

N00181.AR.001438  
NORFOLK PORTS NSY  
5090.3a

CLOSEOUT REPORT FOR REMOVAL ACTION PHASE 1 AT OPERABLE UNIT 2 (OU 2)  
PARADISE CREEK DISPOSAL AREA (APPENDIX E PART 1 OF 2) NNSY PORTSMOUTH VA  
2/1/2007  
FIELD SUPPORT SERVICES INC/SHAW E&I

## **Appendix E**

### **Non Hazardous Manifests and Weight Tickets**

May 11, 2006

#30

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. **0-1-0-0-0**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~**GEM Trucking**~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No. Type      13. Total Quantity      14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001      DT      00020      T**

b. . . . .

c. . . . .

d. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13335608**

**Project# 116539**

**Actual Weight: 19.07**

*Osage*

16. 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.

Printed/Typed Name **BM Hart**

Signature *BM Hart*

Month Day Year **05 | 11 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year . . . . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **Wayne Bashaw**

Signature *Wayne Bashaw*

Month Day Year **05 | 11 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sapp**

Signature *Donna Sapp*

Month Day Year **05 | 11 | 06**

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

#28

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED** Manifest Document No. **01001**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703** Attn: **Rob Schonk**

5. Transporter 1 Company Name  
~~**GMH Trucking**~~ 6. US EPA ID Number **NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking** 8. US EPA ID Number **NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill**  
**1 Bob Foeller Drive**  
**Suffolk, VA 23434** 10. US EPA ID Number **NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. <b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b. . . . .	. . . . .	. . . . .	. . . . .
c. . . . .	. . . . .	. . . . .	. . . . .
d. . . . .	. . . . .	. . . . .	. . . . .

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

b. . . . .

c. . . . .

d. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
**Osage**

Transaction#: **13335612**  
Actual Weight: **14.28 ton net**

16. 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.

Printed/Typed Name **R M HART**

Signature *[Signature]* Month Day Year **05 | 11 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A** Month Day Year . . . . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **REGINA CUFFEE**

Signature *[Signature]* Month Day Year **05 | 11 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sapp**

Signature *[Signature]* Month Day Year **05 | 11 | 06**

GENERATOR

TRANSPORTER

FACILITY

#34

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. **01002**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**G&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No. **001**

Type **DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Osage**

**Transaction#:**

**13335616**

**Actual Weight:**

**21.49 tons**

16. 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.

Printed/Typed Name

**R M HART**

Signature

**R M HART**

Month Day Year

**05/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**05/11/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Steve Coulter**

Signature

**Steve Coulter**

Month Day Year

**05/11/06**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Sapp**

Signature

**Donna Sapp**

Month Day Year

**05/11/06**

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01003

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking # 15**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

No.	Type
a.	
b.	
c.	
d.	

13. Total Quantity

14. Unit Wt/Vol

**Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

001

DT

00020

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Capital**

**Transaction#:**

**13335625**

**Actual Weight:**

**23.68 tons**

16. 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.

Printed/Typed Name

**BM Hart**

Signature

*BM Hart*

Month Day Year

**10 5 11 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Ervin Wiggins**

Signature

*Ervin Wiggins*

Month Day Year

**10 5 11 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**.**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Denise Sapp**

Signature

*Denise Sapp*

Month Day Year

**10 5 11 06**

ORIGINAL - RETURN TO GENERATOR

#5

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. **01004**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No. **001**

Type **DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 118539**

**Capital**

Transaction#: **13335657**

Actual Weight: **18.46**

16. 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.

Printed/Typed Name

**RM Huns**

Signature

*[Signature]*

Month Day Year

**10/5/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Robert Scott**

Signature

*[Signature]*

Month Day Year

**10/5/11/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**MA**

Signature

**MA**

Month Day Year

**10/5/11/06**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Sepp**

Signature

*[Signature]*

Month Day Year

**10/5/11/06**

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

**0-1005**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13335676**

**Project# 116539**

**Actual Weight: 18.30**

**Capital**

16. 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.

Printed/Typed Name

**B M HANT**

Signature

**B M HANT**

Month Day Year

**10-9-11-06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**K W FALLS**

Signature

**K W FALLS**

Month Day Year

**10-9-11-06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**.**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Sapp**

Signature

**DSapp**

Month Day Year

**05-11-06**

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01006

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( 757 ) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

**C&H Trucking #3**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit

Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capital*

Transaction#:

**13335660**

Actual Weight:

**18.14**

16. 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.

Printed/Typed Name

*B M HART*

Signature

*B M HART*

Month Day Year

**05/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Marie Smith*

Signature

*Marie Smith*

Month Day Year

**05/11/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**05/11/06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*Donna Sapp*

Month Day Year

**05/11/06**

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01007

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&E Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
001	DT
.	.
.	.
.	.
.	.

13. Total Quantity

00020

14. Unit Wt/Vol

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Transactions#:**

**13335665**

**Actual Weight:**

**19.11**

*OSAGE*

16. **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.

Printed/Typed Name

*RM Hant*

Signature

*RM Hant*

Month Day Year

10 5 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

.

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bashaw*

Signature

*Wayne Bashaw*

Month Day Year

10 5 11 06

19. Discrepancy Indication Space

FACILITY

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

Printed/Typed Name

*Donna Segg*

Signature

*Donna Segg*

Month Day Year

10 5 11 06

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

**01008**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **446-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&M Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit

Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: **13335668**

Project# **116539**

Actual Weight: **18.19**

*Orange*

16. 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.

Printed/Typed Name

**R.M. HART**

Signature

*R.M. Hart*

Month Day Year

**05/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**REGINA CUFFEE**

Signature

*Regina Cuffee*

Month Day Year

**05/11/06**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Seff**

Signature

*Donna Seff*

Month Day Year

**05/11/06**

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01-009**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~SAE Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**13335671**

**Actual Weight:**

**20.49**

*O'rage*

16. **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.

Printed/Typed Name

*R.M. Hays*

Signature

*R.M. Hays*

Month Day Year

**05/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Coulter*

Signature

*Steve Coulter*

Month Day Year

**05/11/06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*D Sapp*

Month Day Year

**05/11/06**

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01010**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

**#15**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

**Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116639**

**Capital**

Transaction#:

**13335693**

Actual Weight:

**22.02**

16. 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.

Printed/Typed Name

**R.M. HART**

Signature

*R.M. Hart*

Month Day Year

**05 11 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Ervin Wiggins**

Signature

*Ervin Wiggins*

Month Day Year

**05 11 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**.**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Sage**

Signature

*Donna Sage*

Month Day Year

**05 11 06**

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01011**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-8703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

a.	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
<b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Capitol**

**Transaction#: 13335704**

**Actual Weight: 18.29**

16. 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.

Printed/Typed Name **R.M. Hart**      Signature **R.M. Hart**      Month Day Year **05/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **Robert Scott**      Signature **Robert Scott**      Month Day Year **05/11/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**      Signature **N/A**      Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sapp**      Signature **Donna Sapp**      Month Day Year **05/11/06**

GENERATOR  
TRANSPORTER  
FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01012**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757-449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757-487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757-539-9373**

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

No.

Type

DT

**00020**

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: **13335731**

Project# **116539**

Actual Weight: **20-29**

*Osage*

16. 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.

Printed/Typed Name

**R.M. Hart**

Signature

*R.M. Hart*

Month Day Year

**10/5/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Wayne Bashaw**

Signature

*Wayne Bashaw*

Month Day Year

**10/5/11/06**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Segg**

Signature

*Donna Segg*

Month Day Year

**05/11/06**

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01-013**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**G&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No. **001**

Type **DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**13335734**

**Actual Weight:**

**16.50**

*O SAGE*

16. **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.

Printed/Typed Name

**R.M. HART**

Signature

*R.M. Hart*

Month Day Year

**05 11 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**NA**

Signature

**N/A**

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**REGINA CUFFEE**

Signature

*Regina Cuffee*

Month Day Year

**5 11 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Denise Sage**

Signature

*Denise Sage*

Month Day Year

**05 11 06**

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-014**

2. Page 1  
of **1**

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703** Attn: **Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking #3**

A. Transporter's Phone  
**757 449-2761**

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name  
**South Norfolk Trucking-**

B. Transporter's Phone  
**757 487-4867**

8. US EPA ID Number  
**NOT REQUIRED**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

C. Facility's Phone  
**757 539-9373**

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description  
a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
.	.	.	.
.	.	.	.
.	.	.	.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
**Capitol**

Transaction#: **13335738**  
Actual Weight: **16.97**

16. 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.

Printed/Typed Name **R.M. HART**

Signature *[Signature]* Month Day Year **10-5-10-6**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **C. SLADE**

Signature *[Signature]* Month Day Year **10-5-10-6**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A** Month Day Year . . .

19. Discrepancy Indication Space

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

Printed/Typed Name **Denise Seff**

Signature *[Signature]* Month Day Year **05/1/10-6**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

**01-015**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**G&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking 34**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
<b>001</b>	<b>DT</b>

13. Total Quantity

**00020**

14. Unit

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction# 13335747**

**Actual Weight: 19.72**

*Osage*

16. 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.

Printed/Typed Name

**R.M. HART**

Signature

*R.M. Hart*

Month Day Year

**05 10 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Steve Cothran**

Signature

*Steve Cothran*

Month Day Year

**05 11 06**

19. Discrepancy Indication Space

FACILITY

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

Printed/Typed Name

**Donna Sapp**

Signature

*D. Sapp*

Month Day Year

**05 11 06**

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED** Manifest Document No. **01016**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1610 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **446-8703** Attn: **Rob Schonk**

5. Transporter 1 Company Name **C&H Trucking #15** 6. US EPA ID Number **NOT REQUIRED**

A. Transporter's Phone **757 449-2761**

7. Transporter 2 Company Name ~~**South Norfolk Trucking**~~ 8. US EPA ID Number ~~**NOT REQUIRED**~~

B. Transporter's Phone **757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill**  
**1 Bob Foeller Drive**  
**Suffolk, VA 23434**

10. US EPA ID Number **NOT REQUIRED** C. Facility's Phone **757 539-9373**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001 DT 00020 T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
**Capitol**

Transaction#: **13335751**  
 Actual Weight: **16.79**

16. 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.

Printed/Typed Name **RM HART**

Signature *[Signature]* Month Day Year **05/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name **KW FALLS**

Signature *[Signature]* Month Day Year **05/11/06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
 Printed/Typed Name **N/A**

Signature **N/A** Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name **Denise Segg**

Signature *[Signature]* Month Day Year **10/11/06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED** . 611017

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking #15**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~**South Norfolk Trucking**~~

8. US EPA ID Number

~~**NOT REQUIRED**~~

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

**13335776**

**Actual Weight:**

**19.98**

16. 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.

Printed/Typed Name

*BMHART*

Signature

*[Signature]*

Month Day Year

**10/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Erwin Wiggins*

Signature

*[Signature]*

Month Day Year

**11/1/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

.

TRANSPORTER

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*[Signature]*

Month Day Year

**05/11/06**

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01018**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking #5**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**13335806**

**Actual Weight:**

**17.45**

**Capital**

16. **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.

Printed/Typed Name

**R M Hart**

Signature

*R M Hart*

Month Day Year

**10 5 11 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Robert Scott**

Signature

*Robert Scott*

Month Day Year

**10 5 11 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

**10 5 11 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Sapp**

Signature

*Donna Sapp*

Month Day Year

**05 11 06**

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01019**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking-**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #30**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill**

**1 Bob Foster Drive**

**Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction# 13335807**

**Actual Weight: 17.32**

*Osage*

16. 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.

Printed/Typed Name

*R M Harris*

Signature

*[Signature]*

Month Day Year

**10/5/106**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

**10/5/106**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bashaw*

Signature

*Wayne Bashaw*

Month Day Year

**10/5/106**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Fenna Seff*

Signature

*[Signature]*

Month Day Year

**10/5/106**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01.0.20**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 13335811**

**Actual Weight: 15.61**

*Osage*

16. 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.

Printed/Typed Name

*RM HART*

Signature

*RM HART*

Month Day Year

**10.5.11.06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**X REGINA CUFFEE**

Signature

*Regina Cuffee*

Month Day Year

**5.11.06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Seff*

Signature

*Donna Seff*

Month Day Year

**05.11.06**

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01021**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking #3**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Capitol**

**Transaction#:**

**13335823**

**Actual Weight:**

**18.16**

16. 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.

Printed/Typed Name

**RM Hart**

Signature

*[Signature]*

Month Day Year

**10-5-11-10-6**

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**C SLADE**

Signature

*[Signature]*

Month Day Year

**10-5-11-10-6**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**.**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Kim**

Signature

*[Signature]*

Month Day Year

**11-11-10-6**

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

**01022**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~CRIT~~ **#31**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #34**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13335822**

**Project# 116639**

**Actual Weight: 19.84**

*Osagp*

16. 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.

Printed/Typed Name

*R.M. HART*

Signature

*R.M. Hart*

Month Day Year

**10/5/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Couther*

Signature

*Steve Couther*

Month Day Year

**5/11/06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Saff*

Signature

*Donna Saff*

Month Day Year

**10/5/11/06**

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01023**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-8703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking #18**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
~~NOT REQUIRED~~

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

a.	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
<b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.				
c.				
d.				

a.	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
<b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
**Capitol**

**Transactions: 13335828**  
**Actual Weight: 19.91**

16. 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.

Printed/Typed Name  
**R M Hazer**

Signature  
*[Signature]*      Month Day Year  
**05 | 11 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name  
**R W Falls**

Signature  
*[Signature]*      Month Day Year  
**05 | 11 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
**N/A**

Signature  
**N/A**      Month Day Year  
**.** | **.** | **.**

19. Discrepancy Indication Space

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

Printed/Typed Name  
**Denne Seff**

Signature  
*[Signature]*      Month Day Year  
**05 | 11 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01024**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St, Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking #15**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: **13335865**

Project# **116639**

Actual Weight: **19.73**

**Capitol**

16. 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.

Printed/Typed Name

**RM HART**

Signature

*RM Hart*

Month Day Year

**10/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**XERVIN Wiggins**

Signature

*X Ervin Wiggins*

Month Day Year

**10/11/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

*N/A*

Month Day Year

**.**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Dana Seff**

Signature

*Dana Seff*

Month Day Year

**10/11/06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01025

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( 757 ) 445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

**C&H Trucking #5**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

001

DT

13. Total Quantity

00020

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

**Capitol**

Transactions#:

13338881

Actual Weight:

18.59

16. 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.

Printed/Typed Name

**RMHART**

Signature

*[Signature]*

Month Day Year

05/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Robert Scott**

Signature

*[Signature]*

Month Day Year

05/11/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

.

19. Discrepancy Indication Space

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

Printed/Typed Name

**Deanna Seff**

Signature

*[Signature]*

Month Day Year

05/11/06

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01026

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H TRUCKING~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #30**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foatler Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

00020

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

13335884

**Actual Weight:**

21.27

*Osage*

16. **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.

Printed/Typed Name

*B MITANT*

Signature

*B MITANT*

Month Day Year

05/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

N/A

Signature

N/A

Month Day Year

.

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bashaw*

Signature

*Wayne Bashaw*

Month Day Year

05/11/06

19. Discrepancy Indication Space

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

Printed/Typed Name

*Denise Sef*

Signature

*Denise Sef*

Month Day Year

05/11/06

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01027**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 118539**

**Transaction#:**

**13335890**

**Actual Weight:**

**17.39**

*O sage*

16. **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.

Printed/Typed Name

*R M Hayes*

Signature

*[Signature]*

Month Day Year

**10/1/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**REGINA CUFFEE**

Signature

*Regina Cuffee*

Month Day Year

**5/11/06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Soff*

Signature

*[Signature]*

Month Day Year

**05/11/06**

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01028**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

**#3**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:**

**Project# 116639**

**Actual Weight:**

*Osage Capital*

16. 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.

Printed/Typed Name

*BM HART*

Signature

*[Signature]*

Month Day Year  
**05/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*MC SLADE*

Signature

*[Signature]*

Month Day Year  
**05/11/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
**05/11/06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Dean Seeg*

Signature

*[Signature]*

Month Day Year  
**05/11/06**

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01029**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking #15**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:**

**17333897**

**Project# 116539**

**Actual Weight:**

**17.90**

**Capitol**

16. 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.

Printed/Typed Name

**RM Hart**

Signature

*[Signature]*

Month Day Year

**05/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**KO Falls**

Signature

*[Signature]*

Month Day Year

**10/11/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**.**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Deanna Sepp**

Signature

*[Signature]*

Month Day Year

**05/11/06**

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01030

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( 767 ) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

~~GMH Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #34**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

00020

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

13339901

**Actual Weight:**

18.88

*Osage*

16. **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.

Printed/Typed Name

*R M HART*

Signature

*R M Hart*

Month Day Year

05/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

N/A

Signature

N/A

Month Day Year

.

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Coulter*

Signature

*Steve Coulter*

Month Day Year

15/11/06

19. Discrepancy Indication Space

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

Printed/Typed Name

*Nanna Sapp*

Signature

*Nanna Sapp*

Month Day Year

05/11/06

TRANSPORTER FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01031**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**CNH Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transaction#:**

**13335959**

**Actual Weight:**

**19.78**

16. 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.

Printed/Typed Name

*R M Harts*

Signature

*[Signature]*

Month Day Year

**10 5 11 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**11 11 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bashaw*

Signature

*Wayne Bashaw*

Month Day Year

**10 5 11 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Seff*

Signature

*[Signature]*

Month Day Year

**05 11 06**

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01032**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&L Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

**001 DT 00020 T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13335965**

**Project# 116539**

**Actual Weight: 17.42**

*0992*

16. 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.

Printed/Typed Name

**RM HART**

Signature

*RM Hart*

Month Day Year  
**10/5/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**M/A**

Signature

*M/A*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**REGINA CUFFEE**

Signature

*Regina Cuffee*

Month Day Year  
**10/5/11/06**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Ronna Seff**

Signature

*Ronna Seff*

Month Day Year  
**05/11/06**

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

**01033**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South-Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
<b>001</b>	<b>DT</b>

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 118539**

**Capitol**

**Transaction#:**

**13335969**

**Actual Weight:**

**17.74**

16. **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.

Printed/Typed Name

**B M Hayes**

Signature

*[Signature]*

Month Day Year

**10/5/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**C. SLADE**

Signature

*[Signature]*

Month Day Year

**10/5/11/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**8 . .**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Seff**

Signature

*[Signature]*

Month Day Year

**05/11/06**

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

**01034**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**13739978**

**Actual Weight:**

**15.54**

**Capitol**

16. 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.

Printed/Typed Name

**RM HART**

Signature

*[Signature]*

Month Day Year

**10/5/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**SW FALLS**

Signature

*[Signature]*

Month Day Year

**10/5/11/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**MA**

Signature

**MA**

Month Day Year

**. . .**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Denise Sepp**

Signature

*[Signature]*

Month Day Year

**05/11/06**

TRANSPORTER FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01035**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**GML Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions:** **17339980**

**Project# 116539**

**Actual Weight:** **17.52**

*Storage*

16. **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.

Printed/Typed Name

*RM Hart*

Signature

*[Signature]*

Month Day Year

**10/5/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**10/5/11/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Coother*

Signature

*[Signature]*

Month Day Year

**10/5/11/06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*[Signature]*

Month Day Year

**10/5/11/06**

TRANSPORTER FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01036

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( 757 ) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

**C&H Trucking**

#15

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

00020

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#:

Project# 116639

Actual Weight:

Capital

16. 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.

Printed/Typed Name

RM HART

Signature

*RM Hart*

Month Day Year

09 | 11 | 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Caron Wiggins

Signature

*Caron Wiggins*

Month Day Year

05 | 11 | 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

N/A

Signature

N/A

Month Day Year

09 | 11 | 06

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

09 | 11 | 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED** . 01037

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
001	DT
.	.
.	.
.	.
.	.

13. Total Quantity

00020

14. Unit

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:**

**Project# 118539**

**Actual Weight:**

*Capitol*

16. **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.

Printed/Typed Name

*RM Hines*

Signature

*[Signature]*

Month Day Year

05 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Robert Scott*

Signature

*[Signature]*

Month Day Year

05 11 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

0 . .

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

5 11 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01038**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13336015**

**Project# 116539**

**Actual Weight: 18.66**

*Orange*

16. 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.

Printed/Typed Name

**BM HART**

Signature

*[Signature]*

Month Day Year

**10/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Wayne Bashaw**

Signature

*Wayne Bashaw*

Month Day Year

**10/5/11/06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**10/11/06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01039

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( 757 ) 445-6703

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**CNH Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking 28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
001	DT

13. Total Quantity

00020

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 118539**

**Transaction#: 13336028**

**Actual Weight: 15.65**

*O'rage*

16. 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.

Printed/Typed Name

*RM Hart*

Signature

*[Signature]*

Month Day Year

05/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

· · ·

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*REGINA CUFFEE*

Signature

*Regina Cuffee*

Month Day Year

05/11/06

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

5/11/06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

**01040**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capital*

**Transactions#:**

**Actual Weight:**

16. **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.

Printed/Typed Name

*R M HART*

Signature

*R M Hart*

Month Day Year

**10 9 11 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*K W Falls*

Signature

*K W Falls*

Month Day Year

**10 9 11 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*M/A*

Signature

*M/A*

Month Day Year

**. . .**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**10 9 11 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01091**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: MNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**GSH Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions: 13336038**

**Project# 116639**

**Actual Weight: 17.38**

*Storage*

16. 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.

Printed/Typed Name

*B M Hunt*

Signature

*[Signature]*

Month Day Year

**10 9 11 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**10 9 11 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Coulter*

Signature

*[Signature]*

Month Day Year

**15 11 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**17 11 06**

GENERATOR

TRANSPORTER

FACILITY

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13335608  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/11/06  
Time: 07:58  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	63620	31.81	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25480	12.74	SCALE:MAN WT	Origin: Offsite Waste Producer
NET WEIGHT:	38140	19.07		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13335612  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/11/06  
Time: 08:04  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	54320	27.16	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25760	12.88	SCALE:MAN WT	Pymt Type: Charge
NET WEIGHT:	28560	14.28		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: N/A
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:  
Tag:

Transaction #: 13335616  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/11/06  
Time: 08:07  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	68940	34.47	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	25960	12.98	SCALE:MAN WT	Origin: Offsite Waste Producer
NET WEIGHT:	42980	21.49		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15  
Trailer:

Tag:15  
Tag:

Transaction #: 13335625  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/11/06  
Time: 08:21  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	74680	37.34	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	27320	13.66	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	47360	23.68		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#5  
Trailer:

Tag:#5  
Tag:

Transaction #: 13335657  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/11/06  
Time: 08:59  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	63260	31.63	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	26340	13.17	SCALE:MAN WT	Pymt Type: Charge
NET WEIGHT:	36920	18.46		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18  
Trailer:

Tag:18  
Tag:

Transaction #: 13335676  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/11/06  
Time: 09:28  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS
GROSS WEIGHT:	61760	30.88
TARE WEIGHT:	25160	12.58
NET WEIGHT:	36600	18.30
VOL:	0	

SCALE:MAN WT	Tran Type: Capitol Environmental
SCALE:(K)	Pynt Type: Charge
	Origin: Offsite Waste Producer
	Dest: Regional Landfill
	State: VA MSW
	Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#3 Tag:#3 Transaction #: 13335660  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/11/06  
Time: 09:03  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT	Tran Type: Capitol Environmental
GROSS WEIGHT:	62560	31.28	WT	Pymt Type: Charge
TARE WEIGHT:	26280	13.14	WT	Origin: Offsite Waste Producer
NET WEIGHT:	36280	18.14		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30 Tag:#30 Transaction #: 13335665  
Trailer: Tag: Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/11/06  
Time: 09:09  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	63700	31.85	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25480	12.74	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	38220	19.11		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13335668  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/11/06  
Time: 09:14  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	62140	31.07	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25760	12.88	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	36380	18.19		Dest: Regional Landfill
VOL:	0			State: N/A
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13335671  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/11/06  
Time: 09:21  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT
GROSS WEIGHT:	66940	33.47	SCALE:MAN WT
TARE WEIGHT:	25960	12.98	SCALE:MAN WT
NET WEIGHT:	40980	20.49	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15  
Trailer:

Tag:15  
Tag:

Transaction #: 13335693  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/11/06  
Time: 09:51  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	71360	35.68	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	27320	13.66	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	44040	22.02		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#5                      Tag:#5                                      Transaction #: 13335704  
Trailer:                      Tag:    Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.                                      Date: 05/11/06  
15-C TROLLEY SQUARE    Time: 10:02  
WILMINGTON                      DE      19806    Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	62920	31.46	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	26340	13.17	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	36580	18.29		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS :

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13335731  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/11/06  
Time: 10:32  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	66060	33.03	SCALE:MAN WT
TARE WEIGHT:	25480	12.74	SCALE:(K)
NET WEIGHT:	40580	20.29	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13335734  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/11/06  
Time: 10:34  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS
GROSS WEIGHT:	58760	29.38
TARE WEIGHT:	25760	12.88
NET WEIGHT:	33000	16.50
VOL:	0	

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: N/A  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#3 Tag:#3 Transaction #: 13335738  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC. Date: 05/11/06  
15-C TROLLEY SQUARE Time: 10:39  
WILMINGTON DE 19806 Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT: 60220	30.11	SCALE:MAN WT	Origin: Offsite Waste Producer	Pymt Type: Charge
TARE WEIGHT: 26280	13.14	SCALE:(K)	Dest: Regional Landfill	
NET WEIGHT: 33940	16.97		State: VA MSW	
VOL: 0			Driver: N/A	

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13335747  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/11/06  
Time: 10:46  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT
GROSS WEIGHT:	65400	32.70	SCALE:(K)
TARE WEIGHT:	25960	12.98	
NET WEIGHT:	39440	19.72	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18  
Trailer:

Tag:18  
Tag:

Transaction #: 13335751  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/11/06  
Time: 10:48  
Site: 13

REFUSE TYPE:ADC15-Gray So

	LBS	TONS	SCALE:MAN WT	Tran Type: Capitol Environmental
GROSS WEIGHT:	58740	29.37	WT	Pymt Type: Charge
TARE WEIGHT:	25160	12.58	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	33580	16.79		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15 Tag:15 Transaction #: 13335776  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/11/06  
Time: 11:13  
Site: 13

REFUSE TYPE:ADC1575-Gray

				Tran Type: Capitol Environmental
	LBS	TONS		Pymt Type: Charge
GROSS WEIGHT:	67280	33.64	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27320	13.66	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	39960	19.98		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#5 Tag:#5  
Trailer: Tag:

