

d. Mailing Address: 7423 ROSEBORO HWY, ROSEBORO, NC

e. 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.

f. Name of Authorized Agent — Signature — Receipt Date 04/19/10

Section IV. CUSTOMER

a. Name: Shamrock Environmental
6106 Corporate Park Dr, Brown Summit, NC 27214

b. Address: Michele Anderson 919-475-7397

c. Name/Title:

d. Phone Number: 919-475-7397

e. Mobile: 21 (000124467)

f. Customer Number:

Section V. ASBESTOS (Generator complete a-d, f, g; Operator* complete e)

a. Operator's* Name:

b. Operator's* Phone No.:

c. Operator's* Address:

d. Special Handling Instructions and additional information:

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: Print / Type — Operator's* Signature — Date

f. Name and Address of Responsible Agency:

g. ☐ Friable; ☐ Non-friable; ☐ Both _____% friable _____% nonfriable

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

0231-720B (1/04)

WASTE INDUSTRIES

No. 824625

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

#658101 08142

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

Section I. GENERATOR (Generator complete all of Section I.)

a. Generator Name: CG AC/S I&E (EMD) MCB

b. Address: McHugh Boulevard, Bldg 12
Camp Lejeune, NC 28542
Robert Lowder 910-451-1482

c. Phone No.:

d. Generating Location: MCAS New River

e. Address: Bldg TC-952 Camp Gaiger
Camp Lejuene, NC 28547

f. Phone No.:

If owner of the generating facility differs from the generator, complete d, e, f:

g. Owner's Name:

h. Owner's Phone No.:

i. WI WASTE CODE: 21 | 000124467 | 021-E5-10030

j. Description of Waste: Soil

k. Quantity 12,847 | Units | No. | Type
68400 | P | 01 | T

Containers

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CRF 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.

Eugene Jones — Generator Authorized Agent Name
[signature] — Signature
042110 — Shipment Date

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

TRANSPORTER I

a. Name: Shamrock Environmental
6106 Corporate Park Dr, Brown Summit, NC 27214

b. Address:

c. Driver Name/Title: Kenneth Eanes (PRINT / TYPE)
Michele Anderson 919-475-7397

d. Phone No.:

e. Truck No.: RT-9

f. Vehicle License No./State:
Acknowledgment of Receipt of Materials.

g. Kenneth Eanes — Driver Signature
042110 — Shipment Date

TRANSPORTER II

h. Name:

i. Address:

j. Driver Name/Title: (PRINT / TYPE)

k. Phone No.:

l. Truck No.:

m. Vehicle License No./State:
Acknowledgment of Receipt of Materials.

n. Driver Signature — Shipment Date

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

a. Site Name: SAMPSON COUNTY DISPOSAL

b. Physical Address: 7434 ROSEBORO HWY, ROSEBORO, NC 28302

c. Phone Number: 910-525-4132

d. Mailing Address: 7423 ROSEBORO HWY, ROSEBORO, NC

e. 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.

f. Sampson Co. Disposal Inc — Name of Authorized Agent
[signature] — Signature
042110 — Receipt Date

Section IV. CUSTOMER

a. Name: Shamrock Environmental
6106 Corporate Park Dr, Brown Summit, NC 27214

b. Address: Michele Anderson 919-475-7397

c. Name/Title:

d. Phone Number: 919-475-7397

e. Mobile: 21-000124467

f. Customer Number:

Section V. ASBESTOS (Generator complete a-d, f, g; Operator* complete e)

a. Operator's* Name:

b. Operator's* Phone No.:

c. Operator's* Address:

d. Special Handling Instructions and additional information:

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: (Print / Type) — Operator's* Signature — Date

f. Name and Address of Responsible Agency:

g. ☐ Friable; ☐ Non-friable; ☐ Both _____ % friable _____ % nonfriable

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

0231-720B (1/04)

WASTE INDUSTRIES

No. 824526

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

#657 975

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

Section I. GENERATOR (Generator complete all of Section I.)