Transaction #: 13335806  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/11/06  
Time: 11:46  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	61240	30.62	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	26340	13.17	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	34900	17.45		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13335807  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/11/06  
Time: 11:47  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	60120	30.06	SCALE:MAN WT
TARE WEIGHT:	25480	12.74	SCALE:(K)
NET WEIGHT:	34640	17.32	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28 Tag:#28  
Trailer: Tag:

Transaction #: 13335811  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/11/06  
Time: 11:53  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	56980	28.49	SCALE:MAN WT
TARE WEIGHT:	25760	12.88	SCALE:(K)
NET WEIGHT:	31220	15.61	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: N/A  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#3 Tag:#3 Transaction #: 13335823  
Trailer: Tag: Attendant ID: KS

Customer: 602719 Date: 05/11/06  
CAPITOL ENVIRONMENTAL SERV, INC. Time: 12:05  
15-C TROLLEY SQUARE Site: 13  
WILMINGTON DE 19806

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT	Tran Type: Capitol Environmental
GROSS WEIGHT:	62600	31.30	WT	Pynt Type: Charge
TARE WEIGHT:	26280	13.14	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	36320	18.16		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34 Tag:#34 Transaction #: 13335822  
Trailer: Tag: Attendant ID: DS

Customer: 602723 OSAGE OF VIRGINIA INC Date: 05/11/06  
2618A COLLEY AVENUE Time: 12:03  
NORFOLK VA 23517 Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT: 65640	32.82	SCALE:MAN WT	Origin: Offsite Waste Producer	Pymt Type: Charge
TARE WEIGHT: 25960	12.98	SCALE:(K)	Dest: Regional Landfill	
NET WEIGHT: 39680	19.84		State: VA MSW	
VOL: 0			Driver: N/A	

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18 Tag:18 Transaction #: 13335828  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/11/06  
Time: 12:10  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	64980	32.49	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25160	12.58	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	39820	19.91		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15 Tag:15  
Trailer: Tag:

Transaction #: 13335865  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/11/06  
Time: 12:57  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	66780	33.39	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	27320	13.66	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	39460	19.73		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

---

Truck:#5                      Tag:#5                      Transaction #: 13335881  
Trailer:                      Tag:                      Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.                      Date: 05/11/06  
15-C TROLLEY SQUARE                      Time: 13:08  
WILMINGTON                      DE                      19806                      Site: 13

---

REFUSE TYPE:ADC1575-Gray

				Tran Type: Capitol Environmental
	LBS	TONS		Pynt Type: Charge
GROSS WEIGHT:	63520	31.76	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	26340	13.17	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	37180	18.59		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30 Tag:#30 Transaction #: 13335884  
Trailer: Tag: Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC Date: 05/11/06  
2618A COLLEY AVENUE Time: 13:10  
NORFOLK VA 23517 Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	68020	34.01	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25480	12.74	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	42540	21.27		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28 Tag:#28 Transaction #: 13335890  
Trailer: Tag: Attendant ID: DS

Customer: 602723 Date: 05/11/06  
OSAGE OF VIRGINIA INC Time: 13:16  
2618A COLLEY AVENUE Site: 13  
NORFOLK VA 23517

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	60540	30.27	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25760	12.88	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	34780	17.39		Dest: Regional Landfill
VOL:	0			State: N/A
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#3  
Trailer:

Tag:#3  
Tag:

Transaction #: 13335895  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/11/06  
Time: 13:21  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	64300	32.15	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	26280	13.14	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	38020	19.01		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:18 Tag:18 Transaction #: 13335897  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/11/06  
Time: 13:25  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pymt Type: Charge
GROSS WEIGHT:	60960	30.48	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25160	12.58	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	35800	17.90		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13335901  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/11/06  
Time: 13:33  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	63720	31.86	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	25960	12.98	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	37760	18.88		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#30                      Tag:#30                      Transaction #: 13335959  
Trailer:                      Tag:                      Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC                      Date: 05/11/06  
2618A COLLEY AVENUE                      Time: 14:24  
NORFOLK                      VA    23517                      Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

				Tran Type: Osage of Virginia
				Pynt Type: Charge
GROSS WEIGHT:	LBS	TONS	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	65040	32.52	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	25480	12.74		State: VA MSW
VOL:	39560	19.78		Driver: N/A
	0			

REMARKS:

THANK YOU FOR CHOOSING SPSA!



SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#3 Tag:#3 Transaction #: 13335968  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC. Date: 05/11/06  
15-C TROLLEY SQUARE Time: 14:32  
WILMINGTON DE 19806 Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	61760	30.88	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	26280	13.14	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	35480	17.74		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18  
Trailer:

Tag:18  
Tag:

Transaction #: 13335978  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/11/06  
Time: 14:44  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT
GROSS WEIGHT:	56240	28.12	SCALE:MAN WT
TARE WEIGHT:	25160	12.58	SCALE:(K)
NET WEIGHT:	31080	15.54	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34 Tag:#34 Transaction #: 13335980  
Trailer: Tag: Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC Date: 05/11/06  
2618A COLLEY AVENUE Time: 14:49  
NORFOLK VA 23517 Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	61000	30.50	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25960	12.98	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	35040	17.52		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15  
Trailer:

Tag:15  
Tag:

Transaction #: 13335992  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/11/06  
Time: 15:10  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	67980	33.99	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	27320	13.66	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	40660	20.33		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#5 Tag:#5 Transaction #: 13336022 ✓  
Trailer: Tag: Attendant ID: KS

Customer: 602719 Date: 05/11/06  
CAPITOL ENVIRONMENTAL SERV, INC. Time: 15:52  
15-C TROLLEY SQUARE Site: 13  
WILMINGTON DE 19806

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	57520	28.76	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	26340	13.17	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	31180	15.59		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#30                      Tag:#30                      Transaction #: 13336015  
Trailer:                      Tag:                      Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC                      Date: 05/11/06  
2618A COLLEY AVENUE                      Time: 15:44  
NORFOLK                      VA    23517                      Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT: 62800	31.40	SCALE:MAN WT		Pymt Type: Charge
TARE WEIGHT: 25480	12.74	SCALE:(K)		Origin: Offsite Waste Producer
NET WEIGHT: 37320	18.66			Dest: Regional Landfill
VOL: 0				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28 Tag:#28 Transaction #: 13336028  
Trailer: Tag: Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC Date: 05/11/06  
2618A COLLEY AVENUE Time: 15:56  
NORFOLK VA 23517 Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT: 57060	28.53	SCALE:MAN WT	Pynt Type: Charge	Origin: Offsite Waste Producer
TARE WEIGHT: 25760	12.88	SCALE:(K)		Dest: Regional Landfill
NET WEIGHT: 31300	15.65			State: N/A
VOL: 0				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:18 Tag:18 Transaction #: 13336034  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC. Date: 05/11/06  
15-C TROLLEY SQUARE Time: 16:01  
WILMINGTON DE 19806 Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	56980	28.49	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	25160	12.58	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	31820	15.91		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34 Tag:#34 Transaction #: 13336038  
Trailer: Tag: Attendant ID: KS

Customer: 602723 Date: 05/11/06  
OSAGE OF VIRGINIA INC Time: 16:05  
2618A COLLEY AVENUE Site: 13  
NORFOLK VA 23517

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	60720	30.36	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	25960	12.98	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	34760	17.38		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

May 13, 2006

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED** . 01072

Manifest Document No.

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking** #15

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: **13336624**

Project# **116539**

Actual Weight: **18.87**

*Capital*

16. 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.

Printed/Typed Name

*RM HART*

Signature

*RM Hart*

Month Day Year

**05/13/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Ervin Wiggins*

Signature

*Ervin Wiggins*

Month Day Year

**05/17/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**.**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Seff*

Signature

*DS Seff*

Month Day Year

**05/30/06**

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01043

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( 767 ) 445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

# 16

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

00020

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

Capitol

Transaction#: 13336628

Actual Weight: 15.54

16. 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.

Printed/Typed Name

*B M Hart*

Signature

*[Signature]*

Month Day Year

05 17 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Chuck Bate*

Signature

Month Day Year

05 17 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

· · ·

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Seff*

Signature

*[Signature]*

Month Day Year

05 13 06

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01044**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Landfill~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

00020

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Capitol**

**Transaction#:**

**17736631**

**Actual Weight:**

**18.45**

16. **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.

Printed/Typed Name

**BM HART**

Signature

*BM HART*

Month Day Year

**10/9/11/3/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*M. Smith*

Signature

*M. Smith*

Month Day Year

**10/9/11/3/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**.**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Sapp**

Signature

*Donna Sapp*

Month Day Year

**05/13/06**

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01045**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Atlantic Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Capitol**

**Transaction#:**

**13336678**

**Actual Weight:**

**19.12**

16. **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.

Printed/Typed Name

**RM HART**

Signature

*[Signature]*

Month Day Year

**10/9/13/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

**10/9/13/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**.**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Deanna Seff**

Signature

*[Signature]*

Month Day Year

**10/5/13/06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01046

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~S&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking**

#30

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

0 page

**Transaction#:**

17736644

**Actual Weight:**

16.63

16. **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.

Printed/Typed Name

**RM HART**

Signature

*RM HART*

Month Day Year

10/5/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**M/A**

Signature

**M/A**

Month Day Year

.

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Wayne Bashaw**

Signature

*Wayne Bashaw*

Month Day Year

10/5/13/06

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Sarp**

Signature

*Donna Sarp*

Month Day Year

10/5/13/06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01047

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~GM Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction# 13336648**

**Actual Weight: 15.84**

*Osage*

16. **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.

Printed/Typed Name

*R M HART*

Signature

*[Signature]*

Month Day Year

**05/13/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**05/13/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R. CUFFEE*

Signature

*R. Cuffee*

Month Day Year

**05/13/06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sepp*

Signature

*[Signature]*

Month Day Year

**05/13/06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

0-1049

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**GM Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transaction#:**

**13736650**

**Actual Weight:**

**18.76**

16. **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.

Printed/Typed Name

**RM HART**

Signature

*[Signature]*

Month Day Year

**09 | 13 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**. | . | .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Steve Couther**

Signature

*[Signature]*

Month Day Year

**09 | 13 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Sapp**

Signature

*[Signature]*

Month Day Year

**10 | 13 | 06**

GENERATOR

TRANSPORTER

FACILITY

#33

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. **01049**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703** Attn: **Rob Schonk**

5. Transporter 1 Company Name  
**~~CNH Trucking~~**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001 DT 00020 T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
**Osage**

Transaction#: **13336664**  
Actual Weight: **15.19**

16. 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.

Printed/Typed Name **RM HART**

Signature *[Signature]*

Month Day Year **05 | 13 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **ALLEN ROBBSON**

Signature *[Signature]*

Month Day Year **05 | 13 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Seep**

Signature *[Signature]*

Month Day Year **05 | 13 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01070**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

**# 15**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Capitol**

**Transactions#:**

**13330670**

**Actual Weight:**

**20.51**

16. **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.

Printed/Typed Name

**RM HART**

Signature

*RM Hart*

Month Day Year  
**10/5/13/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Ervin Wiggins**

Signature

*Ervin Wiggins*

Month Day Year  
**10/5/13/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year  
. . .

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Soff**

Signature

*Donna Soff*

Month Day Year  
**10/5/13/06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
01051

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( 757 ) 445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

# 16

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

001

DT

00020

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: 13336673

Project# 118539

Actual Weight: 16.34

Capitol

16. 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.

Printed/Typed Name

*RM Haret*

Signature

*[Signature]*

Month Day Year

05 | 17 | 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Chuck Bate*

Signature

Month Day Year

05 | 17 | 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

. | . | .

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Seff*

Signature

*[Signature]*

Month Day Year

05 | 13 | 06

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

0-1052

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capital*

**Transaction#:**

**17736696**

**Actual Weight:**

**18.24**

16. **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.

Printed/Typed Name

*B M Hunt*

Signature

*[Signature]*

Month Day Year

**09/30/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*M. Smith*

Signature

*[Signature]*

Month Day Year

**09/17/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**..../..../..**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Dann Seff*

Signature

*[Signature]*

Month Day Year

**09/30/06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01053**

2. Page 1  
of 1

**Site: NNSY Paradise Creek**

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St, Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
------------	-----------	--------------	----------

b.   
c.   
d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** **13330706**

**Project# 116539**

**Actual Weight:** **20.22**

*Capital*

16. **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.

Printed/Typed Name **B M Hayes**

Signature *[Signature]*

Month Day Year  
**05/13/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year  
**05/13/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
. . .

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Self**

Signature *[Signature]*

Month Day Year  
**05/13/06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

**01054**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**~~CMM Trucking~~**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking #28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions: 13336709**

**Project# 118539**

**Actual Weight: 19.55**

*0 page*

16. **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.

Printed/Typed Name

**BM HART**

Signature

*BM Hart*

Month Day Year

**10 5 13 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**R. CUFFEE**

Signature

*R. Cuffee*

Month Day Year

**10 5 13 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Janna Sepp**

Signature

*Janna Sepp*

Month Day Year

**05 13 06**

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01055**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
<b>001</b>	<b>DT</b>
..	..
..	..
..	..
..	..

13. Total Quantity

**00020**

14. Unit

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 118539**

*Orange*

Transactions: **17736713**

Actual Weight: **24.54**

16. 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.

Printed/Typed Name

*R M Hart*

Signature

*[Signature]*

Month Day Year

**05 | 13 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

.. | .. | ..

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Coulter*

Signature

*[Signature]*

Month Day Year

**10 | 17 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Soff*

Signature

*[Signature]*

Month Day Year

**05 | 30 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01056**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 GILBERT ST., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking** #30

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
001	DT

13. Total Quantity

00020

14. Unit

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Orange*

**Transaction#:**

*17736718*

**Actual Weight:**

*20.73*

16. **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.

Printed/Typed Name

*BM HART*

Signature

*BM HART*

Month Day Year

*05/13/06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*05/13/06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bashear*

Signature

*Wayne Bashear*

Month Day Year

*05/13/06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Seff*

Signature

*Donna Seff*

Month Day Year

*05/13/06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01057**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St, Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H TRUCKING**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
<b>001</b>	<b>DT</b>
.	.
.	.
.	.
.	.
.	.

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Orange*

**Transactions#:**

**13736724**

**Actual Weight:**

**17.83**

16. **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.

Printed/Typed Name

**B M HART**

Signature

*B M Hart*

Month Day Year

**05 | 13 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

.

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Alexis Robinson**

Signature

*Alexis Robinson*

Month Day Year

**05 | 13 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Seff**

Signature

*Donna Seff*

Month Day Year

**05 | 13 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01059

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

**# 15**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Capitol**

**Transactions:**

**13336743**

**Actual Weight:**

**21.14**

16. **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.

Printed/Typed Name

**BM HART**

Signature

*BM Hart*

Month Day Year

**05 | 13 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Erin Wigan**

Signature

*Erin Wigan*

Month Day Year

**05 | 13 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**.**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Soff**

Signature

*Donna Soff*

Month Day Year

**05 | 13 | 06**

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01059**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-8703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill**  
**1 Bob Foeller Drive**  
**Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
--------------------	------	--------------------	-----------------

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
.	.	.	.

b.

.	.	.	.
---	---	---	---

c.

.	.	.	.
---	---	---	---

d.

.	.	.	.
---	---	---	---

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Capital**

**Transaction#:** **13736753**

**Actual Weight:** **17.70**

16. **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.

Printed/Typed Name **B M Hart**

Signature *[Signature]*      Month Day Year **05/13/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *[Signature]*

Signature *[Signature]*      Month Day Year **05/17/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**      Month Day Year

19. Discrepancy Indication Space

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

Printed/typed Name **Donna Sepp**

Signature *[Signature]*      Month Day Year **05/13/02**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

0-1-0-60

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)**

**1610 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~G&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

**# 28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill**

**1 Bob Foeller Drive**

**Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13336790**

**Project# 118539**

**Actual Weight: 19.37**

*Opage*

16. **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.

Printed/Typed Name

*RM HART*

Signature

*RM Hart*

Month Day Year

*10/13/06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*10/13/06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R. Cuffee*

Signature

*R. Cuffee*

Month Day Year

*10/13/06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Seff*

Signature

*Donna Seff*

Month Day Year

*10/13/06*

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01-06-1**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:**

**Project# 116539**

**Actual Weight:**

*Osage*

*19.53*

16. **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.

Printed/Typed Name

*R M Hart*

Signature

*[Signature]*

Month Day Year

*10-8-06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*· · ·*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bashaw*

Signature

*[Signature]*

Month Day Year

*10-8-06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*[Signature]*

Month Day Year

*05/13/06*

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01262**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&F Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
<b>001</b>	<b>DT</b>
.	.
.	.
.	.
.	.

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:**

**Project# 118539**

**Actual Weight:**

**2264**

*o sage*

16. 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.

Printed/Typed Name

**RM HART**

Signature

*RM Hart*

Month Day Year

**05/13/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**n/a**

Signature

*n/a*

Month Day Year

.

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Steve Contha**

Signature

Month Day Year

**05/13/06**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Sepp**

Signature

*Donna Sepp*

Month Day Year

**05/13/06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

**01-06-3**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~**South Norfolk Trucking**~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

**13336813**

**Actual Weight:**

**22.33**

16. **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.

Printed/Typed Name

*RM Hart*

Signature

*RM Hart*

Month Day Year

**05/13/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

**05/13/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**05/13/06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Dennis Seff*

Signature

*Dennis Seff*

Month Day Year

**05/13/06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**011064**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

**13336813**

**Actual Weight:**

**22.33**

16. **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.

Printed/Typed Name

*B M HART*

Signature

*B M Hart*

Month Day Year  
**10 9 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Smith*

Signature

*Smith*

Month Day Year  
**10 9 17 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
**.**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sepp*

Signature

*D Sepp*

Month Day Year  
**05 13 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01065**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:**

**Project# 116539**

**Actual Weight:**

*Orange*

16. **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.

Printed/Typed Name

*B M Hart*

Signature

*[Signature]*

Month Day Year

*10/5/13/06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*10/5/13/06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*ALFRED ROBBSON*

Signature

*[Signature]*

Month Day Year

*10/5/13/06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*[Signature]*

Month Day Year

*10/5/13/06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01066**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116639**

*Capitol*

**Transaction#:**

**13336845**

**Actual Weight:**

**23.28**

16. **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.

Printed/Typed Name

*BMHART*

Signature

*[Signature]*

Month Day Year

**10/17/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

**10/17/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*MIA*

Signature

*MIA*

Month Day Year

**10/17/06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Seff*

Signature

*[Signature]*

Month Day Year

**10/13/06**

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01007**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
<b>001</b>	<b>DT</b>
.	.
.	.
.	.
.	.

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

**13336849**

**Actual Weight:**

**19.69**

16. **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.

Printed/Typed Name

*R M Harts*

Signature

*[Signature]*

Month Day Year

**05 | 13 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

**05 | 17 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*n/a*

Signature

*n/a*

Month Day Year

.

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sore*

Signature

*[Signature]*

Month Day Year

**05 | 13 | 06**

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15  
Trailer:

Tag:15  
Tag:

Transaction #: 13336624  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/13/06  
Time: 07:20  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT
GROSS WEIGHT:	65060	32.53	SCALE:(K)
TARE WEIGHT:	27320	13.66	
NET WEIGHT:	37740	18.87	
VOL:	0		

Tran Type: Capitol Environmental  
Pynt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16  
Trailer:

Tag:16  
Tag:

Transaction #: 13336628  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/13/06  
Time: 07:25  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 58940 29.47 SCALE:MAN WT  
TARE WEIGHT: 27860 13.93 SCALE:(K)  
NET WEIGHT: 31080 15.54  
VOL: 0

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:11  
Trailer:

Tag:11  
Tag:

Transaction #: 13336631  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/13/06  
Time: 07:32  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	62240	31.12	SCALE:MAN WT
TARE WEIGHT:	25340	12.67	SCALE:(K)
NET WEIGHT:	36900	18.45	
VOL:	0		

Tran Type: Capitol Environmental  
Pynt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13336638  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/13/06  
Time: 07:38  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	65260	32.63	SCALE:MAN WT
TARE WEIGHT:	27020	13.51	SCALE:(K)
NET WEIGHT:	38240	19.12	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SNT  
#30

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13336644  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/13/06  
Time: 07:43  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	58740	29.37	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25480	12.74	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	33260	16.63		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13336648  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/13/06  
Time: 07:51  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:	MAN WT	Tran Type:	Osage of Virginia
GROSS WEIGHT:	57440	28.72	SCALE:	MAN WT	Pynt Type:	Charge
TARE WEIGHT:	25760	12.88	SCALE:	(K)	Origin:	Offsite Waste Producer
NET WEIGHT:	31680	15.84			Dest:	Regional Landfill
VOL:	0				State:	N/A
					Driver:	N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#34 Tag:#34 Transaction #: 13336650  
Trailer: Tag: Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC Date: 05/13/06  
2618A COLLEY AVENUE Time: 07:56  
NORFOLK VA 23517 Site: 13  
-----

REFUSE TYPE:ADC1575-Gray  
Tran Type: Osage of Virginia  
LBS TONS Pymt Type: Charge  
GROSS WEIGHT: 62680 31.34 SCALE:MAN WT Origin: Offsite Waste Producer  
TARE WEIGHT: 25960 12.98 SCALE: (K) Dest: Regional Landfill  
NET WEIGHT: 36720 18.36 State: VA MSW  
VOL: 0 Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#33  
Trailer:

Tag:#33  
Tag:

Transaction #: 13336664  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/13/06  
Time: 08:22  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	56300	28.15	SCALE:MAN WT
TARE WEIGHT:	25920	12.96	SCALE:MAN WT
NET WEIGHT:	30380	15.19	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:15 Tag:15 Transaction #: 13336670  
Trailer: Tag: Attendant ID: DS

Customer: 602719 Date: 05/13/06  
CAPITOL ENVIRONMENTAL SERV, INC. Time: 08:36  
15-C TROLLEY SQUARE Site: 13  
WILMINGTON DE 19806

-----  
REFUSE TYPE:ADC1575-Gray

				Tran Type: Capitol Environmental
	LBS	TONS		Pynt Type: Charge
GROSS WEIGHT:	68340	34.17	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27320	13.66	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	41020	20.51		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16  
Trailer:

Tag:16  
Tag:

Transaction #: 13336673  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/13/06  
Time: 08:40  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS
GROSS WEIGHT:	60540	30.27
TARE WEIGHT:	27860	13.93
NET WEIGHT:	32680	16.34
VOL:	0	

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:11  
Trailer:

Tag:11  
Tag:

Transaction #: 13336696  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/13/06  
Time: 09:04  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	61820	30.91	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	25340	12.67	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	36480	18.24		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:14                      Tag:14                      Transaction #: 13336706  
Trailer:                      Tag:                      Attendant ID: DS

Customer: 602719                      Date: 05/13/06  
CAPITOL ENVIRONMENTAL SERV, INC.                      Time: 09:13  
15-C TROLLEY SQUARE                      Site: 13  
WILMINGTON                      DE                      19806

-----  
REFUSE TYPE:ADC1575-Gray

				Tran Type: Capitol Environmental
	LBS	TONS		Pymt Type: Charge
GROSS WEIGHT:	67460	33.73	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27020	13.51	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	40440	20.22		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13336709  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/13/06  
Time: 09:16  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	64860	32.43	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25760	12.88	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	39100	19.55		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: N/A
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13336713  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/13/06  
Time: 09:23  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	75040	37.52	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25960	12.98	SCALE: (K)	Pynt Type: Charge
NET WEIGHT:	49080	24.54		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!



SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#33 Tag:#33 Transaction #: 13336724  
Trailer: Tag: Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC Date: 05/13/06  
2618A COLLEY AVENUE Time: 09:35  
NORFOLK VA 23517 Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pymt Type: Charge
GROSS WEIGHT:	61580	30.79	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25920	12.96	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	35660	17.83		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:15 Tag:15 Transaction #: 13336743  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/13/06  
Time: 09:53  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pynt Type: Charge
GROSS WEIGHT:	69600	34.80	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27320	13.66	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	42280	21.14		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16  
Trailer:

Tag:16  
Tag:

Transaction #: 13336753  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/13/06  
Time: 09:59  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 63260 31.63 SCALE:MAN WT  
TARE WEIGHT: 27860 13.93 SCALE:(K)  
NET WEIGHT: 35400 17.70  
VOL: 0

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13336790  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/13/06  
Time: 10:36  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	64500	32.25	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25760	12.88	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	38740	19.37		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: N/A
				Driver: N/A

REMARKS :

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#30                      Tag:#30                      Transaction #: 13336800  
Trailer:                      Tag:                      Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC                      Date: 05/13/06  
2618A COLLEY AVENUE                      Time: 10:44  
NORFOLK                      VA    23517                      Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pymt Type: Charge
GROSS WEIGHT:	64540	32.27	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25480	12.74	SCALE: (K)	Dest: Regional Landfill
NET WEIGHT:	39060	19.53		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13336804  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/13/06  
Time: 10:47  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	71240	35.62	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25960	12.98	SCALE: (K)	Pymt Type: Charge
NET WEIGHT:	45280	22.64		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13336837  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/13/06  
Time: 11:12  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 72340 36.17 SCALE:MAN WT  
TARE WEIGHT: 27020 13.51 SCALE:(K)  
NET WEIGHT: 45320 22.66  
VOL: 0

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:11  
Trailer:

Tag:11  
Tag:

Transaction #: 13336813  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/13/06  
Time: 10:56  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	70000	35.00	SCALE:MAN WT
TARE WEIGHT:	25340	12.67	SCALE:(K)
NET WEIGHT:	44660	22.33	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#33  
Trailer:

Tag:#33  
Tag:

Transaction #: 13336832  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/13/06  
Time: 11:09  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	63480	31.74	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25920	12.96	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	37560	18.78		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS :

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15  
Trailer:

Tag:15  
Tag:

Transaction #: 13336845  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/13/06  
Time: 11:22  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 73880 36.94 SCALE:MAN WT  
TARE WEIGHT: 27320 13.66 SCALE:(K)  
NET WEIGHT: 46560 23.28  
VOL: 0

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:16 Tag:16 Transaction #: 13336849  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC. Date: 05/13/06  
15-C TROLLEY SQUARE Time: 11:24  
WILMINGTON DE 19806 Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	67240	33.62	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	27860	13.93	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	39380	19.69		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS :

THANK YOU FOR CHOOSING SPSA!

May 17, 2006

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01-068**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~**South Norfolk Trucking**~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13338414**

**Project# 116539**

**Actual Weight: 21.69**

*Capitol*

16. 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.

Printed/Typed Name

*BM Hart*

Signature

*BM Hart*

Month Day Year

**05 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*M. Smith*

Signature

*M. Smith*

Month Day Year

**05 17 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**05 17 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**05 17 06**

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01069**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

*# 15*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capital*

**Transaction#:** *13338408*

**Actual Weight:** *21.81*

16. **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.