a. Generator Name: CG AC/S I&E (EMD) MCB

b. Address: McHugh Boulevard, Bldg 12
Camp Lejeune, NC 28542
Robert Lowder 910-451-1482

c. Phone No.:

d. Generating Location: MCAS New River

e. Address: Bldg TC-952 Camp Gaiger
Camp Lejuene, NC 28547

f. Phone No.:

If owner of the generating facility differs from the generator, complete d, e, f:

g. Owner's Name:

h. Owner's Phone No.:

i. WI WASTE CODE: 21 | 000124467 | 021-E5-10030

Containers

j. Description of Waste: Soil

k. Quantity: 5.9/T 44260 | Units: P | No.: 1 | Type: T

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CRF 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.

Anthony L. Martin — Generator Authorized Agent Name
A. L. Martin — Signature
042010 — Shipment Date

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

TRANSPORTER I

a. Name: Shamrock Environmental
6106 Corporate Park Dr, Brown Summit, NC 27214

b. Address:

c. Driver Name/Title: Christopher Griffin (PRINT / TYPE)

d. Phone No.: Michele Anderson 919-475-7397

e. Truck No.:

f. Vehicle License No./State:

Acknowledgment of Receipt of Materials.

g. Christopher Griffin — Driver Signature
042010 — Shipment Date

TRANSPORTER II

h. Name:

i. Address:

j. Driver Name/Title: (PRINT / TYPE)

k. Phone No.:

l. Truck No.:

m. Vehicle License No./State:

Acknowledgment of Receipt of Materials.

n. Driver Signature — Shipment Date

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

a. Site Name: SAMPSON COUNTY DISPOSAL

b. Physical Address: 7434 ROSEBORO HWY, ROSEBORO, NC 28302

c. Phone Number: 910-525-4132

d. Mailing Address: 7423 ROSEBORO HWY, ROSEBORO, NC

e. 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.

f. Sampson Co. Disposal Inc. — Name of Authorized Agent
Jamie Vanoil — Signature
042010 — Receipt Date

Section IV. CUSTOMER

a. Name: Shamrock Environmental
6106 Corporate Park Dr, Brown Summit, NC 27214

b. Address: Michele Anderson 919-475-7397

c. Name/Title:

d. Phone Number: 919-475-7397

e. Mobile: 21-000124467

f. Customer Number:

Section V. ASBESTOS (Generator complete a-d, f, g; Operator* complete e)

a. Operator's* Name:

b. Operator's* Phone No.:

c. Operator's* Address:

d. Special Handling Instructions and additional information:

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: (Print / Type) — Operator's* Signature — Date

f. Name and Address of Responsible Agency:

g. ☐ Friable; ☐ Non-friable; ☐ Both _____% friable _____% nonfriable

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

0231-720B (1/04)

Sam
7

WASTE INDUSTRIES

No. 824616

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

657962

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

Section I. GENERATOR (Generator complete all of Section I.)

a. Generator Name: CG AC/S I&E (EMD) MCB

b. Address: McHugh Boulevard, Bldg 12
Camp Lejeune, NC 28542
Robert Lowder 910-451-1482

c. Phone No.:

d. Generating Location: MCAS New River

e. Address: Bldg TC-952 Camp Gaiger
Camp Lejuene, NC 28547

f. Phone No.:

If owner of the generating facility differs from the generator, complete d, e, f:

g. Owner's Name:

h. Owner's Phone No.:

i. WI WASTE CODE 21 | 000124467 | 021-E5-10030

j. Description of Waste: Soil

k. Quantity 16.39 T

Quantity	Units	No.	Type
69660	P	1	T

Containers

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CRF 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.