Printed/Typed Name

*R M Hayes*

Signature

*[Signature]*

Month Day Year

*5 17 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Eric Wiggins*

Signature

*[Signature]*

Month Day Year

*5 17 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*.*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*5 17 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

**0-1-0-7-0**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
--------------------	--------------------	-----------------

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
------------	-----------	--------------	----------

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** 13338419

**Project# 116539**

**Actual Weight:** 19.66

*Capitol*

16. **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.

Printed/Typed Name

*BM Hunt*

Signature

*BM Hunt*

Month	Day	Year
5	17	06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*KW Falls*

Signature

*KW Falls*

Month	Day	Year
5	17	06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month	Day	Year
.	.	.

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month	Day	Year
5	17	06

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED** Manifest Document No. **0-1-07-1**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St, Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703** Attn: **Rob Schonk**

5. Transporter 1 Company Name **C&H Trucking** 6. US EPA ID Number **NOT REQUIRED**

A. Transporter's Phone **757 449-2761**

7. Transporter 2 Company Name ~~**Southern Norfolk Trucking**~~ 8. US EPA ID Number **NOT REQUIRED**

B. Transporter's Phone **757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill** #16  
**1 Bob Foeller Drive**  
**Suffolk, VA 23434** 10. US EPA ID Number **NOT REQUIRED**

C. Facility's Phone **757 639-9373**

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. <b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.	.	.	.	.
c.	.	.	.	.
d.	.	.	.	.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Transaction#:** **13338402**  
**Project#** **116539** **Actual Weight:** **17.94**  
**Captial**

16. 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.

Printed/Typed Name **R M Hart** Signature **[Signature]** Month **5** Day **17** Year **06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name **Clyde Bates** Signature **[Signature]** Month **5** Day **17** Year **06**

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
 Printed/Typed Name **[Signature]** Signature **[Signature]** Month **5** Day **17** Year **06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID: **NOT REQUIRED**

Manifest Document No: **01072**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: MNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name **C&H Trucking** #14      6. US EPA ID Number **NOT REQUIRED**

A. Transporter's Phone **767 449-2761**

7. Transporter 2 Company Name ~~South Norfolk Trucking~~      8. US EPA ID Number **NOT REQUIRED**

B. Transporter's Phone **767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill**  
**1 Bob Foeller Drive**  
**Suffolk, VA 23434**

C. Facility's Phone **767 539-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit
No.	Type		Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
------------	-----------	--------------	----------

b.

--	--	--	--

c.

--	--	--	--

d.

--	--	--	--

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 118539**

**Transactions: 13338427**  
**Actual Weight: 20.75**

16. 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.

Printed/Typed Name **RM HANET**

Signature *[Signature]*

Month Day Year **5 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name **Quinton Cross**

Signature *[Signature]*

Month Day Year **5 17 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
 Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year **5 17 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01-073**

2. Page 1 of 1

**Site: NNSY Paradise Creek**

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~CMH Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

\* **30**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13338389**

**Project# 116539**

**Actual Weight: 17.55**

*Usage*

16. **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.

Printed/Typed Name

*RM HART*

Signature

*[Signature]*

Month Day Year

**5 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Rashe*

Signature

*Wayne Rashe*

Month Day Year

**5 17 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**5 17 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

**01074**

2. Page 1 of 1

Site: **NNSY Paradise Creek**

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **767** ) **445-8703**

Attn: **Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
<b>001</b>	<b>DT</b>

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: **13338389**

Project#: **116539**

Actual Weight: **21.06**

*Osage*

16. 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.

Printed/Typed Name

**BM HANT**

Signature

*[Signature]*

Month Day Year

**5 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**. . .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Steve Couther**

Signature

*[Signature]*

Month Day Year

**5 17 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

Month Day Year

**5 17 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**0-1-0-7-5**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703** **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~**CMH Trucking**~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4887**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001 DT 00020 T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions: 13338406**

**Project# 116539**

**Actual Weight: 17,53**

*Osage*

16. **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.

Printed/Typed Name **RM Hares**

Signature *[Signature]*

Month Day Year  
**5 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
**. . .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **ALBERT ROBBSON**

Signature *[Signature]*

Month Day Year  
**5 17 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
**5 17 06**

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01076**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **446-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~CNH Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13338416**

**Project# 116539**

**Actual Weight: 19.06**

*Osage*

16. 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.

Printed/Typed Name

*B M HART*

Signature

*B M HART*

Month Day Year

**5 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Dawn Edwards*

Signature

*Dawn Edwards*

Month Day Year

**5 17 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**9 17 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01077

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( 757 ) 445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

~~Carl Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

001

DT

00020

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: 13338404

Project# 116539

Actual Weight: 18.34

*Osage*

16. 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.

Printed/Typed Name

*B M HART*

Signature

*B M HART*

Month Day Year  
5 17 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*REGINA CUFFEE*

Signature

*Regina Cuffee*

Month Day Year  
5 17 06

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
5 17 06

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01.078**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~Coast Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13339459**

**Project# 116539**

**Actual Weight: 19.72**

*Osage*

16. **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.

Printed/Typed Name

*R M Hunt*

Signature

*R M Hunt*

Month Day Year

**5 | 17 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**5 | 17 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bashaw*

Signature

*Wayne Bashaw*

Month Day Year

**5 | 17 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**5 | 17 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

**01079**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~EMH Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13338471**

**Project# 116539**

**Actual Weight:**

**21.75**

*Osage*

16. **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.

Printed/Typed Name

*RM Harts*

Signature

*RM Harts*

Month Day Year

**15 | 7 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**| |**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Coulter*

Signature

*Steve Coulter*

Month Day Year

**15 | 17 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**19 | 17 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED** Manifest Document No. **01080**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1610 Gilbert St., Norfolk, VA 23611-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703** Attn: **Rob Schonk**

5. Transporter 1 Company Name  
~~EXP Tracking~~

A. Transporter's Phone  
**757 449-2761**

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name  
**South Norfolk Trucking #28**

B. Transporter's Phone  
**757 487-4887**

8. US EPA ID Number  
**NOT REQUIRED**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill**  
**1 Bob Foeller Drive**  
**Suffolk, VA 23434**

C. Facility's Phone  
**757 539-9373**

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No. **001** Type **DT** **00020** **T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
*Osage*

Transactions: ~~13338475~~ **13338475**  
 Actual Weight: ~~19.03~~ **19.03**

16. 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.

Printed/Typed Name **R.M. Hunt**

Signature *R.M. Hunt* Month **15** Day **17** Year **06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name **N/A**

Signature **N/A** Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
 Printed/Typed Name **R. CUFFEE**

Signature *R. Cuffee* Month **15** Day **17** Year **06**

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature *[Signature]* Month **15** Day **17** Year **06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01081**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Atlantic Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill**

**1 Bob Foeller Drive**

**Suffolk, VA 23434**

*11/16*

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

**Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit

Wt/Vol

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13338495*

**Project# 116539**

**Actual Weight:** ~~*17.94*~~

*19.76*

*Capital*

16. **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.

Printed/Typed Name

*R.M. HART*

Signature

*R.M. Hart*

Month Day Year

*3 17 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Clyde Bates*

Signature

*Clyde Bates*

Month Day Year

*5 17 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*3 17 06*

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01083**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

*A 15*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foelker Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

**Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13338483*

**Project#** *116639*

**Actual Weight:** *22.78*

*Captial*

16. 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.

Printed/Typed Name

*RM Hant*

Signature

*RM Hant*

Month Day Year

*5 17 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Ervin Wiggins*

Signature

*Ervin Wiggins*

Month Day Year

*5 17 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*5 17 06*

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01083**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total  
Quantity

14. Unit  
Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 118539**

**Transaction#:**

**13338499**

**Actual Weight:**

**15.86**

**0599E**

16. **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.

Printed/Typed Name

**R M Hunt**

Signature

*R M Hunt*

Month Day Year  
**15 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Dawn Edwards**

Signature

*Dawn Edwards*

Month Day Year  
**15 17 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

Month Day Year  
**15 17 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01084**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~CALL TRUCKING~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13338501**

**Project# 116539**

**Actual Weight: 18.33**

*Osage*

16. 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.

Printed/Typed Name

*RM Hart*

Signature

*RM Hart*

Month Day Year  
**5 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Alfred Robinson*

Signature

*Alfred Robinson*

Month Day Year  
**5 17 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
**5 17 06**

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01085**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit

Wt/Vol

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13339506**

**Project# 116539**

**Actual Weight:**

**22.45**

*Capitol*

16. **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.

Printed/Typed Name

*B.M. HART*

Signature

*B.M. Hart*

Month Day Year

**5 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*M. Smith*

Signature

*M. Smith*

Month Day Year

**10 5 17 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**.**

19. Discrepancy Indication Space

FACILITY

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**9 17 06**

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01086**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

Attn: **Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
<b>001</b>	<b>DT</b>

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capital*

**Transaction#:** *19338509*

**Actual Weight:** *22.78*

16. **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.

Printed/Typed Name

*RM HART*

Signature

*RM Hart*

Month Day Year  
**5 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*KW Falls*

Signature

*KW Falls*

Month Day Year  
**5 17 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
**- - -**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
**5 17 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01087**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** **13338515**

**Project# 116639**

**Actual Weight:**  
**23.29**

*Capitol*

16. **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.

Printed/Typed Name

*R M Hart*

Signature

*[Signature]*

Month Day Year  
**5 | 17 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*G. Cross*

Signature

*[Signature]*

Month Day Year  
**5 | 17 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
**. | . | .**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
**5 | 17 | 06**

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01-08-8**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~CSH Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

001

DT

00020

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13338537*

**Project#** 116539

**Actual Weight:**

*22.66*

*Osage*

16. **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.

Printed/Typed Name

*RM HART*

Signature

*RM Hart*

Month Day Year  
*5 17 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bashaw*

Signature

*Wayne Bashaw*

Month Day Year  
*5 17 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
*5 17 06*

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01089**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

No.

Type

Quantity

Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** 13338553

**Project# 116539**

**Actual Weight:**  
22.93

*Osage*

16. **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.

Printed/Typed Name

*R.M. Hart*

Signature

*R.M. Hart*

Month Day Year

15 17 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Coulter*

Signature

*Steve Coulter*

Month Day Year

5 17 06

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

5 17 06

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01090**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

A. Transporter's Phone  
**767 449-2761**

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name  
**South Norfolk Trucking #28**

B. Transporter's Phone  
**767 487-4867**

8. US EPA ID Number  
**NOT REQUIRED**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

C. Facility's Phone  
**767 539-9373**

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description  
**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
.	.	.	.
.	.	.	.
.	.	.	.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Transactions: 13338554**  
**Project# 116539**  
**Actual Weight: 19.19**  
*Osage*

16. 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.

Printed/Typed Name **B.M. HART**

Signature *B.M. Hart*      Month Day Year **15 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature      Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **R. CUFFEE**

Signature *R. Cuffee*      Month Day Year **15 17 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature *[Signature]*      Month Day Year **15 17 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01-09-1**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**G&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transaction#:**

*13338557*

**Actual Weight:**

*18.76*

16. **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.

Printed/Typed Name

*R.M. Hunt*

Signature

*R.M. Hunt*

Month Day Year

*5 | 17 | 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. | . | .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Alfred Ribben*

Signature

*Alfred Ribben*

Month Day Year

*5 | 17 | 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*5 | 17 | 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **07-092**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** 13338560

**Project#** 116539

**Actual Weight:**

18.64

Usage

16. 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.

Printed/Typed Name

**R.M. HAYOT**

Signature

*R.M. Hayot*

Month Day Year  
**5 | 17 | 06**

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Dawn Edwards**

Signature

*Dawn Edwards*

Month Day Year  
**5 | 17 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
**5 | 17 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **07093**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **446-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

**# 15**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill**

**1 Bob Foeller Drive**

**Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Capitol**

**Transaction#:**

**13338573**

**Actual Weight:**

**24.13**

16. 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.

Printed/Typed Name

**R.M. Hart**

Signature

*[Signature]*

Month Day Year

**15 | 17 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Erin Wiggins**

Signature

*[Signature]*

Month Day Year

**15 | 17 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**. | . | .**

19. Discrepancy Indication Space

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

Printed/Typed Name

**[Signature]**

Signature

*[Signature]*

Month Day Year

**15 | 17 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07094**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

*# 14*

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13338574*

**Project# 116539**

**Actual Weight:** *21.60*

*Capital*

16. 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.

Printed/Typed Name

*R.M. Hunt*

Signature

*R.M. Hunt*

Month Day Year  
**5 | 17 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Clyde Bates*

Signature

*Clyde Bates*

Month Day Year  
**5 | 17 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
**· | · | ·**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
**5 | 17 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

**01095**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No. **001**

Type **DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transactions: **13338587**

Project# **116539**

Actual Weight: **22.91**

*Capitol*

16. 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.

Printed/Typed Name

*B.M. HART*

Signature

*B.M. Hart*

Month Day Year

**5/17/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*M. Smith*

Signature

*M. Smith*

Month Day Year

**10/5/17/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**.**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**5/17/06**

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07-096**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St, Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**      **Attn: Rob Schonk**

A. Transporter's Phone  
**767 449-2761**

5. Transporter 1 Company Name  
**C&H Trucking**      *#14*

B. Transporter's Phone  
**767 487-4867**

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

C. Facility's Phone  
**767 539-9373**

8. US EPA ID Number  
**NOT REQUIRED**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description

a.	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
<b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
**Capital**

**Transaction#:** 13338581  
**Actual Weight:** 23.04

16. **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.

Printed/Typed Name **R.M. HART**      Signature *[Signature]*      Month Day Year **15 | 17 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **D. Cross**      Signature *[Signature]*      Month Day Year **15 | 17 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name \_\_\_\_\_      Signature \_\_\_\_\_      Month Day Year \_\_\_\_\_

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*      Signature *[Signature]*      Month Day Year **15 | 17 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
*0.1.0.9.7*

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
001	DT

13. Total Quantity

00020

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capital*

**Transaction#:**

*13338588*

**Actual Weight:**

*21.67*

16. **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.

Printed/Typed Name

*R.M. Hart*

Signature

*[Signature]*

Month	Day	Year
5	17	06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Rob Falls*

Signature

*[Signature]*

Month	Day	Year
5	17	06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month	Day	Year
.	.	.

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month	Day	Year
.	.	.

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01098**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~C&H Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No.    Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001    DT    00020    T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
**Osage**

**Transactions: 13338601**  
**Actual Weight: 22.06**

16. **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.

Printed/Typed Name  
**R M HART**

Signature  
*[Signature]*      Month Day Year  
**5 | 17 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
**N/A**

Signature  
**N/A**      Month Day Year  
.    .    .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
**Wayne Bashaw**

Signature  
*[Signature]*      Month Day Year  
**5 | 17 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name  
*[Signature]*

Signature  
*[Signature]*      Month Day Year  
**5 | 17 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01099**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **446-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~OSM Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13338622**

**Project# 116539**

**Actual Weight:**

**Osage**

**23.15**

16. 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.

Printed/Typed Name

**R. M. HART**

Signature

*R. M. Hart*

Month Day Year

**5 | 17 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**· | · | ·**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Steve Coulter**

Signature

*Steve Coulter*

Month Day Year

**5 | 17 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

**NA**

Signature

*NA*

Month Day Year

**5 | 17 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01100**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		
001	DT	00020	T
.	.	.	.
.	.	.	.
.	.	.	.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions#: 13338630**

**Project# 116539**

**Actual Weight: 16.11**

*Osage*

16. **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.

Printed/Typed Name

*BM Hart*

Signature

*BM Hart*

Month Day Year

5 | 17 | 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

. | . | .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R. Cuffee*

Signature

*R. Cuffee*

Month Day Year

5 | 17 | 06

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

5 | 17 | 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**07101**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&E Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** **13338624**

**Project# 116539**

**Actual Weight:**

*Osage*

**18.32**

16. **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.

Printed/Typed Name

*BM Harts*

Signature

*BM Harts*

Month Day Year

**5 | 17 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**| |**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Dawn Edwards*

Signature

*Dawn Edwards*

Month Day Year

**5 | 17 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**5 | 17 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01102**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foatler Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions#: 13338631**

**Project# 116539**

**Actual Weight:**

**Osage**

**13.9**

16. **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.

Printed/Typed Name

**R. M. HART**

Signature

*[Signature]*

Month Day Year

**5 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**. . .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**05 17 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**5 17 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01103**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking** #14

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13338650**

**Project# 116539**

**Actual Weight:**

*Capitol*

*21.79*

16. **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.

Printed/Typed Name

*R.M. Hart*

Signature

*[Signature]*

Month Day Year

*15 17 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*G. Cross*

Signature

*[Signature]*

Month Day Year

*10 5 17 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*5 7 06*

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01104**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 GILBERT ST., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

*File*

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** 13339658

**Project# 116539**

**Actual Weight:**

**20.74**

*Capital*

16. 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.

Printed/Typed Name

*R. M. HART*

Signature

*R. M. Hart*

Month Day Year  
**15 1 7 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Clyde Bates*

Signature

*Clyde Bates*

Month Day Year  
**15 1 7 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
**. . .**

19. Discrepancy Indication Space

FACILITY

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
**15 1 7 06**

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01705**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name **#15 C&H Trucking**      6. US EPA ID Number **NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name ~~South Norfolk Trucking~~      8. US EPA ID Number **NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**      C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol		
			Type	
a. <b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**      **Transaction#: 13339661**  
**Capitol**      **Actual Weight: 22.88**

16. 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.

Printed/Typed Name **RM Harot**

Signature *[Signature]*

Month Day Year  
**5 | 17 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Edwin Wiggins**

Signature *[Signature]*

Month Day Year  
**5 | 17 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
**|   |**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
**5 | 17 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01106**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St, Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: **13338670**

Project# **116539**

Actual Weight: **21.99**

*Capitol*

*21.99*

16. 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.

Printed/Typed Name

*R M Hart*

Signature

*R M Hart*

Month Day Year  
**5 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*K W Falls*

Signature

*K W Falls*

Month Day Year  
**5 17 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
**. . .**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
**5 17 06**

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01107**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **446-8703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking** #11

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

a.	Beneficial Re-Use Soil/Calcium Hydroxide Mixture	12. Containers		13. Total	14. Unit
		No.	Type	Quantity	Wt/Vol
		001	DT	00020	T
b.					
c.					
d.					

12. Containers	13. Total	14. Unit
No.	Quantity	Wt/Vol
001	00020	T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**      **Transactions#:** 13338676

**Capitol**      **Actual Weight:** 22.30

16. 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.

Printed/Typed Name **R M Hart**

Signature *[Signature]*      Month Day Year **5 | 17 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **M. Smith**

Signature *[Signature]*      Month Day Year **5 | 17 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**      Month Day Year **.**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*      Month Day Year **5 | 17 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01108**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~G&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #30**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foellier Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:**

**13338685**

**Project# 116539**

**Actual Weight:**

**21.40**

**Osage**

16. **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.

Printed/Typed Name

**R M HART**

Signature

**R M HART**

Month Day Year

**15 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**. . .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Wayne Bashaw**

Signature

**Wayne Bashaw**

Month Day Year

**15 17 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

**[Signature]**

Signature

**[Signature]**

Month Day Year

**15 17 06**

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**0.7.1.09**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: MNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

A. Transporter's Phone  
**757 449-2781**

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

B. Transporter's Phone  
**757 487-4867**

8. US EPA ID Number  
**NOT REQUIRED**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

C. Facility's Phone  
**757 539-9373**

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description  
**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Transactions#: 13338693**  
**Project# 116539**  
**Actual Weight: 17.90**  
**Osage**

16. 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.

Printed/Typed Name **RM Hart**

Signature *[Signature]*      Month Day Year **5 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A**      Month Day Year . . .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Steve Coulter**

Signature *[Signature]*      Month Day Year **5 17 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*      Month Day Year **5 17 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **0-1-1-1-0**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St, Norfolk, VA 23511-2737**

**Site: MNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~GMI Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13338699**

**Project# 116539**

**Actual Weight:**

**17.74**

*Osage*

16. **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.

Printed/Typed Name

*B M Hart*

Signature

*B M Hart*

Month Day Year

**15 | 17 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**15 | 17 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Dawn Edwards*

Signature

*Dawn Edwards*

Month Day Year

**15 | 17 | 06**

19. Discrepancy Indication Space

FACILITY

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

Printed/Typed Name

*Ken*

Signature

*Ken*

Month Day Year

**15 | 17 | 06**

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**071111**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~C&H Trucking~~

A. Transporter's Phone  
**757 449-2761**

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

B. Transporter's Phone  
**757 487-4867**

8. US EPA ID Number  
**NOT REQUIRED**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

C. Facility's Phone  
**757 539-9373**

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description

12. Containers

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No.	Type	13. Total Quantity	14. Unit Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
.	.	.	.
.	.	.	.
.	.	.	.

b.

.	.	.	.
---	---	---	---

c.

.	.	.	.
---	---	---	---

d.

.	.	.	.
---	---	---	---

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
*Osage*

**Transaction#:** **13338703**  
**Actual Weight:** **18.59**

16. **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.

Printed/Typed Name *BM HART*

Signature *[Signature]*

Month Day Year  
**5 | 17 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
. | . | .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Robert Gibson*

Signature *[Signature]*

Month Day Year  
**5 | 17 | 06**

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
**5 | 17 | 06**

GENERATOR  
TRANSPORTER  
FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **07-112**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~G&H TRUCKING~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13338716**

**Project# 116539**

**Actual Weight: 18.22**

*Osage*

16. 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.

Printed/Typed Name

*R M HART*

Signature

*[Signature]*

Month Day Year

**15 | 17 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**· | · | ·**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R. CUFFEE*

Signature

*[Signature]*

Month Day Year

**15 | 11 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**15 | 11 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **0.1.1.1.3**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

*714*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

*1333 8718*

**Actual Weight:**

*23.71*

16. **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.

Printed/Typed Name

*RM Hart*

Signature

*[Signature]*

Month Day Year  
**13 | 17 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Quinton Cross*

Signature

*[Signature]*

Month Day Year  
**10 | 31 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
. . .

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
**11 | 17 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01119**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~C&H Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

*#16*

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions: 13338721**

**Project# 116539**

**Actual Weight: 19.13**

*Capital*

16. **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.

Printed/Typed Name

*R M HART*

Signature

*R M Hart*

Month Day Year  
**5 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Clyde Bates*

Signature

*Clyde Bates*

Month Day Year  
**5 19 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
**. . .**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
**5 17 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01115**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13338742**

**Project# 116539**

**Actual Weight:**

*Capitol*

*22.16*

16. **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.

Printed/Typed Name

*RM Hart*

Signature

*RM Hart*

Month Day Year  
**5 | 17 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*SW Falls*

Signature

*SW Falls*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
. . .

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
**7 | 12 | 06**

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01116**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 GILBERT ST, Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

**# 15**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~**SOUTH BEACH TRUCKING**~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Capitol**

**Transaction#:**

**13338745**

**Actual Weight:**

**22.86**

16. 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.

Printed/Typed Name

**RM Hantz**

Signature

*RM Hantz*

Month Day Year  
**5 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Ervin Wiggins**

Signature

*Ervin Wiggins*

Month Day Year  
**5 17 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year  
**. . .**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
**5 17 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01117**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking #11**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions: 13338947**

**Project# 116539**

**Actual Weight: 22.78**

*Capitol*

16. **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.

Printed/Typed Name

*B M HART*

Signature

*B M Hart*

Month Day Year  
**10 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*M. Smith*

Signature

*M Smith*

Month Day Year  
**10 17 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
.

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
**10 17 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07-118**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St, Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~C&H Trucking~~

A. Transporter's Phone  
**767 449-2761**

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name  
**South Norfolk Trucking #30**

B. Transporter's Phone  
**767 487-4867**

8. US EPA ID Number  
**NOT REQUIRED**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

C. Facility's Phone  
**767 539-9373**

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description

a.	Beneficial Re-Use Soil/Calcium Hydroxide Mixture	12. Containers		13. Total	14. Unit
		No.	Type	Quantity	Wt/Vol
		001	DT	00020	T
b.					
c.					
d.					

12. Containers	13. Total	14. Unit
No.	Quantity	Wt/Vol
001	00020	T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
**Osage**

**Transactions#:** 13338 756  
**Actual Weight:** 22.49

16. 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.

Printed/Typed Name **RM Hart**

Signature *RM Hart*

Month Day Year  
- - -

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
- - -

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Wayne Bashaw**

Signature *Wayne Bashaw*

Month Day Year  
**5 17 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **[Signature]**

Signature *[Signature]*

Month Day Year  
**5 17 06**

GENERATOR  
TRANSPORTER  
FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **07-1-19**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~G&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transactions#:** *1333 8761*

**Actual Weight:** *22.26*

16. **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.

Printed/Typed Name *R M HART*

Signature *R M Hart*

Month Day Year  
*5 17 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *Steve Coulter*

Signature *Steve Coulter*

Month Day Year  
*5 17 06*

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
*5 17 06*

GENERATOR

TRANSPORTER

FACILITY



**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**0-1-1-2-1**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
<b>001</b>	<b>DT</b>

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transaction#:** *13338772*

**Actual Weight:** *18.80*

16. **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.

Printed/Typed Name

*R M Hayes*

Signature

*R M Hayes*

Month Day Year  
**5 | 17 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Alfred Robson*

Signature

*Alfred Robson*

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
**5 | 17 | 06**

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

0-11-82

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( 757 ) 445-8703

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~CNRMA~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001	DT	00020	T
.	.	.	.
.	.	.	.
.	.	.	.

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13338781**

**Project# 116539**

**Actual Weight: 19.92**

*Osage*

16. **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.