Arthur L. Martin — Generator Authorized Agent Name
Art L. Mt. — Signature
Shipment Date: 04/20/10

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

TRANSPORTER I

a. Name: Shamrock Environmental
6106 Corporate Park Dr, Brown Summit, NC 27214

b. Address:

c. Driver Name/Title: Kenneth Eanes
PRINT / TYPE
Michele Anderson 919-475-7397

d. Phone No.: e. Truck No.: RT-9

f. Vehicle License No./State:

Acknowledgment of Receipt of Materials.

g. Driver Signature — Shipment Date: 04/20/10

TRANSPORTER II

h. Name:

i. Address:

j. Driver Name/Title:
PRINT / TYPE

k. Phone No.: l. Truck No.:

m. Vehicle License No./State:

Acknowledgment of Receipt of Materials.

n. Driver Signature — Shipment Date

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

a. Site Name: SAMPSON COUNTY DISPOSAL
7434 ROSEBORO HWY, ROSEBORO, NC 28302

b. Physical Address:

c. Phone Number: 910-525-4132
7423 ROSEBORO HWY, ROSEBORO, NC

d. Mailing Address:

e. 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.

f. Name of Authorized Agent — Signature — Receipt Date: 04/20/10

Section IV. CUSTOMER

a. Name: Shamrock Environmental
6106 Corporate Park Dr, Brown Summit, NC 27214

b. Address: Michele Anderson 919-475-7397

c. Name/Title:

d. Phone Number: 919-475-7397

e. Mobile: 21-000124467

f. Customer Number:

Section V. ASBESTOS (Generator complete a-d, f, g; Operator* complete e)

a. Operator's* Name:

b. Operator's* Phone No.:

c. Operator's* Address:

d. Special Handling Instructions and additional information:

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: Print / Type — Operator's* Signature — Date

f. Name and Address of Responsible Agency:

g. ☐ Friable; ☐ Non-friable; ☐ Both _____% friable _____% nonfriable

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

0231-720B (1/04)

RETURN TO GENERATOR

Sampson County Disposal
7434 Roseboro Highway
Roseboro, NC 28382
(910) 525-4132

Ticket: 21000656315
Date: 4/12/2010
Time: 13:10:21 - 13:38:15

		Scale	
Gross:	52120 lb	In	Scale 1
Tare:	31540 lb	Out	Scale 3
Net:	20580 lb		

Truck: SHAMROCK
Customer: 000124467/Shamrock Environmental

Profile: 021-E5-10030/NON-RCRA NON-DOT R

Generator: 021-10030/CG AC/S I&E (EMD) MCB
Grid: 5/Spcl to MSW E
Comment: 818403

Origin	Materials & Services	Quantity	Unit
021NC133/Onslow County	100% of 021PRW1/Profiled Waste - P(	10.29	ton

Driver: _____

Deputy Weighmaster: _____
Tabetha Tyndall

Sampson County Disposal
7434 Roseboro Highway
Roseboro, NC 28382
(910) 525-4132

Ticket: 21000656561
Date: 4/13/2010
Time: 11:46:10 - 12:33:37

		Scale	
Gross:	54880 lb	In	Scale 2
Tare:	32440 lb	Out	Scale 3
Net:	22440 lb		

Truck: SHAMROCK
Customer: 000124467/Shamrock Environmental

Profile: 021-E5-10030/NON-RCRA NON-DOT R

Generator: 021-10030/CG AC/S I&E (EMD) MCB
Grid: 5/Spcl to MSW E
Comment: 818400

Origin	Materials & Services	Quantity	Unit
021NC133/Onslow County	100% of 021PRW1/Profiled Waste - P	11.22	ton

Driver: _____
Tue Apr 2010 04/13/2010 12:33:13

Deputy Weighmaster: _____
Jamie Vanal - temp at Sampson Cty

Sampson County Disposal
7434 Roseboro Highway
Roseboro, NC 28382
(910) 525-4132

Ticket: 21000656834
Date: 4/14/2010
Time: 12:35:32 - 13:08:23

		Scale	
Gross:	49180 lb	In	Scale 1
Tare:	30900 lb	Out	Scale 3
Net:	18280 lb		

Truck: SHAMROCK
Customer: 000124467/Shamrock Environmental

Profile: 021-E5-10030/NON-RCRA NON-DOT R

Generator: 021-10030/CG AC/S I&E (EMD) MCB
Grid: 5/Spcl to MSW E
Comment: 818401

Origin	Materials & Services	Quantity	Unit
021NC133/Onslow County	100% of 021PRW1/Profiled Waste - P	9.14	ton