Printed/Typed Name

*BM Hart*

Signature

*BM Hart*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R. Cuffee*

Signature

*R. Cuffee*

Month Day Year

*15/17/06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*17/17/06*

TRANSPORTER

FACILITY

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:11 Tag:11 Transaction #: 13338414  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/17/06  
Time: 09:20  
Site: 13

-----  
REFUSE TYPE:ADC15-Gray So

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	68720	34.36	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	25340	12.67	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	43380	21.69		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15 Tag:15 Transaction #: 13338408  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/17/06  
Time: 09:16  
Site: 13

REFUSE TYPE:ADC15-Gray So

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	70940	35.47	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	27320	13.66	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	43620	21.81		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18  
Trailer:

Tag:18  
Tag:

Transaction #: 13338419  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/17/06  
Time: 09:29  
Site: 13

REFUSE TYPE:ADC15-Gray So

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	64480	32.24	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	25160	12.58	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	39320	19.66		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16  
Trailer:

Tag:16  
Tag:

Transaction #: 13338402  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/17/06  
Time: 09:11  
Site: 13

REFUSE TYPE:ADC15-Gray So

	LBS	TONS	
GROSS WEIGHT:	63740	31.87	SCALE:MAN WT
TARE WEIGHT:	27860	13.93	SCALE:(K)
NET WEIGHT:	35880	17.94	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN  
SERVICE  
P.O.  
CHESAPEAKE, VA 23320  
(757) 420-4700

LIC  
ITY  
6

Truck:14 Tag:14  
Trailer: Tag:

Transaction #: 13338427  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/17/06  
Time: 09:35  
Site: 13

REFUSE TYPE:ADC15-Gray So

	LBS	TONS	
GROSS WEIGHT:	68520	34.26	SCALE:MAN WT
TARE WEIGHT:	27020	13.51	SCALE:(K)
NET WEIGHT:	41500	20.75	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30 Tag:#30 Transaction #: 13338389  
Trailer: Tag: Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 08:59  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	60580	30.29	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25480	12.74	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	35100	17.55		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#34 Tag:#34 Transaction #: 13338398  
Trailer: Tag: Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC Date: 05/17/06  
2618A COLLEY AVENUE Time: 09:08  
NORFOLK VA 23517 Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT: 68080	34.04	SCALE:MAN	WT	Pyemt Type: Charge
TARE WEIGHT: 25960	12.98	SCALE:(K)		Origin: Offsite Waste Producer
NET WEIGHT: 42120	21.06			Dest: Regional Landfill
VOL: 0				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#33 Tag:#33 Transaction #: 13338406  
Trailer: Tag: Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 09:14  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	60980	30.49	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25920	12.96	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	35060	17.53		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29 Tag:#29 Transaction #: 13338416  
Trailer: Tag: Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 09:24  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	62780	31.39	SCALE:MAN WT
TARE WEIGHT:	26660	13.33	SCALE:(K)
NET WEIGHT:	36120	18.06	
VOL:	0		

Tran Type: Capitol Environmental  
Pynt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13338404  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 09:12  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT
GROSS WEIGHT:	62440	31.22	SCALE:(K)
TARE WEIGHT:	25760	12.88	
NET WEIGHT:	36680	18.34	
VOL:	0		

Tran Type: Osage of Virginia  
Pynt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: N/A  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30 Tag:#30 Transaction #: 13338459  
Trailer: Tag: Attendant ID: KS

Customer: 602723 Date: 05/17/06  
OSAGE OF VIRGINIA INC Time: 10:12  
2618A COLLEY AVENUE Site: 13  
NORFOLK VA 23517

REFUSE TYPE:ADC1575-Gray  
Tran Type: Osage of Virginia  
LBS TONS Pymt Type: Charge  
GROSS WEIGHT: 64920 32.46 SCALE:MAN WT Origin: Offsite Waste Producer  
TARE WEIGHT: 25480 12.74 SCALE: (K) Dest: Regional Landfill  
NET WEIGHT: 39440 19.72 State: VA MSW  
VOL: 0 Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13338471  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 10:25  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pynt Type: Charge
GROSS WEIGHT:	69460	34.73	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25960	12.98	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	43500	21.75		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13338475  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 10:28  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 63820 31.91 SCALE:MAN WT  
TARE WEIGHT: 25760 12.88 SCALE:(K)  
NET WEIGHT: 38060 19.03  
VOL: 0

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: N/A  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16  
Trailer:

Tag:16  
Tag:

Transaction #: 13338495  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/17/06  
Time: 10:42  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 67380 33.69 SCALE:MAN WT  
TARE WEIGHT: 27860 13.93 SCALE:(K)  
NET WEIGHT: 39520 19.76  
VOL: 0

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15  
Trailer:

Tag:15  
Tag:

Transaction #: 13338483  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/17/06  
Time: 10:35  
Site: 13

REFUSE TYPE:ADC15-Gray So

	LBS	TONS		
GROSS WEIGHT:	72880	36.44	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27320	13.66	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	45560	22.78		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29  
Trailer:

Tag:#29  
Tag:

Transaction #: 13338499  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 10:45  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	58380	29.19	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	26660	13.33	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	31720	15.86		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#33 Tag:#33 Transaction #: 13338501  
Trailer: Tag: Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 10:47  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	62580	31.29	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25920	12.96	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	36660	18.33		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS :

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:11 Tag:11 Transaction #: 13338506  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/17/06  
Time: 10:55  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pymt Type: Charge
GROSS WEIGHT:	70240	35.12	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25340	12.67	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	44900	22.45		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18  
Trailer:

Tag:18  
Tag:

Transaction #: 13338509  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/17/06  
Time: 10:58  
Site: 13

REFUSE TYPE:ADC15-Gray So

	LBS	TONS		
GROSS WEIGHT:	70720	35.36	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	25160	12.58	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	45560	22.78		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:14 Tag:14 Transaction #: 13338515  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/17/06  
Time: 11:03  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	73600	36.80	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	27020	13.51	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	46580	23.29		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#30                      Tag:#30                      Transaction #: 13338537  
Trailer:                      Tag:                      Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK                      VA      23517

Date: 05/17/06  
Time: 11:27  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	70800	35.40	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25480	12.74	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	45320	22.66		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#34 Tag:#34 Transaction #: 13338553  
Trailer: Tag: Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC Date: 05/17/06  
2618A COLLEY AVENUE Time: 11:46  
NORFOLK VA 23517 Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	71820	35.91	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25960	12.98	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	45860	22.93		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13338554  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 11:47  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	64140	32.07	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25760	12.88	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	38380	19.19		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: N/A
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

---

Truck:#33                      Tag:#33                      Transaction #: 13338557  
Trailer:                      Tag:                      Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC                      Date: 05/17/06  
2618A COLLEY AVENUE                      Time: 11:52  
NORFOLK                      VA      23517                      Site: 13

---

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pymt Type: Charge
GROSS WEIGHT: 63440	31.72	SCALE:MAN WT		Origin: Offsite Waste Producer
TARE WEIGHT: 25920	12.96	SCALE:(K)		Dest: Regional Landfill
NET WEIGHT: 37520	18.76			State: VA MSW
VOL: 0				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#29 Tag:#29 Transaction #: 13338560  
Trailer: Tag: Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 11:56  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	63940	31.97	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	26660	13.33	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	37280	18.64		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15  
Trailer:

Tag:15  
Tag:

Transaction #: 13338573  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/17/06  
Time: 12:07  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	75580	37.79	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	27320	13.66	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	48260	24.13		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:16 Tag:16 Transaction #: 13338574  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC. Date: 05/17/06  
15-C TROLLEY SQUARE Time: 12:09  
WILMINGTON DE 19806 Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pymt Type: Charge
GROSS WEIGHT:	71060	35.53	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27860	13.93	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	43200	21.60		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:11 Tag:11 Transaction #: 13338587  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/17/06  
Time: 12:23  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	71160	35.58	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	25340	12.67	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	45820	22.91		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14

Tag:14

Transaction #: 13338581

Trailer:

Tag:

Attendant ID: KS

Customer: 602719

CAPITOL ENVIRONMENTAL SERV, INC.

15-C TROLLEY SQUARE

WILMINGTON DE 19806

Date: 05/17/06

Time: 12:18

Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	73100	36.55	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27020	13.51	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	46080	23.04		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18 Tag:18 Transaction #: 13338588  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/17/06  
Time: 12:24  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	68500	34.25	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25160	12.58	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	43340	21.67		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13338601  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 12:42  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	69600	34.80	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25480	12.74	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	44120	22.06		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck: #34                      Tag: #34                      Transaction #: 13338622  
Trailer:                         Tag:                              Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK                      VA      23517

Date: 05/17/06  
Time: 13:08  
Site: 13

-----  
REFUSE TYPE: ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	72260	36.13	SCALE: MAN WT
TARE WEIGHT:	25960	12.98	SCALE: (K)
NET WEIGHT:	46300	23.15	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13338630  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 13:14  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	57980	28.99	SCALE:MAN WT
TARE WEIGHT:	25760	12.88	SCALE:(K)
NET WEIGHT:	32220	16.11	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: N/A  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29 Tag:#29 Transaction #: 13338624  
Trailer: Tag: Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 13:10  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	63300	31.65	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	26660	13.33	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	36640	18.32		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#33 Tag:#33 Transaction #: 13338631  
Trailer: Tag: Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 13:15  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pynt Type: Charge
GROSS WEIGHT:	52300	26.15	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25920	12.96	SCALE: (K)	Dest: Regional Landfill
NET WEIGHT:	26380	13.19		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:14 Tag:14 Transaction #: 13338650  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC. Date: 05/17/06  
15-C TROLLEY SQUARE Time: 13:34  
WILMINGTON DE 19806 Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pynt Type: Charge
GROSS WEIGHT:	70600	35.30	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27020	13.51	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	43580	21.79		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!



SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:15                      Tag:15                      Transaction #: 13338661  
Trailer:                      Tag:                      Attendant ID: KS

Customer: 602719                      Date: 05/17/06  
CAPITOL ENVIRONMENTAL SERV, INC.                      Time: 13:48  
15-C TROLLEY SQUARE                      Site: 13  
WILMINGTON                      DE                      19806

-----  
REFUSE TYPE:ADC1575-Gray

				Tran Type: Capitol Environmental
	LBS	TONS		Pymt Type: Charge
GROSS WEIGHT:	73080	36.54	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27320	13.66	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	45760	22.88		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:18                      Tag:18                                      Transaction #: 13338670  
Trailer:                      Tag:    Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.                                      Date: 05/17/06  
15-C TROLLEY SQUARE    Time: 13:56  
WILMINGTON                      DE                      19806                                      Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pymt Type: Charge
GROSS WEIGHT:	69140	34.57	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25160	12.58	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	43980	21.99		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:11  
Trailer:

Tag:11  
Tag:

Transaction #: 13338676  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/17/06  
Time: 14:02  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	69940	34.97	SCALE:MAN WT
TARE WEIGHT:	25340	12.67	SCALE:(K)
NET WEIGHT:	44600	22.30	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#30 Tag:#30 Transaction #: 13338685  
Trailer: Tag: Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 14:12  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pynt Type: Charge
GROSS WEIGHT:	68280	34.14	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25480	12.74	SCALE: (K)	Dest: Regional Landfill
NET WEIGHT:	42800	21.40		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13338693  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 14:19  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 61760 30.88 SCALE:MAN WT  
TARE WEIGHT: 25960 12.98 SCALE:(K)  
NET WEIGHT: 35800 17.90  
VOL: 0

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!



SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#33 Tag:#33  
Trailer: Tag:

Transaction #: 13338703  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 14:30  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	63100	31.55	SCALE:MAN WT
TARE WEIGHT:	25920	12.96	SCALE:(K)
NET WEIGHT:	37180	18.59	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#28                      Tag:#28                      Transaction #: 13338710  
Trailer:                      Tag:                      Attendant ID: KS  
  
Customer: 602723                      Date: 05/17/06  
OSAGE OF VIRGINIA INC                      Time: 14:36  
2618A COLLEY AVENUE                      Site: 13  
NORFOLK                      VA      23517  
-----

REFUSE TYPE:ADC1575-Gray  
  
Tran Type: Osage of Virginia  
Pymt Type: Charge  
GROSS WEIGHT: 62200 LBS      31.10 TONS      SCALE:MAN WT      Origin: Offsite Waste Producer  
TARE WEIGHT: 25760      12.88      SCALE:(K)      Dest: Regional Landfill  
NET WEIGHT: 36440      18.22      State: N/A  
VOL:      0      Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:14                      Tag:14                      Transaction #: 13338718  
Trailer:                      Tag:                      Attendant ID: KS  
  
Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.                      Date: 05/17/06  
15-C TROLLEY SQUARE                      Time: 14:47  
WILMINGTON                      DE                      19806                      Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

				Tran Type: Capitol Environmental
	LBS	TONS		Pynt Type: Charge
GROSS WEIGHT:	74440	37.22	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27020	13.51	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	47420	23.71		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16  
Trailer:

Tag:16  
Tag:

Transaction #: 13338721  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/17/06  
Time: 14:57  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT
GROSS WEIGHT:	66120	33.06	SCALE:(K)
TARE WEIGHT:	27860	13.93	
NET WEIGHT:	38260	19.13	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:18 Tag:18 Transaction #: 13338742  
Trailer: Tag: Attendant ID: KS

Customer: 602719 Date: 05/17/06  
CAPITOL ENVIRONMENTAL SERV, INC. Time: 15:21  
15-C TROLLEY SQUARE Site: 13  
WILMINGTON DE 19806

-----  
REFUSE TYPE:ADC1575-Gray

				Tran Type: Capitol Environmental
	LBS	TONS		Pymt Type: Charge
GROSS WEIGHT:	69480	34.74	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25160	12.58	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	44320	22.16		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:15 Tag:15 Transaction #: 13338745  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/17/06  
Time: 15:25  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	73040	36.52	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	27320	13.66	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	45720	22.86		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:11 Tag:11 Transaction #: 13338747  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC. Date: 05/17/06  
15-C TROLLEY SQUARE Time: 15:29  
WILMINGTON DE 19806 Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	70900	35.45	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25340	12.67	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	45560	22.78		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13338756  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 15:41  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 70460 35.23 SCALE:MAN WT  
TARE WEIGHT: 25480 12.74 SCALE:(K)  
NET WEIGHT: 44980 22.49  
VOL: 0

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34

Tag:#34

Transaction #: 13338761

Trailer:

Tag:

Attendant ID: KS

Customer: 602723

OSAGE OF VIRGINIA INC

Date: 05/17/06

2618A COLLEY AVENUE

Time: 15:44

NORFOLK

VA 23517

Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pymt Type: Charge
GROSS WEIGHT:	70480	35.24	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25960	12.98	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	44520	22.26		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29  
Trailer:

Tag:#29  
Tag:

Transaction #: 13338762  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 15:45  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	63820	31.91	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	26660	13.33	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	37160	18.58		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#33                      Tag:#33                      Transaction #: 13338772  
Trailer:                      Tag:                      Attendant ID: KS  
  
Customer: 602723                      Date: 05/17/06  
OSAGE OF VIRGINIA INC                      Time: 15:52  
2618A COLLEY AVENUE                      Site: 13  
NORFOLK                      VA      23517  
-----

REFUSE TYPE:ADC1575-Gray  
  
Tran Type: Osage of Virginia  
Pynt Type: Charge  
GROSS WEIGHT: 63520    LBS    TONS    SCALE:MAN WT    Origin: Offsite Waste Producer  
TARE WEIGHT: 25920    12.96    SCALE:(K)    Dest: Regional Landfill  
NET WEIGHT: 37600    18.80    State: VA MSW  
VOL:                      0                      Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13338781  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/17/06  
Time: 16:12  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	65600	32.80	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25760	12.88	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	39840	19.92		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: N/A
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

May 18, 2006

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01123**

2. Page 1  
of **1**

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~CHH Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #30**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transaction#:**

**13338899**

**Actual Weight:**

**20.90**

16. **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.

Printed/Typed Name

*RM HART*

Signature

*RM HART*

Month Day Year

**5 18 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. . .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bashaw*

Signature

*Wayne Bashaw*

Month Day Year

**5 18 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**5 18 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **0-1-1-24**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Usage*

**Transaction# 13338902**

**Actual Weight: 18.97**

16. **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.

Printed/Typed Name

*BM HART*

Signature

*[Signature]*

Month Day Year

**5 | 18 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. | . | .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R. CUFFEE*

Signature

*R. Cuffee*

Month Day Year

**5 | 18 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**5 | 17 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**87-1-25**

2. Page 1  
of **1**

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 1333 8905**

**Project# 116539**

**Actual Weight: 21.94**

*O sase*

16. **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.

Printed/Typed Name **R M HART**

Signature *[Signature]*

Month Day Year  
**5 18 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **Steve Couch er**

Signature *[Signature]*

Month Day Year  
**5 18 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
**5 18 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
*07726*

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~CNH Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13338912*

**Project# 116539**

**Actual Weight:**

*Osage*

*18.33*

16. **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.

Printed/Typed Name

*R M HANT*

Signature

*R M HANT*

Month Day Year

*5 18 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Alfred [Signature]*

Signature

*[Signature]*

Month Day Year

*5 18 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*5 18 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

07727

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **446-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

# 14

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
001	DT

13. Total Quantity

00020

14. Unit Wt/Vol

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

13338911

**Actual Weight:**

22.24

16. **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.

Printed/Typed Name

*B M Hart*

Signature

*B M Hart*

Month Day Year

5 | 18 | 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Quinton Cross*

Signature

*Quinton Cross*

Month Day Year

5 | 18 | 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

. | . | .

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

5 | 18 | 06

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. *07728*

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*0 sage*

**Transaction#:** *13338914*

**Actual Weight:** *18.38*

16. **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.

Printed/Typed Name

*R M HART*

Signature

*R M HART*

Month Day Year

*15 18 10 6*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . . . .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Dawn Edwards*

Signature

*Dawn Edwards*

Month Day Year

*15 18 10 6*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

Month Day Year

*15 18 10 6*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01129**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **446-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Atlantic Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

*#16*

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

*1333 8917*

**Actual Weight:**

*18.15*

16. **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.

Printed/Typed Name

*BM HANT*

Signature

*BM HANT*

Month Day Year

*15 18 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*C. Bates*

Signature

*Lydie Bates*

Month Day Year

*15 18 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*15 18 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07-130**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **446-8703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name **C&H Trucking** *15*      6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name ~~South Norfolk Trucking~~      8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers      13. Total      14. Unit  
No.      Type      Quantity      Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**      **DT**      **00020**      **T**

b.

.

c.

.

d.

.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:** *13338927*

**Actual Weight:** *21.75*

16. 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.

Printed/Typed Name *BM Hart*

Signature *BM Hart*

Month Day Year  
*15 18 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Erin Wiggins*

Signature *Erin Wiggins*

Month Day Year  
*15 18 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
*17 18 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **0-1-1-3-1**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *1333 8932*

**Project#** *116539*

**Actual Weight:**

*Capitol*

*20.47*

16. **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.

Printed/Typed Name

*R M HART*

Signature

*[Signature]*

Month Day Year

*15 18 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R W FALLS*

Signature

*[Signature]*

Month Day Year

*15 18 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*15 18 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
*07.7.32*

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**COH-Trucking** *Turner Trucking*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

*757-735-2184*

**757 449-6761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13338945*

**Project# 116539**

**Actual Weight:**

*16.96*

*Capitol*

16. **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.

Printed/Typed Name

*R M HANS*

Signature

*[Signature]*

Month Day Year  
*5 | 18 | 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year  
*5 | 18 | 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
*. | . | .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
*7 | 18 | 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **07-7-33**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~**GM Trucking**~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #30**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
<b>001</b>	<b>DT</b>

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transactions#:**

**133338968**

**Actual Weight:**

**20.81**

16. **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.

Printed/Typed Name

*BM HART*

Signature

*[Signature]*

Month Day Year

**15 18 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. . .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bashaw*

Signature

*Wayne Bashaw*

Month Day Year

**15 18 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**15 18 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **0.7.13.4**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~CNH Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking**

**#28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transaction#: 13338973**

**Actual Weight: 18.11**

16. **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.

Printed/Typed Name

*R M Hart*

Signature

*R M Hart*

Month Day Year

**5 | 18 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**· | · | ·**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R. CUFFEE*

Signature

*R. Cuffee*

Month Day Year

**5 | 18 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**5 | 18 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **07135**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

**#14**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

**1333 8974**

**Actual Weight:**

**21.67**

16. **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.

Printed/Typed Name

*R M Hart*

Signature

*R M Hart*

Month Day Year

**1 5 18 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Quinton Cross*

Signature

*Quinton Cross*

Month Day Year

**1 5 18 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. . .**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**1 5 18 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01136**

2. Page 1 of **1**

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116639**

*Osage*

**Transaction#:** *13338979*

**Actual Weight:** *21.76*

16. **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.

Printed/Typed Name

*RM HART*

Signature

*[Signature]*

Month Day Year

*15 | 18 | 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. | . | .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Coacher*

Signature

*[Signature]*

Month Day Year

*15 | 18 | 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*15 | 18 | 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01737**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703** Attn: **Rob Schonk**

5. Transporter 1 Company Name  
~~CMT Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001 DT 00020 T**

b.

.

c.

.

d.

.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
*Osage*

Transaction#: **13338986**  
Actual Weight: **17.87**

16. 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.

Printed/Typed Name **BM HART**

Signature *[Signature]* Month Day Year **5 18 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A** Month Day Year . . .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *[Signature]*

Signature *[Signature]* Month Day Year **5 18 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]* Month Day Year **5 18 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

07-139

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( 757 )

445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

~~GMH Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757 449-2761

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

757 487-4867

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757 639-9373

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

001

DT

00020

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: 13338988

Project# 116539

Actual Weight: 17.71

Usage

16. 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.

Printed/Typed Name

RM HART

Signature

*RM Hart*

Month Day Year

5 18 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

N/A

Signature

N/A

Month Day Year

. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Dawn Edwards

Signature

*Dawn Edwards*

Month Day Year

5 18 06

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

5 18 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**0.7.1.3.9**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-8703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**      *#16*

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

a.	<b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>
b.	
c.	
d.	

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13338990*

**Project#** **116539**      **Actual Weight:** *19.19*

*Capitol*

16. **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.

Printed/Typed Name *RM Hart*      Signature *[Signature]*      Month **15** Day **18** Year **06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *C. Bates*      Signature *[Signature]*      Month **15** Day **18** Year **06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*      Signature *N/A*      Month **.** Day **.** Year **.**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*      Signature *[Signature]*      Month **9** Day **18** Year **06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01-1-90

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( 757 ) 445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

**C&H Trucking**

# 15

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

001 DT

13. Total Quantity

00020

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Capitol

Transaction#:

13339001

Actual Weight:

22.47

16. 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.

Printed/Typed Name

*B. M. HART*

Signature

*B. M. Hart*

Month Day Year

15 18 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Ervin Wiggins*

Signature

*Ervin Wiggins*

Month Day Year

15 18 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

N/A

Signature

N/A

Month Day Year

. . .

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

17 18 06

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01747

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capital*

**Transaction#:** *13339017*

**Actual Weight:** *22.45*

16. **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.

Printed/Typed Name

*RM HART*

Signature

*[Signature]*

Month Day Year

*5 19 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*RW Falls*

Signature

*[Signature]*

Month Day Year

*5 18 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*5 18 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **07143**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **446-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

*314*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *1333 9032*

**Project# 116539**

**Actual Weight:**

*Capitol*

*22.29*

16. **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.

Printed/Typed Name

*BM Harris*

Signature

*[Signature]*

Month Day Year  
**5 | 18 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Quinton Cross*

Signature

*[Signature]*

Month Day Year  
**5 | 18 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
**. | . | .**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
**5 | 18 | 06**

GENERATOR

TRANSPORTER

FACILITY

11111111

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. **017199**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**OFF-HOURS**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #30**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit

Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**1333 9045**

**Actual Weight:**

**21.43**

*Usage*

16. 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.

Printed/Typed Name

*R M HART*

Signature

*R M HART*

Month Day Year

**5 18 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bashaw*

Signature

*Wayne Bashaw*

Month Day Year

**5 18 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**5 18 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**011745**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking #28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transaction#:** **13339049**

**Actual Weight:** **16.69**

16. **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.

Printed/Typed Name

*RM HART*

Signature

*RM HART*

Month Day Year

**5 18 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. . .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R. CUFFEE*

Signature

*R. Cuffee*

Month Day Year

**5 18 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**5 18 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **07-1-96**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
<b>001</b>	<b>DT</b>

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Usage*

**Transaction#:**

**13339073**

**Actual Weight:**

**17.81**

16. **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.

Printed/Typed Name

**R.M. HART**

Signature

*R.M. Hart*

Month Day Year

**15 19 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**. . .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Steve Coulter**

Signature

*Steve Coulter*

Month Day Year

**15 18 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**7 18 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01197

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~GM Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*usage*

**Transaction#:**

**13339059**

**Actual Weight:**

**16.77**

16. **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.

Printed/Typed Name

*RM HART*

Signature

*[Signature]*

Month Day Year  
**5 18 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Alfred Larson*

Signature

*[Signature]*

Month Day Year  
**5 18 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
**5 18 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest  
Document No. **07.1.4.8**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23611-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      Attn: **Rob Schonk**

5. Transporter 1 Company Name  
~~C&H Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2781**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No.      Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
  
**Project# 116539**  
  
*usage*

**Transaction#:** *13339070*  
**Actual Weight:** *14.93*

16. **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.

Printed/Typed Name *BM Hart*

Signature *[Signature]*

Month Day Year  
*13 18 06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *R/R*

Signature *N/A*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Dawn Edwards*

Signature *[Signature]*

Month Day Year  
*15 18 06*

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
*17 18 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01149

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schenk**

5. Transporter 1 Company Name **C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name **South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

001

DT

00020

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13339092**

**Project# 116539**

**Actual Weight:**

*Capitol*

*Actual Weight = 18.02*

16. **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.

Printed/Typed Name

*RM Harri*

Signature

*RM Harri*

Month Day Year

5 18 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Edwin Wiggins*

Signature

*Edwin Wiggins*

Month Day Year

5 18 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

. . .

19. Discrepancy Indication Space

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

Printed/Typed Name

*TA*

Signature

*TA*

Month Day Year

5 18 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **07-1-50**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: MNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~Scott Wilson Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

**13339097**

**Actual Weight:**

**15.73**

16. 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.

Printed/Typed Name

*B M HART*

Signature

*B M HART*

Month Day Year

**5 | 18 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*C. Bates*

Signature

*C. Bates*

Month Day Year

**5 | 18 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. | . | .**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**5 | 18 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01131

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

*13339102*

**Actual Weight:**

*17.45*

16. **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.

Printed/Typed Name

*R M HOLT*

Signature

*R M Holt*

Month Day Year  
*5 18 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*W Falls*

Signature

*W Falls*

Month Day Year  
*5 18 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Seef*

Signature

*Donna Seef*

Month Day Year  
*05 18 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01-152**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

**#14**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13339112**

**Project# 116539**

**Actual Weight:**

**Capitol**

**18.11**

16. **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.

Printed/Typed Name

**R. M. HART**

Signature

*[Signature]*

Month Day Year

**5 | 18 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Quinton Cross**

Signature

*[Signature]*

Month Day Year

**5 | 18 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**. | . | .**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**05 | 18 | 06**

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01133**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

*FR 15*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** 13339160

**Project# 116539**

**Actual Weight:**

*Capitol*

*18.73*

16. **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.

Printed/Typed Name

*R. M. Haro*

Signature

*[Signature]*

Month Day Year

*5 18 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Ervin Wiggins*

Signature

*[Signature]*

Month Day Year

*5 18 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

Month Day Year

*5 18 06*

GENERATOR

TRANSPORTER

FACILITY

4441

**NON-HAZARDOUS WASTE MANIFEST**      1. Generator's US EPA ID No. **NOT REQUIRED**      Manifest Document No. **01-133**      2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
 4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**  
**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name **C&H Trucking**      6. US EPA ID Number **NOT REQUIRED**      A. Transporter's Phone **757 449-2781**

7. Transporter 2 Company Name **South Norfolk Trucking #30**      8. US EPA ID Number **NOT REQUIRED**      B. Transporter's Phone **757 487-4887**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill**  
**1 Bob Foeller Drive**  
**Suffolk, VA 23434**      10. US EPA ID Number **NOT REQUIRED**      C. Facility's Phone **757 639-9373**

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. <b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.	.	.	.	.
c.	.	.	.	.
d.	.	.	.	.

D. Additional Descriptions for Materials Listed Above      E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**      **Transactions# 13339125**  
**Usage**      **Actual Weight: 14.77**

16. 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.

Printed/Typed Name **RM HART**      Signature **[Signature]**      Month **15** Day **18** Year **06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name **N/A**      Signature **N/A**      Month **.** Day **.** Year **.**

18. Transporter 2 Acknowledgement of Receipt of Materials  
 Printed/Typed Name **Wayne Bashaw**      Signature **Wayne Bashaw**      Month **12** Day **18** Year **04**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Siff**      Signature **[Signature]**      Month **05** Day **18** Year **06**

GENERATOR  
TRANSPORTER  
FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
*01-1-35*

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~GHI Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #28**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
001	DT	00020	T
.	.	.	.
.	.	.	.
.	.	.	.
.	.	.	.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** 13339129

**Project# 116539**

**Actual Weight:** 15.39

*Usage*

16. **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.

Printed/Typed Name *R M HART*

Signature *[Signature]*

Month Day Year  
*5 18 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
*.*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *R. CUFFEE*

Signature *[Signature]*

Month Day Year  
*5 18 06*

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
*05 18 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
*01-1-06*

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~**G&H Trucking**~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13339133*

**Project# 116539**

**Actual Weight:**

*15.16*

*Usage*

16. **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.

Printed/Typed Name

*DM HART*

Signature

*[Signature]*

Month Day Year

*5 | 19 | 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. | . | .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wesley Gibson*

Signature

*[Signature]*

Month Day Year

*5 | 18 | 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Deann Sepp*

Signature

*[Signature]*

Month Day Year

*05 | 18 | 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01157**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~East Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2781**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol		
			Type	
a. <b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions: 1333 9144**

**Project# 116539**

**Actual Weight:**

*Usage*

*14.49*

16. **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.

Printed/Typed Name *R M Hart*

Signature *R M Hart*

Month Day Year  
*15 | 18 | 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
*. | . | .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *Dawn Edwards*

Signature *Dawn Edwards*

Month Day Year  
*15 | 18 | 06*

19. Discrepancy Indication Space

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

Printed/Typed Name *D Seap*

Signature *D Seap*

Month Day Year  
*05 | 18 | 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01158**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
~~**GM Trucking**~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers

	No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. <b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** **13339151**

**Project# 116539**      **Actual Weight:** **17.20**

*Usage*

16. 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.

Printed/Typed Name *RM HART*      Signature *[Signature]*      Month Day Year **15/18/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*      Signature *N/A*      Month Day Year . . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *Steve Coutner*      Signature *Steve Coutner*      Month Day Year **15/18/06**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*      Signature *[Signature]*      Month Day Year **05/18/06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**0-1-1-59**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total	14. Unit
No.	Type	Quantity	Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
------------	-----------	--------------	----------

b.			
c.			
d.			

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** **13339188**

**Project# 116539**

**Actual Weight:**

*Capital*

*20.08*

16. **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.

Printed/Typed Name **R McHART**

Signature *R McHART*

Month Day Year  
**5 | 18 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **SW FALLS**

Signature *SW FALLS*

Month Day Year  
**5 | 18 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
**. | . | .**

19. Discrepancy Indication Space

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

Printed/Typed Name **D Sepp**

Signature *D Sepp*

Month Day Year  
**05 | 18 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01760**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

*TH14*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13339198*

**Project# 116539**

**Actual Weight:** *20.89*

*Capitol*

16. **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.

Printed/Typed Name *R. M. Hays*

Signature *R. M. Hays*

Month Day Year  
*15 18 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *G. Cross*

Signature *G. J. Cross*

Month Day Year  
*15 18 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
*15 18 06*

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
*15 18 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**0-1-1-6-1**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

**Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Capitol**

**Transaction#:**

**1333 9194**

**Actual Weight:**

**17.70**

16. **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.

Printed/Typed Name

**B M HART**

Signature

*B M Hart*

Month Day Year

**5 18 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**C. BATES**

Signature

*Clyde Bates*

Month Day Year

**5 18 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**n/a**

Month Day Year

**. . .**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Sepp**

Signature

*D Sepp*

Month Day Year

**5 18 06**

GENERATOR

TRANSPORTER

FACILITY

HHT 1

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. **0-1-1-62**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703** Attn: **Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #30**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001 DT 00020 T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#:

**13339220**

Project# **116539**

Actual Weight:

**20.86**

*Osage*

16. 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.

Printed/Typed Name **RM Hant**

Signature *RM Hant*

Month Day Year **5 18 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature *N/A*

Month Day Year . . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **Wayne Barkaw**

Signature *Wayne Barkaw*

Month Day Year **5 18 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Seff**

Signature *Donna Seff*

Month Day Year **05 18 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01103**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~C&H Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #28**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
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a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** 13339223

**Project#** 116539

**Actual Weight:** 17.02

*Osage*

16. **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.

Printed/Typed Name *R M Hantz*

Signature *[Signature]*

Month Day Year  
**5 18 06**

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *R. CUFFEE*

Signature *R. Cuffee*

Month Day Year  
**5 18 06**

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sage*

Signature *[Signature]*

Month Day Year  
**05 18 06**

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01764**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~**CAH Trucking**~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
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a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** **13339236**

**Project# 116539**

**Actual Weight:** **16.90**

*Osage*

16. **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.

Printed/Typed Name **R M HART**

Signature *[Signature]*

Month Day Year  
**5 | 18 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
**. | . | .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
**5 | 18 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
**05 | 18 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01165**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~Carl Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-8373**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.			
c.			
d.			

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** **13339232**

**Project# 116539**

**Actual Weight:**  
**17.34**

*Osage*

16. **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.

Printed/Typed Name **RM Hart**

Signature *[Signature]*

Month Day Year  
**5 | 18 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
. | . | .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **Dawn Edwards**

Signature *[Signature]*

Month Day Year  
**5 | 18 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **DSool**

Signature *[Signature]*

Month Day Year  
**05 | 18 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
0-1-1-66

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~G&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: **13339241**

Project# **118539**

Actual Weight: **20.18**

*Osage*

16. 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.

Printed/Typed Name

*R M Harts*

Signature

*R M Harts*

Month Day Year

**15 | 18 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**· | · | ·**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Couther*

Signature

*Steve Couther*

Month Day Year

**15 | 18 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*D. G. ...*

Signature

*D. G. ...*

Month Day Year

**05 | 18 | 06**

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **07767**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~ **Turner Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**735-2784**

**757 445-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 1333 9243**

**Project# 116539**

**Actual Weight:**

*Capital*

*19.44*

16. **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.

Printed/Typed Name

*B M Hart*

Signature

*B M Hart*

Month Day Year

*5 18 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Rhen M. Roundtree*

Signature

*Rhen M. Roundtree*

Month Day Year

*5 18 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*D Sepp*

Signature

*D Sepp*

Month Day Year

*05 18 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01168**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

*#15*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13339268*

**Project#** *116639*

**Actual Weight:**

*Capital*

*21.35*

16. **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.

Printed/Typed Name

*R M Harris*

Signature

*R M Harris*

Month Day Year

*15 18 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Erin Wiggins*

Signature

*Erin Wiggins*

Month Day Year

*15 18 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*D Soap*

Signature

*D Soap*

Month Day Year

*05 18 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **07-1-69**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

*#16*

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116639**

*Capitol*

**Transaction#:**

**13339272**

**Actual Weight:**

**17.14**

16. **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.

Printed/Typed Name

*RM HART*

Signature

*RM HART*

Month Day Year

**5 | 18 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*C. Bates*

Signature

*C. Bates*

Month Day Year

**5 | 18 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. | . | .**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**12 | 18 | 08**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01-1-70

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions#:** 13339283

**Project# 116539**

**Actual Weight:**

Capitol

21.22

16. **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.

Printed/Typed Name

*RM Hart*

Signature

*RM Hart*

Month Day Year

15 | 18 | 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*HW Falls*

Signature

*HW Falls*

Month Day Year

15 | 18 | 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

. | . | .

19. Discrepancy Indication Space

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

Printed/Typed Name

*D. Sepp*

Signature

*D. Sepp*

Month Day Year

05 | 18 | 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01-77-1

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

*14*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capital*

**Transaction#:**

*13339293*

**Actual Weight:**

*21.70*

16. **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.

Printed/Typed Name

*RM HART*

Signature

*[Signature]*

Month Day Year

*15 18 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Quinton Cross*

Signature

*[Signature]*

Month Day Year

*15 18 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*05 18 06*

GENERATOR

TRANSPORTER

FACILITY

11/11

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

07-7-72

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking #30**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transaction#:**

**13339323**

**Actual Weight:**

**19.87**

16. **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.

Printed/Typed Name

*RM HART*

Signature

*RM Hart*

Month Day Year

**15 18 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**15 18 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bashaw*

Signature

*Wayne Bashaw*

Month Day Year

**15 18 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Dan Samp*

Signature

*Dan Samp*

Month Day Year

**05 18 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **8.7.7.3**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~CMT Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
<b>001</b>	<b>DT</b>

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13339325**

**Project# 116639**

**Actual Weight: 16.50**

*Osage*

16. **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.

Printed/Typed Name

*R M HART*

Signature

*R M HART*

Month Day Year

*15 18 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R. CUFFEE*

Signature

*R. Cuffee*

Month Day Year

*15 18 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*05 18 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01174

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~ *Turner Trucking*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

~~757 449-2784~~ *735-2784*

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

*13339332*

**Actual Weight:**

*18.12*

16. **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.

Printed/Typed Name

*R M HART*

Signature

*R M HART*

Month Day Year

*15 18 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Glen M Roundtree*

Signature

*Glen M Roundtree*

Month Day Year

*15 18 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*.*

19. Discrepancy Indication Space

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

Printed/Typed Name

*D. Seed*

Signature

*D. Seed*

Month Day Year

*10 25 07*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**117775**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~**GM Trucking**~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transactions#:**

**13339335**

**Actual Weight:**

**15.65**

16. **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.

Printed/Typed Name

*RM HART*

Signature

*RM HART*

Month Day Year

**5 18 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**5 18 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Dawn Edwards*

Signature

*Dawn Edwards*

Month Day Year

**5 18 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**5 18 06**

GENERATOR  
TRANSPORTER  
FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

0.1.1.1.6

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **446-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

**Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** 13339351

**Project# 116539**

**Actual Weight:**

*Osage*

*16.12*

16. **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.

Printed/Typed Name

*R M HART*

Signature

*[Signature]*

Month Day Year

*5 18 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*5 18 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*5 18 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED** Manifest Document No. **0-1-1-79**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703** Attn: **Rob Schonk**

5. Transporter 1 Company Name  
~~G&H Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2781**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. <b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b. . . . .	.	. . . . .	.
c. . . . .	.	. . . . .	.
d. . . . .	.	. . . . .	.

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

b. . . . .

c. . . . .

d. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539** **Transaction# 13339354**  
**Usage** **Actual Weight: 19.86**

16. 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.

Printed/Typed Name **BM Hart**

Signature *[Signature]*

Month Day Year  
**5 18 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Steve Couther**

Signature *[Signature]*

Month Day Year  
**5 18 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **D Saoo**

Signature *[Signature]*

Month Day Year  
**05 18 06**

GENERATOR  
TRANSPORTER  
FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-1-78**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

*7/16*

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: **13339368**

Project# **116539**

Actual Weight: **17.07**

*Capitol*

16. **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.

Printed/Typed Name

*R M Harty*

Signature

*R M Harty*

Month Day Year  
**5 18 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*C. Bates*

Signature

*C. Bates*

Month Day Year  
**5 18 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
**5 18 06**

19. Discrepancy Indication Space.

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

Printed/Typed Name

*D Sapp*

Signature

*D Sapp*

Month Day Year  
**05/18/06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID.No.

**NOT REQUIRED**

Manifest Document No. *157-179*

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( *757* ) *445-6703*

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

*#15*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13339307*

**Project#** *116639*

**Actual Weight:** *20,50*

*Capitol*

16. **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.

Printed/Typed Name

*BM Hines*

Signature

*[Signature]*

Month Day Year

*5 18 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Kevin Wiggins*

Signature

*[Signature]*

Month Day Year

*5 18 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*D Saep*

Signature

*[Signature]*

Month Day Year

*09 18 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-180**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~**South Norfolk Trucking**~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:** *13339371*

**Actual Weight:** *20.13*

16. **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.

Printed/Typed Name

*RM HUNT*

Signature

*RM HUNT*

Month Day Year

*5 18 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

*5 18 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space.

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

Printed/Typed Name

*Dennis Sapp*

Signature

*D Sapp*

Month Day Year

*05 18 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01191

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&T Trucking~~ **Turner Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757-449-2761**

7. Transporter 2 Company Name

~~South-Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757-487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757-539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

b.  
c.  
d.

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:**

**Project# 116539**

**Actual Weight:**

*Capitol*

*TON 21.67*

16. 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.

Printed/Typed Name

*B M Adams*

Signature

*B M Adams*

Month Day Year

*15 18 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Glen M. Roundtree*

Signature

*Glen M. Roundtree*

Month Day Year

*5 18 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*D. Dean*

Signature

*D. Dean*

Month Day Year

*05 18 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01182

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116639**

*Osage*

**Transaction#:** 13339403

**Actual Weight:** 15.43

16. **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.

Printed/Typed Name

*RM HART*

Signature

*[Signature]*

Month Day Year

5 18 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*ALFRED RIBBSON*

Signature

*[Signature]*

Month Day Year

5 18 06

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

5 18 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-183**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking #28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Ozase*

**Transactions# 13339398**

**Actual Weight: 16.74**

16. **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.

Printed/Typed Name

*B M HART*

Signature

*B M HART*

Month Day Year

**5 18 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R CUFFEE*

Signature

*R Cuffee*

Month Day Year

**5 18 06**

19. Discrepancy Indication Space.

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

Printed/Typed Name

*D. Sore*

Signature

*D. Sore*

Month Day Year

**5 18 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01184**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757-449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757-487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757-639-9373**

11. Waste Shipping Name and Description

a. **Benzene Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13339406**

**Project# 116639**

**Actual Weight: 19.78**

**Osage**

16. 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.

Printed/Typed Name

**R M HANS**

Signature

*[Signature]*

Month Day Year

**5 18 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Steve Cauther**

Signature

*[Signature]*

Month Day Year

**5 18 06**

19. Discrepancy Indication Space.

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

Printed/Typed Name

**D. Sene**

Signature

*[Signature]*

Month Day Year

**05 18 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

07795

2. Page 1

of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **446-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #30**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

00020

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transaction#:**

**13339400**

**Actual Weight:**

**18.54**

16. **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.

Printed/Typed Name

*R M Hart*

Signature

*R M Hart*

Month Day Year

5 | 18 | 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

. | . | .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bashaw*

Signature

*Wayne Bashaw*

Month Day Year

5 | 18 | 06

19. Discrepancy Indication Space

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

Printed/Typed Name

*D. Sosa*

Signature

*D. Sosa*

Month Day Year

5 | 18 | 06

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**0-1-18-6**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

~~767-449-2761~~

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767-487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767-539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:**

**Project# 116539**

**Actual Weight:**

**17.17**

*Osage*

16. **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.

Printed/Typed Name

*Jim Hant*

Signature

*[Signature]*

Month Day Year

**15 18 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*n/a*

Signature

*n/a*

Month Day Year

**15 18 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Dawn Edwards*

Signature

*[Signature]*

Month Day Year

**15 18 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*[Signature]*

Month Day Year

**05 18 06**

GENERATOR

TRANSPORTER

FACILITY

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#30                      Tag:#30                      Transaction #: 13338899  
Trailer:                      Tag:                      Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC                      Date: 05/18/06  
2618A COLLEY AVENUE                      Time: 07:22  
NORFOLK                      VA    23517                      Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pynt Type: Charge
GROSS WEIGHT:	67280	33.64	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25480	12.74	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	41800	20.90		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!



SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34

Tag:#34

Transaction #: 13338905

Trailer:

Tag:

Attendant ID: KS

Customer: 602723

OSAGE OF VIRGINIA INC

2618A COLLEY AVENUE

NORFOLK

VA

23517

Date: 05/18/06

Time: 07:33

Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	69840	34.92	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25960	12.98	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	43880	21.94		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS :

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#33  
Trailer:

Tag:#33  
Tag:

Transaction #: 13338912  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 07:44  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 62580 31.29 SCALE:MAN WT  
TARE WEIGHT: 25920 12.96 SCALE:(K)  
NET WEIGHT: 36660 18.33  
VOL: 0

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:14 Tag:14 Transaction #: 13338911  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC. Date: 05/18/06  
15-C TROLLEY SQUARE Time: 07:42  
WILMINGTON DE 19806 Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	71500	35.75	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	27020	13.51	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	44480	22.24		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29  
Trailer:

Tag:#29  
Tag:

Transaction #: 13338914  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 07:46  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	63420	31.71	SCALE:MAN WT
TARE WEIGHT:	26660	13.33	SCALE:(K)
NET WEIGHT:	36760	18.38	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16 Tag:16  
Trailer: Tag:

Transaction #: 13338917  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 07:50  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pynt Type: Charge
GROSS WEIGHT:	64160	32.08	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27860	13.93	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	36300	18.15		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:15                      Tag:15                                      Transaction #: 13338927  
Trailer:                        Tag:    Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.                                      Date: 05/18/06  
15-C TROLLEY SQUARE    Time: 08:00  
WILMINGTON                      DE      19806    Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pymt Type: Charge
GROSS WEIGHT:	70820	35.41	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27320	13.66	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	43500	21.75		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18  
Trailer:

Tag:18  
Tag:

Transaction #: 13338932  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 08:09  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 66100 33.05 SCALE:MAN WT  
TARE WEIGHT: 25160 12.58 SCALE:(K)  
NET WEIGHT: 40940 20.47  
VOL: 0

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:13 Tag:13  
Trailer: Tag:

Transaction #: 13338945  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 08:20  
Site: 13

REFUSE TYPE:ADC1575-Gray Soils  
RATE: \$15.75 / tn  
LBS TONS  
GROSS WEIGHT: 60620 30.31 SCALE:MAN WT  
TARE WEIGHT: 26700 13.35 SCALE:(K)  
NET WEIGHT: 33920 16.96  
VOL: 0  
Tran Type: Waste Disposal - Credit  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

TRANSACTION AMOUNT: \$267.12

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30 Tag:#30 Transaction #: 13338968  
Trailer: Tag: Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 08:51  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	67100	33.55	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25480	12.74	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	41620	20.81		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13338973  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 08:56  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	61980	30.99	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25760	12.88	SCALE: (K)	Pynt Type: Charge
NET WEIGHT:	36220	18.11		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: N/A
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13338974  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 08:57  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	70360	35.18	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27020	13.51	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	43340	21.67		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13338979  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 09:04  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 69480 34.74 SCALE:MAN WT  
TARE WEIGHT: 25960 12.98 SCALE:(K)  
NET WEIGHT: 43520 21.76  
VOL: 0

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#33  
Trailer:

Tag:#33  
Tag:

Transaction #: 13338986  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 09:12  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT
GROSS WEIGHT:	61660	30.83	SCALE:(K)
TARE WEIGHT:	25920	12.96	
NET WEIGHT:	35740	17.87	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29  
Trailer:

Tag:#29  
Tag:

Transaction #: 13338988  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 09:13  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT
GROSS WEIGHT:	62080	31.04	SCALE:(K)
TARE WEIGHT:	26660	13.33	
NET WEIGHT:	35420	17.71	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16  
Trailer:

Tag:16  
Tag:

Transaction #: 13338992  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 09:16  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	66240	33.12	SCALE:MAN WT
TARE WEIGHT:	27860	13.93	SCALE:(K)
NET WEIGHT:	38380	19.19	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:15 Tag:15 Transaction #: 13339001  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 09:28  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	72260	36.13	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	27320	13.66	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	44940	22.47		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18  
Trailer:

Tag:18  
Tag:

Transaction #: 13339017  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 09:43  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	70060	35.03	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	25160	12.58	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	44900	22.45		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:13  
Trailer:

Tag:13  
Tag:

Transaction #: 13339083  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 10:47  
Site: 13

REFUSE TYPE:ADC1575-Gray Soils  
RATE: \$15.75 / tn  
LBS TONS  
GROSS WEIGHT: 67980 33.99 SCALE:MAN WT  
TARE WEIGHT: 26700 13.35 SCALE:(K)  
NET WEIGHT: 41280 20.64  
VOL: 0  
Tran Type: Waste Disposal - Credit  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

TRANSACTION AMOUNT: \$325.08

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13339032  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 10:04  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	71600	35.80	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27020	13.51	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	44580	22.29		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS :

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30

Tag:#30

Transaction #: 13339045

Trailer:

Tag:

Attendant ID: KS

Customer: 602723

OSAGE OF VIRGINIA INC

2618A COLLEY AVENUE

NORFOLK

VA

23517

Date: 05/18/06

Time: 10:16

Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	68340	34.17	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25480	12.74	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	42860	21.43		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#28                      Tag:#28                                      Transaction #: 13339049  
Trailer:                        Tag:    Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK                      VA      23517

Date: 05/18/06  
Time: 10:19  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	59140	29.57	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25760	12.88	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	33380	16.69		Dest: Regional Landfill
VOL:	0			State: N/A
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#34 Tag:#34 Transaction #: 13339073  
Trailer: Tag: Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC Date: 05/18/06  
2618A COLLEY AVENUE Time: 10:36  
NORFOLK VA 23517 Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

				Tran Type: Osage of Virginia
	LBS	TONS		Pymt Type: Charge
GROSS WEIGHT:	61580	30.79	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25960	12.98	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	35620	17.81		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#33 Tag:#33 Transaction #: 13339059  
Trailer: Tag: Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 10:28  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	59460	29.73	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25920	12.96	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	33540	16.77		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29  
Trailer:

Tag:#29  
Tag:

Transaction #: 13339070  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 10:34  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:	MAN	WT
GROSS WEIGHT:	56520	28.26	SCALE:	MAN	WT
TARE WEIGHT:	26660	13.33	SCALE:	(K)	
NET WEIGHT:	29860	14.93			
VOL:	0				

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS :

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15  
Trailer:

Tag:15  
Tag:

Transaction #: 13339092  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 10:56  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:	MAN WT	Tran Type:
GROSS WEIGHT:	63360	31.68	MAN	WT	Capitol Environmental
TARE WEIGHT:	27320	13.66	(K)		Pynt Type: Charge
NET WEIGHT:	36040	18.02			Origin: Offsite Waste Producer
VOL:	0				Dest: Regional Landfill
					State: VA MSW
					Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16 Tag:16 Transaction #: 13339097  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 11:01  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	59320	29.66	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	27860	13.93	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	31460	15.73		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:18 Tag:18 Transaction #: 13339102  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC. Date: 05/18/06  
15-C TROLLEY SQUARE Time: 11:06  
WILMINGTON DE 19806 Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pymt Type: Charge
GROSS WEIGHT:	60060	30.03	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25160	12.58	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	34900	17.45		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13339112  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 11:16  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	63240	31.62	SCALE:MAN WT
TARE WEIGHT:	27020	13.51	SCALE:(K)
NET WEIGHT:	36220	18.11	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:15                      Tag:15                      Transaction #: 13339160  
Trailer:                      Tag:                      Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.                      Date: 05/18/06  
15-C TROLLEY SQUARE                      Time: 12:16  
WILMINGTON                      DE                      19806                      Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pynt Type: Charge
GROSS WEIGHT: 64780	32.39	SCALE:MAN WT		Origin: Offsite Waste Producer
TARE WEIGHT: 27320	13.66	SCALE:(K)		Dest: Regional Landfill
NET WEIGHT: 37460	18.73			State: VA MSW
VOL: 0				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13339125  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 11:30  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	55020	27.51	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25480	12.74	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	29540	14.77		Origin: Offsite Waste Producer
VOL:.	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13339129  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 11:37  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pynt Type: Charge
GROSS WEIGHT:	56540	28.27	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25760	12.88	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	30780	15.39		State: N/A
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#33  
Trailer:

Tag:#33  
Tag:

Transaction #: 13339133  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 11:43  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pynt Type: Charge
GROSS WEIGHT:	56240	28.12	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25920	12.96	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	30320	15.16		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29  
Trailer:

Tag:#29  
Tag:

Transaction #: 13339144  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 11:50  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	55640	27.82	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	26660	13.33	SCALE: (K)	Origin: Offsite Waste Producer
NET WEIGHT:	28980	14.49		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13339151  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 12:00  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS
GROSS WEIGHT:	60360	30.18
TARE WEIGHT:	25960	12.98
NET WEIGHT:	34400	17.20
VOL:	0	

Tran Type: Osage of Virginia  
Pynt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18  
Trailer:

Tag:18  
Tag:

Transaction #: 13339188  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 12:36  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	65320	32.66	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25160	12.58	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	40160	20.08		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13339198  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 12:48  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	68800	34.40	SCALE:MAN WT
TARE WEIGHT:	27020	13.51	SCALE:(K)
NET WEIGHT:	41780	20.89	
VOL:	0		

Tran Type: Capitol Environmental  
Pynt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16  
Trailer:

Tag:16  
Tag:

Transaction #: 13339194  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 12:45  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	63260	31.63	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27860	13.93	SCALE: (K)	Pymt Type: Charge
NET WEIGHT:	35400	17.70		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#30 Tag:#30 Transaction #: 13339220  
Trailer: Tag: Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 13:08  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	67100	33.55	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25480	12.74	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	41620	20.81		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28 Tag:#28 Transaction #: 13339223  
Trailer: Tag: Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 13:12  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	59800	29.90	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25760	12.88	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	34040	17.02		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: N/A
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#33  
Trailer:

Tag:#33  
Tag:

Transaction #: 13339236  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 13:26  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT
GROSS WEIGHT:	59720	29.86	SCALE:MAN WT
TARE WEIGHT:	25920	12.96	SCALE:(K)
NET WEIGHT:	33800	16.90	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29  
Trailer:

Tag:#29  
Tag:

Transaction #: 13339232  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 13:22  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	61340	30.67	SCALE:MAN WT
TARE WEIGHT:	26660	13.33	SCALE:(K)
NET WEIGHT:	34680	17.34	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13339241  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 13:30  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	66320	33.16	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25960	12.98	SCALE: (K)	Pynt Type: Charge
NET WEIGHT:	40360	20.18		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:13 Tag:13 Transaction #: 13339243  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 13:33  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray Soils  
RATE: \$15.75 / tn  
LBS TONS  
GROSS WEIGHT: 65580 32.79 SCALE:MAN WT  
TARE WEIGHT: 26700 13.35 SCALE:(K)  
NET WEIGHT: 38880 19.44  
VOL: 0  
Tran Type: Waste Disposal - Credit  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

TRANSACTION AMOUNT: \$306.18

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:15                      Tag:15                      Transaction #: 13339268  
Trailer:                      Tag:                      Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.                      Date: 05/18/06  
15-C TROLLEY SQUARE                      Time: 13:56  
WILMINGTON                      DE      19806                      Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	70020	35.01	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	27320	13.66	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	42700	21.35		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:16 Tag:16 Transaction #: 13339272  
Trailer: Tag: Attendant ID: KS

Customer: 602719 Date: 05/18/06  
CAPITOL ENVIRONMENTAL SERV, INC. Time: 14:00  
15-C TROLLEY SQUARE Site: 13  
WILMINGTON DE 19806

-----  
REFUSE TYPE:ADC1575-Gray  
Tran Type: Capitol Environmental  
LBS TONS Pymt Type: Charge  
GROSS WEIGHT: 62140 31.07 SCALE:MAN WT Origin: Offsite Waste Producer  
TARE WEIGHT: 27860 13.93 SCALE:(K) Dest: Regional Landfill  
NET WEIGHT: 34280 17.14 State: VA MSW  
VOL: 0 Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:18                      Tag:18                                      Transaction #: 13339283  
Trailer:                      Tag:    Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON                      DE                      19806

Date: 05/18/06  
Time: 14:06  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pymt Type: Charge
GROSS WEIGHT:	67600	33.80	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25160	12.58	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	42440	21.22		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14

Tag:14

Transaction #: 13339293

Trailer:

Tag:

Attendant ID: KS

Customer: 602719

CAPITOL ENVIRONMENTAL SERV, INC.