Driver: Christopher Griffin
Wed Apr 2010 04/14/10 13:08:06

Deputy Weighmaster: _____
Jamie Vanal - temp at Sampson Cty

Sampson County Disposal
7434 Roseboro Highway
Roseboro, NC 28382
(910) 525-4132

Ticket: 21000657099
Date: 4/15/2010
Time: 13:32:24 - 14:04:01

		Scale	
Gross:	53040 lb	In	Scale 1
Tare:	32280 lb	Out	Scale 3
Net:	20760 lb		

Truck: SHAMROCK
Customer: 000124467/Shamrock Environmental

Profile: 021-E5-10030/NON-RCRA NON-DOT R

Generator: 021-10030/CG AC/S I&E (EMD) MCB
Grid: 5/Spcl to MSW E
Comment: 818402

Origin	Materials & Services	Quantity	Unit
021NC133/Onslow County	100% of 021PRW1/Profiled Waste - P	10.38	ton

Driver: Christopher Griffin
Thu Apr 2010 04/15/10 14:02:44

Deputy Weighmaster: _____
Jamie Vanal - temp at Sampson Cty

Sampson County Disposal
7434 Roseboro Highway
Roseboro, NC 28382
(910) 525-4132

Ticket: 21000657302
Date: 4/16/2010
Time: 11:33:33 - 12:13:36

		Scale	
Gross:	54980 lb	In	Scale 1
Tare:	32640 lb	Out	Scale 3
Net:	22340 lb		

Truck: 812093
Customer: 000124467/Shamrock Environmental

Profile: 021-E5-10030/NON-RCRA NON-DOT R

Generator: 021-10030/CG AC/S I&E (EMD) MCB
Grid: 5/Spcl to MSW E
Comment: 824521

Origin	Materials & Services	Quantity	Unit
021NC133/Onslow County	100% of 021PRW1/Profiled Waste - P	11.17	ton

Driver: Christopher Leffler
Fri Apr 2010 04/16/10 12:13:36

Deputy Weighmaster: _____
Jamie Vanal - temp at Sampson Cty

Sampson County Disposal
7434 Roseboro Highway
Roseboro, NC 28382
(910) 525-4132

Ticket: 21000657658
Date: 4/19/2010
Time: 12:36:10 - 13:33:30

		Scale	
Gross:	45220 lb	In	Scale 1
Tare:	31000 lb	Out	Scale 3
Net:	14220 lb		

Truck: SHAMROCK
Customer: 000124467/Shamrock Environmental

Profile: 021-E5-10030/NON-RCRA NON-DOT R

Generator: 021-10030/CG AC/S I&E (EMD) MCB
Grid: 5/Spcl to MSW E
Comment: 824524

Origin	Materials & Services	Quantity	Unit
021NC133/Onslow County	100% of 021PRW1/Profiled Waste - P(	7.11	ton

Driver: Christopher Guffin
Mon Apr 2010 04/19/10 13:33:12

Deputy Weighmaster: _____
Jamie Vanal - temp at Sampson Cty

Sampson County Disposal
7434 Roseboro Highway
Roseboro, NC 28382
(910) 525-4132

Ticket: 21000657975
Date: 4/20/2010
Time: 16:03:02 - 16:30:00

		Scale	
Gross:	44160 lb	In	Scale 2
Tare:	32340 lb	Out	Scale 3
Net:	11820 lb		

Truck: SHAMROCK
Customer: 000124467/Shamrock Environmental

Profile: 021-E5-10030/NON-RCRA NON-DOT R

Generator: 021-10030/CG AC/S I&E (EMD) MCB
Grid: 5/Spcl to MSW E
Comment: 824526

Origin	Materials & Services	Quantity	Unit
021NC133/Onslow County	100% of 021PRW1/Profiled Waste - P(	5.91	ton