Date: 05/18/06

15-C TROLLEY SQUARE

Time: 14:14

WILMINGTON DE 19806

Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	70420	35.21	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27020	13.51	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	43400	21.70		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#30                      Tag:#30                      Transaction #: 13339323  
Trailer:                      Tag:                      Attendant ID: DS  
  
Customer: 602723                      Date: 05/18/06  
OSAGE OF VIRGINIA INC                      Time: 14:35  
2618A COLLEY AVENUE                      Site: 13  
NORFOLK                      VA      23517  
-----

REFUSE TYPE:ADC1575-Gray  
  
Tran Type: Osage of Virginia  
Pymt Type: Charge  
GROSS WEIGHT: 65220    LBS    TONS    SCALE:MAN WT    Origin: Offsite Waste Producer  
TARE WEIGHT: 25480    12.74    SCALE: (K)    Dest: Suffolk Transfer  
NET WEIGHT: 39740    19.87    State: VA MSW  
VOL:                      0                      Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13339325  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 14:36  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	58760	29.38	SCALE:MAN WT
TARE WEIGHT:	25760	12.88	SCALE:(K)
NET WEIGHT:	33000	16.50	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: N/A  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:13 Tag:13 Transaction #: 13339332  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 14:40  
Site: 13

REFUSE TYPE:ADC1575-Gray Soils  
RATE: \$15.75 / tn  
LBS TONS  
GROSS WEIGHT: 62940 31.47 SCALE:MAN WT  
TARE WEIGHT: 26700 13.35 SCALE:(K)  
NET WEIGHT: 36240 18.12  
VOL: 0  
Tran Type: Waste Disposal - Credit  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

TRANSACTION AMOUNT: \$285.39

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29  
Trailer:

Tag:#29  
Tag:

Transaction #: 13339335  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 14:42  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	57960	28.98	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	26660	13.33	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	31300	15.65		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#33 Tag:#33 Transaction #: 13339351  
Trailer: Tag: Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC Date: 05/18/06  
2618A COLLEY AVENUE Time: 14:53  
NORFOLK VA 23517 Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pymt Type: Charge
GROSS WEIGHT:	58160	29.08	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25920	12.96	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	32240	16.12		State: VA MSW
VOL:	0			Driver: N/A

REMARKS :

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13339354  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 14:55  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	65680	32.84	SCALE:MAN WT
TARE WEIGHT:	25960	12.98	SCALE:(K)
NET WEIGHT:	39720	19.86	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16  
Trailer:

Tag:16  
Tag:

Transaction #: 13339368  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 15:14  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	62000	31.00	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27860	13.93	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	34140	17.07		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15  
Trailer:

Tag:15  
Tag:

Transaction #: 13339367  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 15:13  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN	WT
GROSS WEIGHT:	68320	34.16	SCALE:(K)	
TARE WEIGHT:	27320	13.66		
NET WEIGHT:	41000	20.50		
VOL:	0			

Tran Type: Capitol Environmental  
Pynt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18  
Trailer:

Tag:18  
Tag:

Transaction #: 13339371  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/18/06  
Time: 15:23  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	65420	32.71	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25160	12.58	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	40260	20.13		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:13                      Tag:13                      Transaction #: 13339410  
Trailer:                      Tag:                      Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON              DE      19806

Date: 05/18/06  
Time: 16:21  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pynt Type: Charge
GROSS WEIGHT:	70040	35.02	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	26700	13.35	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	43340	21.67		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#33 Tag:#33 Transaction #: 13339403  
Trailer: Tag: Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC Date: 05/18/06  
2618A COLLEY AVENUE Time: 16:12  
NORFOLK VA 23517 Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pymt Type: Charge
GROSS WEIGHT: 56780	28.39	SCALE:MAN WT	Origin: Offsite Waste Producer	
TARE WEIGHT: 25920	12.96	SCALE:(K)	Dest: Regional Landfill	
NET WEIGHT: 30860	15.43		State: VA MSW	
VOL: 0			Driver: N/A	

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28 Tag:#28 Transaction #: 13339398  
Trailer: Tag: Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC Date: 05/18/06  
2618A COLLEY AVENUE Time: 16:04  
NORFOLK VA 23517 Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	59240	29.62	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25760	12.88	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	33480	16.74		Dest: Regional Landfill
VOL:	0			State: N/A
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13339406  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 16:18  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT
GROSS WEIGHT:	65520	32.76	SCALE:MAN WT
TARE WEIGHT:	25960	12.98	SCALE:(K)
NET WEIGHT:	39560	19.78	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#30 Tag:#30 Transaction #: 13339400  
Trailer: Tag: Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/18/06  
Time: 16:06  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

				Tran Type: Osage of Virginia
	LBS	TONS		Pynt Type: Charge
GROSS WEIGHT:	62560	31.28	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25480	12.74	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	37080	18.54		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!



May 22, 2006

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

**07107**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

**638**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Osage**

**Transaction#:**

**13340971**

**Actual Weight:**

**20.61 T**

16. **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.

Printed/Typed Name

**R M Harot**

Signature

**R M Harot**

Month Day Year

**05/22/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Wayne Bashaw**

Signature

**Wayne Bashaw**

Month Day Year

**05/22/06**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Seff**

Signature

**Donna Seff**

Month Day Year

**05/22/06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01148**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

**001 DT 00020 T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction# 13340973**

**Project# 116539**

**Actual Weight: 21.74**

*Osage*

16. **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.

Printed/Typed Name

*RM HART*

Signature

*RM HART*

Month Day Year

*5 22 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*- - -*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Cauther*

Signature

*Steve Cauther*

Month Day Year

*5 22 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Self*

Signature

*Donna Self*

Month Day Year

*10 21 06*

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01789

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( 767 )

445-6703

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

#28

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

001

DT

00020

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13340974**

**Project# 116539**

**Actual Weight: 17.48**

*Usage*

16. **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.

Printed/Typed Name

*R M HART*

Signature

*R M HART*

Month Day Year

5 22 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R. CUFFEE*

Signature

*R. Cuffee*

Month Day Year

5 22 06

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*DSapp*

Month Day Year

05 22 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01190**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schenk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transaction#:**

**13340981**

**Actual Weight:**

**17.63**

16. **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.

Printed/Typed Name

*R.M. Hartz*

Signature

*[Signature]*

Month Day Year

**5 | 22 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. | . | .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Alfred Robson*

Signature

*[Signature]*

Month Day Year

**5 | 22 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Seff*

Signature

*[Signature]*

Month Day Year

**5 | 22 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
*01141*

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

*14*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit

Wt/Vol

**001**

**DT**

**00020**

**T**

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GENERATOR

TRANSPORTER

FACILITY

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capital*

**Transaction#:** *13340985*

**Actual Weight:** *20.48*

E. Handling Codes for Wastes Listed Above

16. **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.

Printed/Typed Name

*KM HART*

Signature

*[Signature]*

Month Day Year  
*15 22 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Quinton Cross*

Signature

*[Signature]*

Month Day Year  
*15 22 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Saff*

Signature

*[Signature]*

Month Day Year  
*05 22 06*

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
*01192*

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13340987*

**Project# 116639**

**Actual Weight:**

*16.49*

*Usage*

16. **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.

Printed/Typed Name

*RM Hart*

Signature

*[Signature]*

Month Day Year

*15 22 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Dawn Edwards*

Signature

*[Signature]*

Month Day Year

*15 22 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*[Signature]*

Month Day Year

*10 5 22 06*

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01193**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Atlantic (CNRMA)  
1510 Gilbert St  
11-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone

**Attn: Rob Schonk**

5. Transporter 1 Comp

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company

**South Norfolk Truc**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions: 13340990**

**Project# 116539**

**Actual Weight: 19.50**

*Capitol*

16. 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.

Printed/Typed Name

*R M Hantz*

Signature

*R M Hantz*

Month Day Year

**5 22 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Clyde Bates*

Signature

*Clyde Bates*

Month Day Year

**5 22 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*n/a*

Signature

*n/a*

Month Day Year

**.**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sepp*

Signature

*D Sepp*

Month Day Year

**05 22 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**0-1-1-94**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:**

**13340996**

**Project# 116539**

**Actual Weight:**

**22.40**

*Capitol*

16. **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.

Printed/Typed Name

*RM HART*

Signature

*RM HART*

Month Day Year

**5 22 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Erin Wiggins*

Signature

*Erin Wiggins*

Month Day Year

**5 22 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. . .**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*DSapp*

Month Day Year

**05 22 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01-1-95**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking** #18

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
001	DT

13. Total Quantity

00020

14. Unit Wt/Vol

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

*15341000*

**Actual Weight:**

*19.24*

16. **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.

Printed/Typed Name

*RM Hart*

Signature

*RM Hart*

Month Day Year

*5 22 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*MW Falls*

Signature

*MW Falls*

Month Day Year

*5 22 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*Donna Sapp*

Month Day Year

*05 22 06*

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01196**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

**#14**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions#: 13341029**

**Project# 116539**

**Actual Weight: 22.28**

*Capitol*

16. 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.

Printed/Typed Name

*RM HART*

Signature

*RM HART*

Month Day Year

**5 22 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Quinton Cross*

Signature

*Quinton Cross*

Month Day Year

**5 22 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. . .**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sepp*

Signature

*Donna Sepp*

Month Day Year

**10 22 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**011191**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
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a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

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c.

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d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13341046**

**Project# 116539**

**Actual Weight: 21.27**

*Blage*

16. 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.

Printed/Typed Name **RM HART**

Signature *RM Hart*

Month	Day	Year
<b>5</b>	<b>22</b>	<b>06</b>

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month	Day	Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **Steve Coulter**

Signature *Steve Coulter*

Month	Day	Year
<b>5</b>	<b>22</b>	<b>06</b>

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sapp**

Signature *Donna Sapp*

Month	Day	Year
<b>05</b>	<b>22</b>	<b>06</b>

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01797**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking**

**#28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116639**

*base*

**Transactions# 13341040**

**Actual Weight: 18.59**

16. **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.

Printed/Typed Name

*R M Hart*

Signature

*R M Hart*

Month Day Year

*5 22 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R. CUFFEE*

Signature

*R Cuffee*

Month Day Year

*15 12 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sepp*

Signature

*Donna*

Month Day Year

*10 5 22 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**0-7-199**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
~~**Carr Trucking**~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2781**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
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a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

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c.

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d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*usage*

**Transactions: 13341048**

**Actual Weight: 17.56**

16. 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.

Printed/Typed Name **BM HART**

Signature *[Signature]*

Month Day Year  
**3 22 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature *N/A*

Month Day Year  
.

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **ALFRED RUBBSON**

Signature *[Signature]*

Month Day Year  
**3 22 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sepp**

Signature *[Signature]*

Month Day Year  
**05 22 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01-200**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking 30**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116639**

*Usage*

**Transaction#:**

**133 41028**

**Actual Weight:**

**20.83 T**

16. **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.

Printed/Typed Name

*R M HART*

Signature

*R M HART*

Month Day Year

**5 22 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Barkaw*

Signature

*Wayne Barkaw*

Month Day Year

**5 22 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*DSapp*

Month Day Year

**05 22 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01201**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

*#16*

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

*13341050*

**Actual Weight:**

*19.57*

16. **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.

Printed/Typed Name

*R M Hebert*

Signature

*R M Hebert*

Month Day Year  
**5 22 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*C. Bates*

Signature

*Clyde Bates*

Month Day Year  
**5 22 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year  
. . .

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*Donna Sapp*

Month Day Year  
**05 22 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
*01202*

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~Elite Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: **13341054**

Project# **116639**

Actual Weight: **16-81**

*usage*

16. 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.

Printed/Typed Name

*BM HACT*

Signature

*[Signature]*

Month Day Year

**5 22 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. . .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Dawn Edwards*

Signature

*[Signature]*

Month Day Year

**5 22 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sepp*

Signature

*[Signature]*

Month Day Year

**10 22 06**

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **0.7.2.0.3**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **446-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

**#15**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capital*

**Transaction#:**

**13341060**

**Actual Weight:**

**23.14**

16. **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.

Printed/Typed Name

*B.M. HART*

Signature

*B.M. Hart*

Month Day Year

**5 22 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Erin Wiggins*

Signature

*Erin Wiggins*

Month Day Year

**5 22 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**.**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*Donna Sapp*

Month Day Year

**05 22 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01-274

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **446-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transactions#:**

*13341068*

**Actual Weight:**

*20-18*

16. **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.

Printed/Typed Name

*B M Hart*

Signature

*B M Hart*

Month Day Year

*5 22 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*W FALLS*

Signature

*W Falls*

Month Day Year

*5 22 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sepp*

Signature

*D Sepp*

Month Day Year

*05 22 06*

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01205**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

**#14**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13341092**

**Project# 118539**

**Actual Weight: 21.91**

*Capitol*

16. **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.

Printed/Typed Name

**R M HART**

Signature

*R M Hart*

Month Day Year

**5 22 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Quinton Cross**

Signature

*Quinton Cross*

Month Day Year

**5 22 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**n/a**

Signature

*n/a*

Month Day Year

**.**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Seal**

Signature

*Donna Seal*

Month Day Year

**05 22 06**

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01206

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( 757 ) 445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking**

#28

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

00020

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: 13341111

Project# 116539

Actual Weight: 17.79

1 bag e

16. 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.

Printed/Typed Name

*B.M. HART*

Signature

*B.M. HART*

Month Day Year

5 22 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*n/a*

Signature

*n/a*

Month Day Year

. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R. LUFFEE*

Signature

*R. Luffee*

Month Day Year

5 22 06

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*D Sapp*

Month Day Year

05 22 06

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **81207**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill #14  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

**13341112**

**Actual Weight:**

**20.36**

16. **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.

Printed/Typed Name

*R M Hart*

Signature

*R M Hart*

Month Day Year

**5 22 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*C. Bate*

Signature

*C. Bate*

Month Day Year

**5 22 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*n/a*

Signature

*n/a*

Month Day Year

**. . .**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Seer*

Signature

*Donna Seer*

Month Day Year

**10 5 22 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

0-1-20-8

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~CNH Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

30

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

00020

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116639**

**Transaction#:**

13341103

**Actual Weight:**

19.38 T

usage

16. **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.

Printed/Typed Name

*RM HART*

Signature

*RM HART*

Month Day Year

5 22 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bashaw*

Signature

*Wayne Bashaw*

Month Day Year

5 22 06

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*DSapp*

Month Day Year

10 5 22 06

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. *07.0.09*

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~GMH Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

00020

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13341117*

**Project#** *116639*

**Actual Weight:** *21.16*

*Osas*

16. **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.

Printed/Typed Name

*RM Hart*

Signature

*[Signature]*

Month Day Year

*5 22 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*n/a*

Signature

*n/a*

Month Day Year

*. . .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Coulter*

Signature

*[Signature]*

Month Day Year

*5 22 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*[Signature]*

Month Day Year

*05 22 06*

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01210

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **446-8703** . **Attn: Rob Schonk**

5. Transporter 1 Company Name

~~Call Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

001

DT

13. Total Quantity

00020

14. Unit Wt/Vol

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*usage*

**Transaction#:**

**13341133**

**Actual Weight:**

**17.64**

16. **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.

Printed/Typed Name

*B M Hart*

Signature

*[Signature]*

Month Day Year

5 22 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Dawn Edwards*

Signature

*[Signature]*

Month Day Year

5 22 06

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sage*

Signature

*[Signature]*

Month Day Year

05 22 06

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01211

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~SCM Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transaction#:**

**13341127**

**Actual Weight:**

**16.78**

16. **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.

Printed/Typed Name

*RM HARG*

Signature

*[Signature]*

Month Day Year

**5 22 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**5 22 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sage*

Signature

*[Signature]*

Month Day Year

**05 22 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01212

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **446-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

# 15

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

**13341148**

**Actual Weight:**

**23.79**

16. **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.

Printed/Typed Name

*RM Hartz*

Signature

*RM Hartz*

Month Day Year

**15 22 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Eric W. Gagnier*

Signature

*Eric W. Gagnier*

Month Day Year

**15 22 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. . .**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sepp*

Signature

*Donna Sepp*

Month Day Year

**05 22 06**

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01-2-13

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

*133 41152*

**Actual Weight:**

*20.16*

16. **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.

Printed/Typed Name

*BM HART*

Signature

*[Signature]*

Month Day Year

*15 20 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*KW FALLS*

Signature

*[Signature]*

Month Day Year

*15 22 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*n/a*

Signature

*n/a*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*[Signature]*

Month Day Year

*10 22 06*

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
*01214*

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( *767* ) **446-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

*#14*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13341164*

**Project# 116639**

**Actual Weight:** *22.28*

*Capital*

16. **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.

Printed/Typed Name

*B M Hart*

Signature

*[Signature]*

Month Day Year

*5 | 22 | 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Quinton Cross*

Signature

*[Signature]*

Month Day Year

*5 | 22 | 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. | . | .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*[Signature]*

Month Day Year

*05 | 22 | 06*

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. *01215*

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking 30**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transaction#:**

*133 41185*

**Actual Weight:**

*19.11*

16. **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.

Printed/Typed Name

*RM HART*

Signature

*[Signature]*

Month Day Year

*5 22 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bashaw*

Signature

*[Signature]*

Month Day Year

*5 22 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donn Sapp*

Signature

*[Signature]*

Month Day Year

*05 22 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01216**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

*# 16*

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

*133 41180*

**Actual Weight:**

*19.72*

16. 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.

Printed/Typed Name

*RM Hart*

Signature

*[Signature]*

Month Day Year

*15 22 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*C. Bates*

Signature

*[Signature]*

Month Day Year

*15 22 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*15 22 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Deane Segg*

Signature

*[Signature]*

Month Day Year

*10 22 06*

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01217**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~CELESTINE~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

**001 DT 00020 T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13341186**

**Project# 116539**

**Actual Weight: 18.16**

*Osag*

16. 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.

Printed/Typed Name

*R M HART*

Signature

*R M Hart*

Month Day Year

**15 22 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**15 22 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R. CUFFEE*

Signature

*R. Cuffee*

Month Day Year

**15 22 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sepp*

Signature

*D Sepp*

Month Day Year

**05 22 06**

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01218

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~CNF Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transaction#:** *13341197*

**Actual Weight:** *20.43*

16. **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.

Printed/Typed Name

*BM Hart*

Signature

*[Signature]*

Month Day Year

*5 22 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Couther*

Signature

*[Signature]*

Month Day Year

*5 22 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sepp*

Signature

*[Signature]*

Month Day Year

*10 22 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01219**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transactions#:**

**133 412 07**

**Actual Weight:**

**17.55**

16. 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.

Printed/Typed Name

*RM Hart*

Signature

*RM Hart*

Month Day Year

**15 | 22 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. | . | .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Alfred Ribben*

Signature

*Alfred Ribben*

Month Day Year

**15 | 22 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sepp*

Signature

*Donna Sepp*

Month Day Year

**05 | 22 | 06**

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01220

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

00020

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** 13341208

**Project# 118639**

**Actual Weight:**

*Osage*

17.57

16. **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.

Printed/Typed Name

*BM HART*

Signature

*[Signature]*

Month Day Year

5 | 22 | 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

. | . | .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Dawn Edwards*

Signature

*[Signature]*

Month Day Year

5 | 22 | 06

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*[Signature]*

Month Day Year

10 | 5 | 22 | 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01221**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St, Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
001	DT
.	.
.	.
.	.
.	.

13. Total Quantity

00020

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transactions:**

**133 41229**

**Actual Weight:**

**23.29**

16. **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.

Printed/Typed Name

*RM Hart*

Signature

*RM Hart*

Month Day Year

5 22 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Earl Wiggins*

Signature

*Earl Wiggins*

Month Day Year

5 22 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

.

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*D Sapp*

Month Day Year

05 22 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01-222**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

*13341230*

**Actual Weight:**

*22.22*

16. **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.

Printed/Typed Name

*R M Hart*

Signature

*R M Hart*

Month Day Year

*5 22 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*K W Falls*

Signature

*K W Falls*

Month Day Year

*5 22 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Diane Saff*

Signature

*Diane Saff*

Month Day Year

*10 5 22 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
*01223*

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

*#14*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13341246*

**Project# 116539**

**Actual Weight:** *21.96*

*Capitol*

16. **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.

Printed/Typed Name

*R M HART*

Signature

*R M Hart*

Month Day Year

*5 22 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Quinton Cross*

Signature

*Quinton Cross*

Month Day Year

*5 22 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sepp*

Signature

*Donna Sepp*

Month Day Year

*05 22 06*

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
*0.9.2.2.9*

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( *767* ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

*#16*

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13341255*

**Project# 118539**

**Actual Weight:**

*Capitol*

*20.48*

16. **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.

Printed/Typed Name

*RM Hart*

Signature

*[Signature]*

Month Day Year

*5 22 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*C. Bates*

Signature

*[Signature]*

Month Day Year

*5 22 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sepp*

Signature

*[Signature]*

Month Day Year

*05 22 06*

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**0-7-225**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **446-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~SEA TRUCKING~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking #28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13341285**

**Project# 116539**

**Actual Weight: 18.26**

*Osage*

16. **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.

Printed/Typed Name

*R M HART*

Signature

*R M Hart*

Month Day Year

*5 22 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R. CUFFEE*

Signature

*R. Cuffee*

Month Day Year

*5 22 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sarp*

Signature

*D Sarp*

Month Day Year

*05 22 06*

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
*0.1.2.2.6*

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13341280*

**Project# 116539**

**Actual Weight:** *20.89*

*Osage*

16. **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.

Printed/Typed Name

*BM Hart*

Signature

*[Signature]*

Month Day Year

*5 22 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Coulter*

Signature

*[Signature]*

Month Day Year

*5 22 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*[Signature]*

Month Day Year

*05 22 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
*01227*

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~CNH Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total  
Quantity

14. Unit  
Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Usage*

**Transaction#:**

*13341288*

**Actual Weight:**

*17.99*

16. **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.

Printed/Typed Name

*R M Hunt*

Signature

*R M Hunt*

Month Day Year

*5 22 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*.*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Michael R. B. Brown*

Signature

*Michael R. B. Brown*

Month Day Year

*5 22 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Danna Seiff*

Signature

*Danna Seiff*

Month Day Year

*05 27 07*

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
0-1-228

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~SM Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking**

**30**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: **13341284**

Project# **118539**

Actual Weight: **20.31T**

*Osage*

16. 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.

Printed/Typed Name

*BM Hart*

Signature

*BM Hart*

Month Day Year

**15 22 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. . .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Rasshaw*

Signature

*Wayne Rasshaw*

Month Day Year

**15 22 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sage*

Signature

*Donna Sage*

Month Day Year

**05 22 06**

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01-229**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~GM Trailing~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13341294**

**Project# 116539**

**Actual Weight:**

*Osage*

*16.70*

16. **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.

Printed/Typed Name

*RM HART*

Signature

*RM HART*

Month Day Year

*5 22 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Dawn Edwards*

Signature

*Dawn Edwards*

Month Day Year

*5 22 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sepp*

Signature

*D Sepp*

Month Day Year

*05 22 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01230**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

*#15*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

00020

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

*Capitol*

Transaction#: **13341318**

Actual Weight: **23.75**

16. 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.

Printed/Typed Name

*B.M. Hart*

Signature

*B.M. Hart*

Month Day Year

5 22 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Kevin Wiggins*

Signature

*Kevin Wiggins*

Month Day Year

5 22 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

5 22 06

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Seff*

Signature

*Donna Seff*

Month Day Year

5 22 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
01231

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( 757 ) 445-6703

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

#14

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Traveling~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

001

DT

13. Total Quantity

00020

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:** 13341372

**Actual Weight:** 21.05

16. **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.

Printed/Typed Name

*B M HUNT*

Signature

*B M HUNT*

Month Day Year

5 22 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Quinton Cross*

Signature

*Quinton Cross*

Month Day Year

5 22 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*n/a*

Signature

*n/a*

Month Day Year

. . .

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sepp*

Signature

*Donna Sepp*

Month Day Year

05 22 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01-232**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capital*

**Transaction#:** *13391331*

**Actual Weight:**

*21.86*

16. **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.

Printed/Typed Name

*R.M. HART*

Signature

*R.M. Hart*

Month Day Year

*5 22 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*AND FALLS*

Signature

*AND FALLS*

Month Day Year

*5 22 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*John Sage*

Signature

*J. Sage*

Month Day Year

*5 22 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
*01-233*

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schenk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

*13341335*

**Actual Weight:**

*21.31*

16. **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.

Printed/Typed Name

*A.M. Haas*

Signature

*A.M. Haas*

Month Day Year  
*15 28 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*C. Bates*

Signature

*C. Bates*

Month Day Year  
*7 28 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*D. Sapp*

Month Day Year  
*05 22 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01-234

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **446-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
001	DT
.	.
.	.
.	.
.	.
.	.
.	.
.	.
.	.

13. Total Quantity

00020

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction# 13341352**

**Actual Weight: 20.71**

*Osage*

16. 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.

Printed/Typed Name

*BM Hans*

Signature

*[Signature]*

Month Day Year  
*5 22 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
*. . .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Coather*

Signature

*[Signature]*

Month Day Year  
*5 22 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Dawn Seff*

Signature

*[Signature]*

Month Day Year  
*05 22 06*

GENERATOR  
TRANSPORTER  
FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01-235

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**GHT Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

**#28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13341358**

**Project# 116539**

**Actual Weight: 18.31**

*Osage*

16. 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.

Printed/Typed Name

*RM HART*

Signature

*[Signature]*

Month Day Year

**15 02 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. . .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**R. CUFFEE**

Signature

*R. Cuffee*

Month Day Year

**15 02 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Sapp**

Signature

*[Signature]*

Month Day Year

**05 22 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01236

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~CAH Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking 30**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:**

**13341364**

**Project# 118539**

**Actual Weight:**

**20.48**

*Usage*

16. **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.

Printed/Typed Name

*R M HART*

Signature

*R M HART*

Month Day Year

**5 22 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bashaw*

Signature

*Wayne Bashaw*

Month Day Year

**5 22 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*ASapp*

Month Day Year

**05 22 06**

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. *01-237*

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( *757* ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

00020

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions: 13341367**

**Project# 116639**

**Actual Weight:**

*Osage*

*17.69*

16. **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.

Printed/Typed Name

*B M Hart*

Signature

*[Signature]*

Month Day Year

5 22 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

5 22 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Alexander Robison*

Signature

*[Signature]*

Month Day Year

5 22 06

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

5 22 06

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01238

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)**

**1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill**

**1 Bob Foeller Drive**

**Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: **13341378**

Project# **116639**

Actual Weight: **1769**

*Usage*

16. **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.

Printed/Typed Name

**R M HART**

Signature

*[Signature]*

Month Day Year

**5 22 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**N/A**

Signature

**N/A**

Month Day Year

**. . .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Dawn Edwards**

Signature

*[Signature]*

Month Day Year

**5 22 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Donna Sepp**

Signature

*[Signature]*

Month Day Year

**05 22 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

01239

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( 757 ) 445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~Southwest Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
001	DT

13. Total Quantity

00020

14. Unit Wt/Vol

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: 13341407

Project# 116639

Actual Weight:

Capitol

22.17

16. 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.

Printed/Typed Name

R.M. HART

Signature

*[Signature]*

Month Day Year

5 22 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

KW FALLS

Signature

*[Signature]*

Month Day Year

5 22 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

N/A

Signature

*[Signature]*

Month Day Year

. . .

19. Discrepancy Indication Space

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

Printed/Typed Name

Donna Sapp

Signature

*[Signature]*

Month Day Year

09 22 06

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01290**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

**13341450**

**Actual Weight:**

**24.97**

16. **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.

Printed/Typed Name

*RM ART*

Signature

*RM ART*

Month Day Year

**5 22 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Ervin Wiggins*

Signature

*Ervin Wiggins*

Month Day Year

**5 22 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**.**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**5 22 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01241**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **767** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
~~C&H Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking 30**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
--------------------	--------------------	-----------------

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
------------	-----------	--------------	----------

b.

--	--	--	--

c.

--	--	--	--

d.

--	--	--	--

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transactions#:** **133 41 436**

**Actual Weight:** **20.83 T**

16. **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.

Printed/Typed Name **R. M HART**

Signature *R M Hart*      Month **5** Day **22** Year **06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature *N/A*      Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **Wayne Bashaw**

Signature *Wayne Bashaw*      Month **5** Day **22** Year **06**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*      Month **5** Day **22** Year **06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01292**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **767** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
~~CH Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #28**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. <b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.				
c.				
d.				

12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol
001	DT	00020	T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13341438**

**Project# 116539**

**Actual Weight: 19.04**

*Osage*

16. 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.

Printed/Typed Name **R M HART**

Signature *R M Hart*

Month Day Year  
**5 | 22 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
. | . | .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **R. CUFFEE**

Signature *R. Cuffee*

Month Day Year  
**5 | 22 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
**5 | 22 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07243**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
~~**C&H Trucking**~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
--------------------	------	--------------------	-----------------

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

--	--	--	--

c.

--	--	--	--

d.

--	--	--	--

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13341439**

**Project# 116539**

**Actual Weight: 19.39**

*Osage*

16. 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.

Printed/Typed Name *R M HART*

Signature *[Signature]*      Month Day Year **5 22 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*      Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *[Signature]*

Signature *[Signature]*      Month Day Year **5 22 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*      Month Day Year **5 22 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01294**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
~~South Norfolk Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No.	Type	13. Total Quantity	14. Unit Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
.	.	.	.

b.

.	.	.	.
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c.

.	.	.	.
---	---	---	---

d.

.	.	.	.
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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transactions#:**

**Actual Weight:**

16. **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.

Printed/Typed Name *B M Hart*

Signature *B M Hart*

Month Day Year  
**5 22 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *n/a*

Signature *n/a*

Month Day Year  
.

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *Dawn Edwards*

Signature *Dawn Edwards*

Month Day Year  
**5 22 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *Ph*

Signature *Ph*

Month Day Year  
**7 22 06**

GENERATOR

TRANSPORTER

FACILITY

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#30 Tag:#30 Transaction #: 13340971  
Trailer: Tag: Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/22/06  
Time: 07:18  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	66700	33.35	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25480	12.74	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	41220	20.61		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13340973  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/22/06  
Time: 07:22  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 69440 34.72 SCALE:MAN WT  
TARE WEIGHT: 25960 12.98 SCALE:(K)  
NET WEIGHT: 43480 21.74  
VOL: 0

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28

Tag:#28

Transaction #: 13340974

Trailer:

Tag:

Attendant ID: DS

Customer: 602723

OSAGE OF VIRGINIA INC

2618A COLLEY AVENUE

NORFOLK

VA

23517

Date: 05/22/06

Time: 07:23

Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	60720	30.36	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25760	12.88	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	34960	17.48		Dest: Regional Landfill
VOL:	0			State: N/A
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#33                      Tag:#33                      Transaction #: 13340981  
Trailer:                      Tag:                      Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK                      VA      23517

Date: 05/22/06  
Time: 07:32  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	61180	30.59	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25920	12.96	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	35260	17.63		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:14 Tag:14 Transaction #: 13340985  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/22/06  
Time: 07:35  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT: 67980	33.99	SCALE:MAN WT		Pymt Type: Charge
TARE WEIGHT: 27020	13.51	SCALE:(K)		Origin: Offsite Waste Producer
NET WEIGHT: 40960	20.48			Dest: Regional Landfill
VOL: 0				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#29 Tag:#29 Transaction #: 13340987  
Trailer: Tag: Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/22/06  
Time: 07:38  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT: 59640	29.82	SCALE:MAN WT		Pymt Type: Charge
TARE WEIGHT: 26660	13.33	SCALE:(K)		Origin: Offsite Waste Producer
NET WEIGHT: 32980	16.49			Dest: Regional Landfill
VOL: 0				State: VA MSW
				Driver: N/A

REMARKS :

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:16 Tag:16 Transaction #: 13340990  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC. Date: 05/22/06  
15-C TROLLEY SQUARE Time: 07:43  
WILMINGTON DE 19806 Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	66860	33.43	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	27860	13.93	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	39000	19.50		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15  
Trailer:

Tag:15  
Tag:

Transaction #: 13340996  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/22/06  
Time: 07:50  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	72120	36.06	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27320	13.66	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	44800	22.40		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:18 Tag:18 Transaction #: 13341000  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/22/06  
Time: 07:53  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pynt Type: Charge
GROSS WEIGHT:	63640	31.82	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25160	12.58	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	38480	19.24		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:14 Tag:14 Transaction #: 13341029  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/22/06  
Time: 08:44  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT: 71580	35.79	SCALE:MAN WT	Origin: Offsite Waste Producer	Pymt Type: Charge
TARE WEIGHT: 27020	13.51	SCALE:(K)	Dest: Regional Landfill	
NET WEIGHT: 44560	22.28		State: VA MSW	
VOL: 0			Driver: N/A	

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#34                      Tag:#34                      Transaction #: 13341046  
Trailer:                      Tag:                      Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC                      Date: 05/22/06  
2618A COLLEY AVENUE                      Time: 08:58  
NORFOLK                      VA      23517                      Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

				Tran Type: Osage of Virginia
	LBS	TONS		Pymt Type: Charge
GROSS WEIGHT:	68500	34.25	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25960	12.98	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	42540	21.27		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#28                      Tag:#28                      Transaction #: 13341040  
Trailer:                      Tag:                      Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC                      Date: 05/22/06  
2618A COLLEY AVENUE                      Time: 08:53  
NORFOLK                      VA      23517                      Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

				Tran Type: Osage of Virginia
	LBS	TONS		Pynt Type: Charge
GROSS WEIGHT:	62940	31.47	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25760	12.88	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	37180	18.59		State: N/A
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#33                      Tag:#33                      Transaction #: 13341048  
Trailer:                      Tag:                      Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC                      Date: 05/22/06  
2618A COLLEY AVENUE                      Time: 09:00  
NORFOLK                      VA      23517                      Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

				Tran Type: Osage of Virginia
	LBS	TONS		Pynt Type: Charge
GROSS WEIGHT:	61040	30.52	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25920	12.96	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	35120	17.56		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30 Tag:#30  
Trailer: Tag:

Transaction #: 13341028  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/22/06  
Time: 08:43  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT
GROSS WEIGHT:	67140	33.57	SCALE:(K)
TARE WEIGHT:	25480	12.74	
NET WEIGHT:	41660	20.83	
VOL:	0		

Tran Type: Osage of Virginia  
Pynt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16  
Trailer:

Tag:16  
Tag:

Transaction #: 13341050  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/22/06  
Time: 09:03  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	67000	33.50	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27860	13.93	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	39140	19.57		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#29                      Tag:#29                      Transaction #: 13341054  
Trailer:                      Tag:                      Attendant ID: DS  
  
Customer: 602723  
OSAGE OF VIRGINIA INC                      Date: 05/22/06  
2618A COLLEY AVENUE                      Time: 09:05  
NORFOLK                      VA    23517                      Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

				Tran Type: Capitol Environmental
	LBS	TONS		Pymt Type: Charge
GROSS WEIGHT:	60280	30.14	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	26660	13.33	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	33620	16.81		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:15                      Tag:15                      Transaction #: 13341060  
Trailer:                      Tag:                      Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.                      Date: 05/22/06  
15-C TROLLEY SQUARE                      Time: 09:11  
WILMINGTON                      DE                      19806                      Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pynt Type: Charge
GROSS WEIGHT:	73600	36.80	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27320	13.66	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	46280	23.14		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:18 Tag:18 Transaction #: 13341068  
Trailer: Tag: Attendant ID: DS

Customer: 602719 Date: 05/22/06  
CAPITOL ENVIRONMENTAL SERV, INC. Time: 09:19  
15-C TROLLEY SQUARE Site: 13  
WILMINGTON DE 19806

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT: 65520	32.76	SCALE:MAN WT	Pynt Type: Charge	Origin: Offsite Waste Producer
TARE WEIGHT: 25160	12.58	SCALE:(K)		Dest: Regional Landfill
NET WEIGHT: 40360	20.18			State: VA MSW
VOL: 0				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:14 Tag:14 Transaction #: 13341092  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC. Date: 05/22/06  
15-C TROLLEY SQUARE Time: 09:51  
WILMINGTON DE 19806 Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pynt Type: Charge
GROSS WEIGHT:	70840	35.42	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27020	13.51	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	43820	21.91		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13341111  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/22/06  
Time: 10:09  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	61340	30.67	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25760	12.88	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	35580	17.79		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: N/A
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16 Tag:16  
Trailer: Tag:

Transaction #: 13341112  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/22/06  
Time: 10:13  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	68580	34.29	SCALE:MAN WT
TARE WEIGHT:	27860	13.93	SCALE:(K)
NET WEIGHT:	40720	20.36	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13341103  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/22/06  
Time: 10:02  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	64240	32.12	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25480	12.74	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	38760	19.38		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13341117  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/22/06  
Time: 10:16  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	68280	34.14	SCALE:MAN WT
TARE WEIGHT:	25960	12.98	SCALE:(K)
NET WEIGHT:	42320	21.16	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29  
Trailer:

Tag:#29  
Tag:

Transaction #: 13341133  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/22/06  
Time: 10:26  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	61940	30.97	SCALE:MAN WT
TARE WEIGHT:	26660	13.33	SCALE:(K)
NET WEIGHT:	35280	17.64	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#33 Tag:#33 Transaction #: 13341127  
Trailer: Tag: Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/22/06  
Time: 10:22  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	59480	29.74	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25920	12.96	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	33560	16.78		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15  
Trailer:

Tag:15  
Tag:

Transaction #: 13341148  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/22/06  
Time: 10:45  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:	Tran Type:
GROSS WEIGHT:	74900	37.45	MAN WT	Capitol Environmental
TARE WEIGHT:	27320	13.66	(K)	Pymt Type: Charge
NET WEIGHT:	47580	23.79		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:18 Tag:18 Transaction #: 13341152  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/22/06  
Time: 10:48  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	65480	32.74	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25160	12.58	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	40320	20.16		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13341169  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/22/06  
Time: 11:11  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	71580	35.79	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	27020	13.51	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	44560	22.28		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#30                      Tag:#30                      Transaction #: 13341185  
Trailer:                      Tag:                      Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK                      VA      23517

Date: 05/22/06  
Time: 11:21  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	63700	31.85	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25480	12.74	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	38220	19.11		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:16 Tag:16 Transaction #: 13341180  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/22/06  
Time: 11:17  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	67300	33.65	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	27860	13.93	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	39440	19.72		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#28                      Tag:#28                      Transaction #: 13341186  
Trailer:                      Tag:                      Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC                      Date: 05/22/06  
2618A COLLEY AVENUE                      Time: 11:23  
NORFOLK                      VA    23517                      Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	62080	31.04	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	25760	12.88	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	36320	18.16		Dest: Regional Landfill
VOL:	0			State: N/A
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#34                      Tag:#34                      Transaction #: 13341197  
Trailer:                      Tag:                      Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC                      Date: 05/22/06  
2618A COLLEY AVENUE                      Time: 11:34  
NORFOLK                      VA      23517                      Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	66820	33.41	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	25960	12.98	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	40860	20.43		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS: .

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#33                      Tag:#33                      Transaction #: 13341207  
Trailer:                      Tag:                      Attendant ID: DS  
  
Customer: 602723  
OSAGE OF VIRGINIA INC                      Date: 05/22/06  
2618A COLLEY AVENUE                      Time: 11:44  
NORFOLK                      VA      23517                      Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

				Tran Type: Osage of Virginia
	LBS	TONS		Pynt Type: Charge
GROSS WEIGHT:	61020	30.51	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25920	12.96	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	35100	17.55		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#29                      Tag:#29                      Transaction #: 13341208  
Trailer:                      Tag:                      Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC                      Date: 05/22/06  
2618A COLLEY AVENUE                      Time: 11:45  
NORFOLK                      VA      23517                      Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

				Tran Type: Capitol Environmental
	LBS	TONS		Pynt Type: Charge
GROSS WEIGHT:	61800	30.90	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	26660	13.33	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	35140	17.57		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15 Tag:15 Transaction #: 13341229  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/22/06  
Time: 12:02  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	73900	36.95	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	27320	13.66	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	46580	23.29		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:18 Tag:18 Transaction #: 13341230  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC. Date: 05/22/06  
15-C TROLLEY SQUARE Time: 12:04  
WILMINGTON DE 19806 Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	69600	34.80	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25160	12.58	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	44440	22.22		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:14 Tag:14 Transaction #: 13341246  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC. Date: 05/22/06  
15-C TROLLEY SQUARE Time: 12:19  
WILMINGTON DE 19806 Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pynt Type: Charge
GROSS WEIGHT:	69540	34.77	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27020	13.51	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	42520	21.26		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16  
Trailer:

Tag:16  
Tag:

Transaction #: 13341255  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/22/06  
Time: 12:24  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 68820 34.41 SCALE:MAN WT  
TARE WEIGHT: 27860 13.93 SCALE:(K)  
NET WEIGHT: 40960 20.48  
VOL: 0

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!



SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13341280  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/22/06  
Time: 12:44  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	67740	33.87	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25960	12.98	SCALE: (K)	Pymt Type: Charge
NET WEIGHT:	41780	20.89		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#33 Tag:#33 Transaction #: 13341288  
Trailer: Tag: Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC Date: 05/22/06  
2618A COLLEY AVENUE Time: 12:53  
NORFOLK VA 23517 Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	61900	30.95	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25920	12.96	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	35980	17.99		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13341284  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/22/06  
Time: 12:46  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	66100	33.05	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25480	12.74	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	40620	20.31		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29  
Trailer:

Tag:#29  
Tag:

Transaction #: 13341294  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/22/06  
Time: 12:59  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pymt Type: Charge
GROSS WEIGHT:	60060	30.03	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	26660	13.33	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	33400	16.70		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:15 Tag:15 Transaction #: 13341318  
Trailer: Tag: Attendant ID: DS

Customer: 602719 Date: 05/22/06  
CAPITOL ENVIRONMENTAL SERV, INC. Time: 13:32  
15-C TROLLEY SQUARE Site: 13  
WILMINGTON DE 19806

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pymt Type: Charge
GROSS WEIGHT:	74820	37.41	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27320	13.66	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	47500	23.75		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13341322  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/22/06  
Time: 13:35  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	69120	34.56	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27020	13.51	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	42100	21.05		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!



SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:16                      Tag:16                      Transaction #: 13341335  
Trailer:                      Tag:                      Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.                      Date: 05/22/06  
15-C TROLLEY SQUARE                      Time: 13:49  
WILMINGTON                      DE                      19806                      Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pymt Type: Charge
GROSS WEIGHT:	70480	35.24	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27860	13.93	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	42620	21.31		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13341352  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/22/06  
Time: 14:02  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 67380 33.69 SCALE:MAN WT  
TARE WEIGHT: 25960 12.98 SCALE:(K)  
NET WEIGHT: 41420 20.71  
VOL: 0

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13341358  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/22/06  
Time: 14:07  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pymt Type: Charge
GROSS WEIGHT:	62380	31.19	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25760	12.88	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	36620	18.31		State: N/A
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13341364  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/22/06  
Time: 14:13  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 66440 33.22 SCALE:MAN WT  
TARE WEIGHT: 25480 12.74 SCALE:(K)  
NET WEIGHT: 40960 20.48  
VOL: 0

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#33                      Tag:#33                      Transaction #: 13341367  
Trailer:                      Tag:                      Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC                      Date: 05/22/06  
2618A COLLEY AVENUE                      Time: 14:17  
NORFOLK                      VA      23517                      Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

				Tran Type: Osage of Virginia
	LBS	TONS		Pynt Type: Charge
GROSS WEIGHT:	61300	30.65	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25920	12.96	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	35380	17.69		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29  
Trailer:

Tag:#29  
Tag:

Transaction #: 13341378  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/22/06  
Time: 14:27  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	62040	31.02	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	26660	13.33	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	35380	17.69		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18 Tag:18 Transaction #: 13341407  
Trailer: Tag: Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/22/06  
Time: 14:59  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	69500	34.75	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	25160	12.58	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	44340	22.17		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:15                      Tag:15                                      Transaction #: 13341450  
Trailer:                      Tag:    Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON                      DE                      19806

Date: 05/22/06  
Time: 15:44  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pymt Type: Charge
GROSS WEIGHT:	77260	38.63	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27320	13.66	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	49940	24.97		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#30                      Tag:#30                      Transaction #: 13341436  
Trailer:                      Tag:                      Attendant ID: KS

Customer: 602723  
OSAGE OF VIGINIA INC  
2618A COLLEY AVENUE  
NORFOLK                      VA      23517

Date: 05/22/06  
Time: 15:30  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pymt Type: Charge
GROSS WEIGHT:	67140	33.57	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25480	12.74	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	41660	20.83		State: VA MSW
VOL:	0			Driver: N/A

REMARKS :

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#28                      Tag:#28                                      Transaction #: 13341438  
Trailer:                        Tag:    Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK                      VA      23517

Date: 05/22/06  
Time: 15:32  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	63840	31.92	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	25760	12.88	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	38080	19.04		Dest: Regional Landfill
VOL:	0			State: N/A
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#33 Tag:#33 Transaction #: 13341439  
Trailer: Tag: Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/22/06  
Time: 15:35  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	64700	32.35	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25920	12.96	SCALE: (K)	Origin: Offsite Waste Producer
NET WEIGHT:	38780	19.39		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#29                      Tag:#29                                      Transaction #: 13341448  
Trailer:                        Tag:    Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK                      VA      23517

Date: 05/22/06  
Time: 15:41  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

				Tran Type: Capitol Environmental
	LBS	TONS		Pymt Type: Charge
GROSS WEIGHT:	61980	30.99	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	26660	13.33	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	35320	17.66		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

May 23, 2006

### 111

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01295**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~**GMH Trucking**~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #30**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Usage*

**Transactions#:**

**13341572**

**Actual Weight:**

**21.57**

16. 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.

Printed/Typed Name

*RM HANT*

Signature

*[Signature]*

Month Day Year

**5/23/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**5/23/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bastaw*

Signature

*Wayne Bastaw*

Month Day Year

**5/23/06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*[Signature]*

Month Day Year

**5/23/06**

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01246**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**      *JH*

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
--------------------	--------------------	-----------------

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions: 13341565**  
**Actual Weight: 23.33**

**Project# 116539**

*Capitol*

16. **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.

Printed/Typed Name *R M HART*

Signature *[Signature]*

Month Day Year  
**5 | 23 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Quintan Cross*

Signature *[Signature]*

Month Day Year  
**5 | 23 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
**. | . | .**

19. Discrepancy Indication Space

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

Printed/Typed Name *Danna Seep*

Signature *[Signature]*

Month Day Year  
**05 | 23 | 06**

TRANSPORTER FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07297**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

*IF 16*

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

13. Total

14. Unit

No.

Type

Quantity

Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13341573**

**Project# 116539**

**Actual Weight:**

*Capitol*

*21.93*

16. 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.

Printed/Typed Name

*R M Harris*

Signature

*R M Harris*

Month Day Year  
*5 23 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*C. Bates*

Signature

*Chad Bates*

Month Day Year  
*5 23 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*Donna Sapp*

Month Day Year  
*05 23 06*

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-248**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name **C&H Trucking** *15*

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

a.	Beneficial Re-Use Soil/Calcium Hydroxide Mixture	12. Containers		13. Total Quantity	14. Unit Wt/Vol
		No.	Type		
		001	DT	00020	T
b.					
c.					
d.					

a.	Beneficial Re-Use Soil/Calcium Hydroxide Mixture	12. Containers		13. Total Quantity	14. Unit Wt/Vol
		No.	Type		
		001	DT	00020	T
b.					
c.					
d.					

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**      **Transaction#:** *13341577*

*Capitol*      **Actual Weight:** *24.70*

16. 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.

Printed/Typed Name *RM Hart*

Signature *[Signature]*

Month Day Year  
*5 23 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Kevin Wiggins*

Signature *[Signature]*

Month Day Year  
*5 23 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sapp*

Signature *[Signature]*

Month Day Year  
*05 23 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01249**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. <b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**      **Capitol**

**Transaction#:** **13341582**

**Actual Weight:** **22.53**

16. 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.

Printed/Typed Name **B M HART**      Signature *[Signature]*      Month Day Year **15 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **K W FALLS**      Signature *[Signature]*      Month Day Year **15 23 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**      Signature **N/A**      Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Saap**      Signature *[Signature]*      Month Day Year **05 23 07**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01250**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**.NOT REQUIRED.**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**.NOT REQUIRED.**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill**

**1 Bob Foeller Drive**

**Suffolk, VA 23434**

10. US EPA ID Number

**.NOT REQUIRED.**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions#:**

**13341589**

**Project# 116539**

**Actual Weight:**

**18.40**

*usage*

16. **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.

Printed/Typed Name

*R M Hans*

Signature

*R M Hans*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Dawn Edwards*

Signature

*Dawn Edwards*

Month Day Year  
**3 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sepp*

Signature

*Donna Sepp*

Month Day Year  
**05 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **07-851**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&M Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill**

**1 Bob Foster Drive**

**Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Transactions: 13341596**

**Actual Weight: 21.24**

*Osage*

16. 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.

Printed/Typed Name

*RM HART*

Signature

*RM HART*

Month Day Year

**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. . .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Cothran*

Signature

*Steve Cothran*

Month Day Year

**5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*DSapp*

Month Day Year

**05 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07-232**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St, Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #28**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		
<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
.	.	.	.
.	.	.	.
.	.	.	.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** 13341586  
**Actual Weight:** 19.28

**Project# 116539**

*Usage*

16. **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.

Printed/Typed Name **B.M. HART**

Signature *B.M. Hart*

Month Day Year  
**15 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **R. CUFFEE**

Signature *R. Cuffee*

Month Day Year  
**15 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sagg**

Signature *D. Sagg*

Month Day Year  
**05 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01253**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **446-8703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
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a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

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c.

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d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
*Osage*

**Transaction#:** **13341601**  
**Actual Weight:** **19.08**

16. 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.

Printed/Typed Name **B.M. HART**

Signature *[Signature]*      Month Day Year **5 | 23 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A**      Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **ALICEP ROBSON**

Signature *[Signature]*      Month Day Year **5 | 23 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sepp**

Signature *[Signature]*      Month Day Year **05 | 23 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01234**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

**Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions: 13341620**

**Project# 118639**

**Actual Weight: 24.48**

*Capital*

16. 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.

Printed/Typed Name

*BM HART*

Signature

*BM HART*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Quinton Cross*

Signature

*Quinton Cross*

Month Day Year  
**5 23 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
**. . .**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*Donna Sapp*

Month Day Year  
**05 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01255**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive #14  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers	13. Total Quantity	14. Unit
No.	Type	Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>
.	.	.
.	.	.
.	.	.

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Capital**

**Transaction#:** **133 41623**

**Actual Weight:** **21.67**

16. **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.

Printed/Typed Name  
**RM Hart**

Signature  
*[Signature]*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
**C. Bates**

Signature  
*[Signature]*

Month Day Year  
**5 23 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name  
**N/A**

Signature  
**N/A**

Month Day Year  
.