Driver: Christopher Scott

Deputy Weighmaster:

Jamie Vanal - temp at Sampson Cty

Sampson County Disposal
7434 Roseboro Highway
Roseboro, NC 28382
(910) 525-4132

Ticket: 21000657860
Date: 4/20/2010
Time: 10:46:52 - 11:30:19

		Scale	
Gross:	68820 lb	In	Scale 1
Tare:	42720 lb	Out	Scale 3
Net:	26100 lb		

Truck: SHAMROCK
Customer: 000124467/Shamrock Environmental

Profile: 021-E5-10030/NON-RCRA NON-DOT R

Generator: 021-10030/CG AC/S I&E (EMD) MCB
Grid: 5/Spcl to MSW E
Comment: 824523

Origin	Materials & Services	Quantity	Unit
021NC133/Onslow County	100% of 021PRW1/Profiled Waste - P	13.05	ton

Driver: _____

Deputy Weighmaster: _____
Jamie Vanal - temp at Sampson Cty

Sampson County Disposal
7434 Roseboro Highway
Roseboro, NC 28382
(910) 525-4132

Ticket: 21000658101
Date: 4/21/2010
Time: 10:21:45 - 10:44:13

		Scale	
Gross:	68500 lb	In	Scale 1
Tare:	42820 lb	Out	Scale 3
Net:	25680 lb		

Truck: SHAMROCK1
Customer: 000124467/Shamrock Environmental

Profile: 021-E5-10030/NON-RCRA NON-DOT R

Generator: 021-10030/CG AC/S I&E (EMD) MCB
Grid: 5/Spcl to MSW E
Comment: 824625

Origin	Materials & Services	Quantity	Unit
021NC133/Onslow County	100% of 021PRW1/Profiled Waste - P(	12.84	ton

Driver: _____

Deputy Weighmaster: _____
Jamie Vanal - temp at Sampson Cty

Sampson County Disposal
7434 Roseboro Highway
Roseboro, NC 28382
(910) 525-4132

Ticket: 21000657661
Date: 4/19/2010
Time: 12:40:42 - 13:37:19

		Scale	
Gross:	67300 lb	In	Scale 1
Tare:	42580 lb	Out	Scale 3
Net:	24720 lb		

Truck: SHAMROCK2
Customer: 000124467/Shamrock Environmental

Profile: 021-E5-10030/NON-RCRA NON-DOT R

Generator: 021-10030/CG AC/S I&E (EMD) MCB
Grid: 5/Spel to MSW E
Comment: 824522

Origin	Materials & Services	Quantity	Unit
021NC133/Onslow County	100% of 021PRW1/Profiled Waste - P(	12.36	ton

Driver: Kenneth Earn
Mon Apr 2010 04/19/10 13:36:58

Deputy Weighmaster: _____
Jamie Vanal - temp at Sampson Cty

Sampson County Disposal
7434 Roseboro Highway
Roseboro, NC 28382
(910) 525-4132

Ticket: 21000657962
Date: 4/20/2010
Time: 15:22:02 - 15:55:22

		Scale	
Gross:	70300 lb	In	Scale 2
Tare:	49520 lb	Out	Scale 3
Net:	20780 lb		

Truck: SHAMROCK
Customer: 000124467/Shamrock Environmental

Profile: 021-E5-10030/NON-RCRA NON-DOT R

Generator: 021-10030/CG AC/S I&E (EMD) MCB
Grid: 5/Spcl to MSW E
Comment: 824616

Origin	Materials & Services	Quantity	Unit
021NC133/Onslow County	100% of 021PRW1/Profiled Waste - P(	10.39	ton

Driver: Kenneth Lanier

Deputy Weighmaster: _____
Jamie Vanal - temp at Sampson Cty