19. Discrepancy Indication Space

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

Printed/Typed Name  
**Donna Sepp**

Signature  
*[Signature]*

Month Day Year  
**05 23 06**

TRANSPORTER

FACILITY

11111

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07-23-06**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~C&H Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #30**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

12. Containers  
No.    Type

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001    DT    00020    T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
*Osage*

Transactions#: **13341632**  
Actual Weight: **21.50**

16. 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.

Printed/Typed Name **RM HART**

Signature *RM HART*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Wayne Bashaw**

Signature *Wayne Bashaw*

Month Day Year  
**5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Saff**

Signature *DSaff*

Month Day Year  
**05 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
*01237*

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-8703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name *#15*  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

12. Containers  
No.    Type

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001    DT    00020    T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
*Capitol*

**Transactions#:** *13341635*  
**Actual Weight:** *25.10*

16. 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.

Printed/Typed Name *BM HANT*

Signature *[Signature]*      Month Day Year *5 23 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Erin Wiggins*

Signature *[Signature]*      Month Day Year *5 23 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*      Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Jeff*

Signature *[Signature]*      Month Day Year *05 23 06*

GENERATOR  
TRANSPORTER  
FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01238**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2781**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4857**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

12. Containers  
No.    Type

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001    DT    00020    T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13341642*

**Project# 116539**

**Actual Weight:**

*Capitol*

*21.97*

16. **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.

Printed/Typed Name *BM HANT*

Signature *[Signature]*

Month Day Year  
*5 23 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *RW FALLS*

Signature *[Signature]*

Month Day Year  
*5 23 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sapp*

Signature *[Signature]*

Month Day Year  
*05 23 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01259**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~**C&M Trucking**~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #28**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No.      Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions: 13341645**  
**Actual Weight: 19.36**

**Project# 116539**

*Usage*

16. **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.

Printed/Typed Name *RM HART*

Signature *[Signature]*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *R. CUFFEE*

Signature *R. Cuffee*

Month Day Year  
**5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sapp*

Signature *[Signature]*

Month Day Year  
**05 23 06**

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07260**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~**G&H Trucking**~~

6. US EPA ID Number

**.NOT REQUIRED.**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**.NOT REQUIRED.**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**.NOT REQUIRED.**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions#:**

**13341649**

**Project# 116539**

**Actual Weight:**

**18.61**

*Usage*

16. **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.

Printed/Typed Name

*RM Hant*

Signature

*RM Hant*

Month Day Year

**15 | 23 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. | . | .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Dawn Edwards*

Signature

*Dawn Edwards*

Month Day Year

**5 | 23 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Saep*

Signature

*Donna Saep*

Month Day Year

**10 | 23 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
*07261*

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **767** ) **445-8703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

12. Containers

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No.	Type	13. Total Quantity	14. Unit Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
.	.	.	.
.	.	.	.
.	.	.	.

b.

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c.

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d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transaction#:** *1341652*

**Actual Weight:** *21.23*

16. 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.

Printed/Typed Name  
*RM HART*

Signature  
*[Signature]*      Month Day Year  
*5 | 23 | 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
*N/A*

Signature  
*N/A*      Month Day Year  
*. | . | .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name  
*Steve Coulter*

Signature  
*[Signature]*      Month Day Year  
*5 | 23 | 06*

19. Discrepancy Indication Space

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

Printed/Typed Name  
*Donna Seff*

Signature  
*[Signature]*      Month Day Year  
*05 | 23 | 06*

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01262**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

A. Transporter's Phone  
**767 449-2761**

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

B. Transporter's Phone  
**767 487-4887**

8. US EPA ID Number  
**NOT REQUIRED**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

C. Facility's Phone  
**767 639-9373**

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
..	.	..	.

b.

..	.	..	.
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c.

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d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
*Usage*

**Transaction#:** *133 41 658*  
**Actual Weight:** *17.80*

16. 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.

Printed/Typed Name  
*RM Hantz*

Signature  
*[Signature]*      Month Day Year  
*5 23 06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
*N/A*

Signature  
*N/A*      Month Day Year  
*. . .*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
*Alfred Robinson*

Signature  
*[Signature]*      Month Day Year  
*5 23 06*

19. Discrepancy Indication Space

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

Printed/Typed Name  
*Donna Sage*

Signature  
*[Signature]*      Month Day Year  
*05 23 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**101263**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**      **#14**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

12. Containers      13. Total      14. Unit  
No.      Type      Quantity      Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001      DT      00020      T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions: 13341683**

**Project# 116539**

**Actual Weight: 23.10**

*Capitol*

16. 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.

Printed/Typed Name **RM Hant**

Signature *[Signature]*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **Quinton Cross**

Signature *[Signature]*

Month Day Year  
**5 23 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **n/a**

Signature **n/a**

Month Day Year  
. . .

19. Discrepancy Indication Space

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

Printed/Typed Name **Fenna Sapp**

Signature *[Signature]*

Month Day Year  
**10 5 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**D-1-264**

2. Page 1  
of **1**

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive #16  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 118539**  
*Capital*

**Transaction#:** *13341685*  
**Actual Weight:** *21.32*

16. 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.

Printed/Typed Name *RM Hant*

Signature *[Signature]*      Month Day Year *15 23 06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *C. Bates*

Signature *[Signature]*      Month Day Year *15 23 06*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *N/A*

Signature *N/A*      Month Day Year *. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sapp*

Signature *[Signature]*      Month Day Year *10 27 06*

GENERATOR

TRANSPORTER

FACILITY

1111

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. **0.12.05**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703** Attn: **Rob Schonk**

5. Transporter 1 Company Name  
~~G&H Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #30**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001 DT 00020 T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
*Osage*

Transaction#: **13341697**  
Actual Weight: **19.71**

16. 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.

Printed/Typed Name **BM Hant**

Signature *[Signature]*

Month Day Year **5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Wayne Bashaw**

Signature **Wayne Bashaw**

Month Day Year **5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sapp**

Signature *[Signature]*

Month Day Year **11 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-2-66**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name **C&H Trucking** # **15**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No.    Type

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001    DT    00020    T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
*Capitol*

**Transaction#:** *13341704*  
**Actual Weight:** *23.62*

16. **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.

Printed/Typed Name *RM Hart*

Signature *[Signature]*      Month Day Year *15 | 23 | 06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Erin Wiggins*

Signature *[Signature]*      Month Day Year *15 | 23 | 06*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *N/A*

Signature *N/A*      Month Day Year *. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Seff*

Signature *[Signature]*      Month Day Year *05 | 23 | 06*

GENERATOR  
TRANSPORTER  
FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-2-67**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~C&H Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #28**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

12. Containers  
No.    Type

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001    DT    00020    T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
*Osage*

**Transaction#:** 13341709  
**Actual Weight:** 18.22

16. **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.

Printed/Typed Name **R M Hart**

Signature *[Signature]*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **n/a**

Signature **n/a**

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **R. CUFFEE**

Signature *[Signature]*

Month Day Year  
**5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Seff**

Signature *[Signature]*

Month Day Year  
**05 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-2-08**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 GILBERT ST., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SP3A Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No.      Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001      DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: **13341712**

Project# **116539**

Actual Weight:

*Capitol*

**22.20**

16. 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.

Printed/Typed Name  
*RM/TRANS*

Signature  
*[Signature]*

Month    Day    Year  
**5    23    06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
*DAVID FALLS*

Signature  
*[Signature]*

Month    Day    Year  
**5    23    06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name  
*N/A*

Signature  
*N/A*

Month    Day    Year  
**.    .    .**

19. Discrepancy Indication Space

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

Printed/Typed Name  
*Denna Sepp*

Signature  
*[Signature]*

Month    Day    Year  
**10    23    06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-269**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
~~CNH Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No.	Type	13. Total Quantity	14. Unit Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
.	.	.	.
.	.	.	.
.	.	.	.

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transactions: 13341715**

**Actual Weight: 17.73**

16. 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.

Printed/Typed Name *B.M. Hart*

Signature *[Signature]*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *n/a*

Signature *n/a*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *Dawn Edwards*

Signature *Dawn Edwards*

Month Day Year  
**5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sepp*

Signature *[Signature]*

Month Day Year  
**05 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01270**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**~~C&H Trucking~~**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: **13341759**

Project# **116539**

Actual Weight: **22.46**

*Osage*

16. 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.

Printed/Typed Name **RM HANT**

Signature *RM Hant*

Month Day Year  
**15 23 06**

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **Steve Couther**

Signature *Steve Couther*

Month Day Year  
**15 23 06**

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Saff**

Signature *Donna Saff*

Month Day Year  
**05 23 06**

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**0121**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **446-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
~~C&H Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

12. Containers  
No.    Type

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001    DT    00020    T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116639**

*Osage*

**Transaction#:** *133 41726*

**Actual Weight:** *17.62*

16. 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.

Printed/Typed Name *ROM Hart*

Signature *[Signature]*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
**5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *Denna Sage*

Signature *[Signature]*

Month Day Year  
**05 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01272**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **446-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name **C&H Trucking**      6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name ~~South Norfolk Trucking~~      8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

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c.

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d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
**Capitol**

**Transaction#:** **1334739**  
**Actual Weight:** **23.89**

16. 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.

Printed/Typed Name **RM HART**

Signature *[Signature]*      Month Day Year **5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Quinton Cross**

Signature *[Signature]*      Month Day Year **5 23 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A**      Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sepp**

Signature *[Signature]*      Month Day Year **0 9 30 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01273**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Atn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill #16  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
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a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

--	--	--	--

c.

--	--	--	--

d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**  
*Capital*

**Transaction#:** *13341745*

**Actual Weight:** *20.27*

16. 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.

Printed/Typed Name *R M HART*

Signature *[Signature]*      Month *5* Day *23* Year *06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *C. Bates*

Signature *[Signature]*      Month *5* Day *23* Year *06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*      Month *.* Day *.* Year *.*

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Soff*

Signature *[Signature]*      Month *05* Day *23* Year *06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01274**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~GMH Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #30**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

12. Containers	13. Total Quantity	14. Unit
No. Type		Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
------------	-----------	--------------	----------

b.

--	--	--	--

c.

--	--	--	--

d.

--	--	--	--

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
*Osage*

**Transaction#:** **13341762**  
**Actual Weight:** **20.34**

16. 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.

Printed/Typed Name **RM Hart**

Signature *[Signature]*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Wayne Boslaw**

Signature *[Signature]*

Month Day Year  
**5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature *[Signature]*

Month Day Year  
**5 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. **0.12.15**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1610 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **446-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**      *A 15*

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill**  
**1 Bob Foeller Drive**  
**Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

12. Containers      13. Total Quantity      14. Unit

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No.	Type	Quantity	Unit
001	DT	00020	T
.	.	.	.

b.

No.	Type	Quantity	Unit
.	.	.	.

c.

No.	Type	Quantity	Unit
.	.	.	.

d.

No.	Type	Quantity	Unit
.	.	.	.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 118539**  
*Capitol*

Transaction#: **13341771**  
 Actual Weight: **25.54**

16. 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.

Printed/Typed Name *B M Hargett*

Signature *[Signature]*      Month Day Year **5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name *Chris Wiggins*

Signature *[Signature]*      Month Day Year **5 23 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
 Printed/Typed Name *N/A*

Signature *N/A*      Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*      Month Day Year **5 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07276**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

A. Transporter's Phone  
**757 449-2761**

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

B. Transporter's Phone  
**757 487-4867**

8. US EPA ID Number  
**NOT REQUIRED**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

C. Facility's Phone

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		
a. <b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.			
c.			
d.			

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
*Capitol*

**Transactions#:** *13341781*  
**Actual Weight:** *20-24*

16. 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.

Printed/Typed Name *RW HART*

Signature *[Signature]*

Month Day Year  
*5 23 06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *RW FALLS*

Signature *[Signature]*

Month Day Year  
*5 23 06*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
*5 23 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01277**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #28**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

12. Containers	13. Total Quantity	14. Unit
No. Type		Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: **13341791**

Project# **116539**

Actual Weight: **18.35**

*Osage*

16. 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.

Printed/Typed Name **RM Harris**

Signature *[Signature]*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **R. CUFFEE**

Signature *R. Cuffee*

Month Day Year  
**5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*      Month Day Year  
**5 23 06**

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01278**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transactions:**

**13341793**

**Actual Weight:**

**16.32**

16. **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.

Printed/Typed Name

*RM HANT*

Signature

*[Signature]*

Month Day Year

**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. . .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Dawn Edwards*

Signature

*[Signature]*

Month Day Year

**5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**5 23 06**

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07279**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **446-8703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~GM Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

12. Containers

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No.	Type	13. Total Quantity	14. Unit Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
..	.	..	.
..	.	..	.
..	.	..	.

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

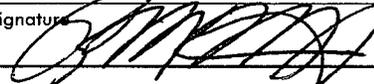
E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116639**  
**Osage**

**Transaction#:** **13341803**  
**Actual Weight:** **15.14**

16. 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.

Printed/Typed Name **RM Hart**

Signature 

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
. . .

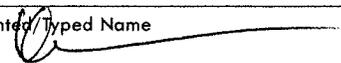
18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Alvin Barber**

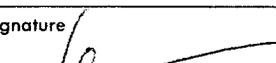
Signature 

Month Day Year  
**5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name 

Signature 

Month Day Year  
**5 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07280**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **446-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking #14**

A. Transporter's Phone  
**767 449-2761**

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

B. Transporter's Phone  
**767 487-4867**

8. US EPA ID Number  
**NOT REQUIRED**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

C. Facility's Phone  
**767 639-9373**

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description

a.	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
<b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
**Capitol**

**Transaction#:** **13341808**  
**Actual Weight:** **24.42**

16. 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.

Printed/Typed Name **R M Hant**

Signature *[Signature]*      Month Day Year **5 | 23 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Quinton Cross**

Signature *[Signature]*      Month Day Year **5 | 23 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A**      Month Day Year **. | . | .**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*      Month Day Year **5 | 23 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-281**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**      #16

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No.      Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transactions: **13341813**

Project# **118539**

Actual Weight: **20.52**

*Capital*

16. 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.

Printed/Typed Name *R.M. Harris*

Signature *[Signature]*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *C. Bates*

Signature *[Signature]*

Month Day Year  
**5 23 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
. . .

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
**5 23 06**

TRANSPORTER

FACILITY

1111

<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>NOT REQUIRED</b>	Manifest Document No. <b>01282</b>	2. Page 1 of 1
3. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1610 Gilbert St., Norfolk, VA 23511-2737</b>			Site: <b>NNSY Paradise Creek</b>	
4. Generator's Phone ( <b>767</b> ) <b>445-6703</b>		Attn: <b>Rob Schonk</b>		
5. Transporter 1 Company Name <del>CAM Trucking</del>	6. US EPA ID Number <b>NOT REQUIRED</b>	A. Transporter's Phone <b>767 449-2761</b>		
7. Transporter 2 Company Name <b>South Norfolk Trucking #30</b>	8. US EPA ID Number <b>NOT REQUIRED</b>	B. Transporter's Phone <b>767 487-4867</b>		
9. Designated Facility Name and Site Address <b>SPSA Regional Landfill 1 Bob Foster Drive Suffolk, VA 23434</b>		10. US EPA ID Number <b>NOT REQUIRED</b>	C. Facility's Phone <b>767 539-9373</b>	
11. Waste Shipping Name and Description		12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
a. <b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>		<b>001</b>	<b>DT</b>	<b>00020</b>
b.				
c.				
d.				
D. Additional Descriptions for Materials Listed Above			E. Handling Codes for Wastes Listed Above	
15. Special Handling Instructions and Additional Information <b>Project# 116539</b> <i>Osage</i>		Transactions: <b>133 41838</b> Actual Weight: <b>20.11</b>		
16. 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.				
Printed/Typed Name <i>R M Hart</i>		Signature <i>[Signature]</i>		Month Day Year <b>5   23   06</b>
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name <i>N/A</i>		Signature <i>N/A</i>		Month Day Year <b>.</b>
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name <i>Wayne Bashaw</i>		Signature <i>Wayne Bashaw</i>		Month Day Year <b>5   23   06</b>
19. Discrepancy Indication Space				
20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.				
Printed/Typed Name <i>[Signature]</i>		Signature <i>[Signature]</i>		Month Day Year <b>5   23   06</b>

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01283**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **446-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name **C&H Trucking** *#15*

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

12. Containers  
No.      Type

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001      DT      00020      T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116639**  
*Capitol*

**Transaction#:** *13391840*  
**Actual Weight:** *23.56*

16. 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.

Printed/Typed Name *RM Haver*

Signature *[Signature]*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Erin Wiggins*

Signature *[Signature]*

Month Day Year  
**5 23 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
**.  .  .**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
**5 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**017289**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **446-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~C&H Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

No.      Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
  
**Project# 116539**  
  
*usage*

**Transaction# 13341832**  
**Actual Weight: 22.78**

16. 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.

Printed/Typed Name **R M HART**

Signature *[Signature]*

Month Day Year  
**15 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Steve Couther**

Signature *[Signature]*

Month Day Year  
**15 23 06**

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
**15 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01285**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **767** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

a.	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
<b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**  
*Capitol*

**Transactions#:** *13341845*

**Actual Weight:** *20.75*

16. 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.

Printed/Typed Name *RM Hart*

Signature *[Signature]*      Month *5* Day *23* Year *06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *KW Falls*

Signature *[Signature]*      Month *5* Day *23* Year *06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*      Month *.* Day *.* Year *.*

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*      Month *5* Day *23* Year *06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01286**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**~~C&H Trucking~~**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No.    Type

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001    DT    00020    T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
*Osage*

**Transaction#:** *13341860*  
**Actual Weight:** *16.82*

16. 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.

Printed/Typed Name *RM HART*

Signature *[Signature]*      Month Day Year *5 23 06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *N/A*

Signature *N/A*      Month Day Year . . .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *[Signature]*

Signature *[Signature]*      Month Day Year *5 23 06*

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*      Month Day Year *5 23 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. **01287**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703** **Atn: Rob Schonk**

5. Transporter 1 Company Name **#14**  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~**Southern Trucking**~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill**  
**1 Bob Foeller Drive**  
**Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No.	Type	13. Total Quantity	14. Unit Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
.	.	.	.
.	.	.	.
.	.	.	.

b.

.	.	.	.
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c.

.	.	.	.
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d.

.	.	.	.
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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116639**  
*Capitol*

**Transaction#:** **13341869**  
**Actual Weight:** **24.65**

16. 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.

Printed/Typed Name **BM HART**

Signature *[Signature]*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name **Quinton Cross**

Signature *[Signature]*

Month Day Year  
**5 23 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
 Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
 . . .

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
**5 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01288**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **446-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2781**

7. Transporter 2 Company Name  
**South Norfolk Trucking #28**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4887**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		
a. <b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.			
c.			
d.			

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions#:** **13341890**

**Project# 116539**

**Actual Weight:** **18.48**

*Osage*

16. 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.

Printed/Typed Name *RM Hart*

Signature *RM Hart*

Month Day Year  
**3 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *n/a*

Signature *n/a*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *R. CUFFEE*

Signature *R. Cuffee*

Month Day Year  
**5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
**5 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07-289**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-8703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**~~C&H Trucking~~**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

a.	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
<b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
*Osage*

**Transactions: 13341898**  
**Actual Weight: 21.17**

16. 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.

Printed/Typed Name *RM HART*

Signature *[Signature]*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Steve Coulter*

Signature *Steve Coulter*

Month Day Year  
**5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
**5 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01290**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
~~SEA Transporting~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~ **South Norfolk**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill**      **# 29**  
**1 Bob Foeller Drive**  
**Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No.      Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**      **DT**      **00020**      **T**

b.

.....

c.

.....

d.

.....

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transaction#:** **13341911**

**Actual Weight:** **18.94**

16. 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.

Printed/Typed Name *R M Hart*

Signature *R M Hart*      Month Day Year **5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*      Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *Dawn Edwards*

Signature *Dawn Edwards*      Month Day Year **5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sapp*

Signature *Donna Sapp*      Month Day Year **5 23 06**

ORIGINAL RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

111111

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. **01291**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #30**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001 DT 00020 T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 118539**  
*Asag6*

**Transaction#:** **13341903**  
**Actual Weight:** **21.51**

16. 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.

Printed/Typed Name **RM Hest**

Signature *[Signature]*

Month Day Year **12 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Wayne Bashaw**

Signature *Wayne Bashaw*

Month Day Year **12 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sapp**

Signature *[Signature]*

Month Day Year **10 23 06**

ORIGINAL RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**B1-299**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill #14  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

--	--	--	--

c.

--	--	--	--

d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116639**  
*Capitol*

**Transaction#:** *13341915*  
**Actual Weight:** *20.00*

16. **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.

Printed/Typed Name *RM HART*

Signature *[Signature]*      Month Day Year *15 | 23 | 06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *R. Bates*

Signature *[Signature]*      Month Day Year *15 | 23 | 06*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *N/A*

Signature *N/A*      Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*      Month Day Year *15 | 29 | 00*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No. **01293**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-8703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name **#15  
C&H Trucking**      6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~      8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**      10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. <b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 118639**      **Transaction#:** **13341919**

**Capitol**      **Actual Weight:** **23.84**

16. 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.

Printed/Typed Name **R M HART**      Signature **[Signature]**      Month **3** Day **23** Year **06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **Ervin Wiggins**      Signature **[Signature]**      Month **5** Day **23** Year **06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**      Signature **N/A**      Month **.** Day **.** Year **.**

19. Discrepancy Indication Space

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

Printed/Typed Name **[Signature]**      Signature **[Signature]**      Month **5** Day **23** Year **06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**107294**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

**13341926**

**Actual Weight:**

**21.70**

16. **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.

Printed/Typed Name

*R M Hart*

Signature

*[Signature]*

Month Day Year

**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*K W Falls*

Signature

*[Signature]*

Month Day Year

**5 23 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**· · ·**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*[Signature]*

Month Day Year

**10 23 06**

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07-075**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No. **001**

Type **DT**

**00020**

**T**

b.   
c.   
d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 118639**  
*Osage*

Transaction#: **13341955**  
Actual Weight: **17.70**

16. 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.

Printed/Typed Name **R MITCHELL**

Signature *[Signature]*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **ALLEN RABSON**

Signature *[Signature]*

Month Day Year  
**5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
**5 23 06**

GENERATOR  
TRANSPORTER  
FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01296**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

*#14*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill**

**1 Bob Foster Drive**

**Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116639**

*Capitol*

**Transaction#:** *13341949*

**Actual Weight:** *24.98*

16. **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.

Printed/Typed Name

*RM Hart*

Signature

*RM Hart*

Month Day Year

*5 23 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Quinton Cross*

Signature

*Quinton Cross*

Month Day Year

*5 23 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*5 23 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
*01-29-1*

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 118539**

*Usage*

**Transactions: 13341962**  
**Actual Weight: 2158**

16. **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.

Printed/Typed Name

*R M Hart*

Signature

*R M Hart*

Month Day Year  
*5 23 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
*. . .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Coulter*

Signature

*Steve Coulter*

Month Day Year  
*5 23 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
*5 23 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest  
Document No.  
**07298**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
~~C&H Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2781**

7. Transporter 2 Company Name  
**South Norfolk Trucking #28**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol		
No.	Type				
a.	<b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.					
c.					
d.					

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**    **DT**    **00020**    **T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** 13341974

**Project#** 116539

**Actual Weight:** 18.05

*Osage*

16. **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.

Printed/Typed Name *RM Hart*

Signature *RM Hart*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *R. CUFFEE*

Signature *R Cuffee*

Month Day Year  
**5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
**5 23 06**

GENERATOR

TRANSPORTER

FACILITY

1111/11

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. **07-29-9**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703** Attn: **Rob Schonk**

5. Transporter 1 Company Name  
~~G&H Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #30**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001 DT 00020 T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
*Osage*

Transaction#:  
**13341980**  
Actual Weight:  
**20.01**

16. 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.

Printed/Typed Name **RM HART**

Signature *[Signature]* Month Day Year **5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A** Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Wayne Bashaw**

Signature *Wayne Bashaw* Month Day Year **5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature *[Signature]* Month Day Year **5 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01300**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **446-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~**C&H Trucking**~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SP3A Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
--------------------	------	--------------------	-----------------

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.			
c.			
d.			

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transactions#: **13341982**

Project# **116539**

Actual Weight: **17.74**

*Osage*

16. 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.

Printed/Typed Name **R M Harris**

Signature *[Signature]*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **Dawn Edwards**

Signature *[Signature]*

Month Day Year  
**5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
**9 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest  
Document No. **07301**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

*#16*

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

**001**

**DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

*1333 42001*

**Actual Weight:**

*20.89*

16. **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.

Printed/Typed Name

*Rm HART*

Signature

*[Signature]*

Month Day Year

*5 23 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*C. Bates*

Signature

*[Signature]*

Month Day Year

*5 23 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*5 23 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**0.1.3.02**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name **C&H Trucking #15**      6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name ~~South Norfolk Trucking~~      8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
------------	-----------	--------------	----------

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** 13342024  
**Actual Weight:** 22.60

**Project# 116539**

*Capitol*

16. **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.

Printed/Typed Name *RM Hart*

Signature *[Signature]*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Erin Wiggins*

Signature *[Signature]*

Month Day Year  
**5 23 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
**. . .**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
**5 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07303**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

*17342010*

**Actual Weight:**

*21.08*

16. **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.

Printed/Typed Name

*R M Hart*

Signature

*[Signature]*

Month Day Year

*5 23 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

*5 23 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*n/a*

Signature

*n/a*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*5 23 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-304**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**      Attn: **Rob Schonk**

5. Transporter 1 Company Name  
~~CAF Trucking~~

A. Transporter's Phone  
**767 449-2761**

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

B. Transporter's Phone  
**767 487-4867**

8. US EPA ID Number  
**NOT REQUIRED**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

C. Facility's Phone  
**767 639-9373**

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description

12. Containers  
No.      Type

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

13. Total Quantity  
**00020**

b.

14. Unit Wt/Vol  
**T**

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116639**  
**Osage**

**Transaction#: 13342052**  
**Actual Weight: 16.75**

16. 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.

Printed/Typed Name  
**B M Hayes**

Signature  
*B M Hayes*

Month Day Year  
**5 | 23 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
**N/A**

Signature  
**N/A**

Month Day Year  
**. | . | .**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
**Dawn Edwards**

Signature  
*Dawn Edwards*

Month Day Year  
**5 | 23 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name  
*[Signature]*

Signature  
*[Signature]*

Month Day Year  
**5 | 23 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-505**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **446-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #28**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	
				a. <b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116639**      **Transaction#:** 13342050  
*Osage*      **Actual Weight:** 17.63

16. 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.

Printed/Typed Name **RM Hart**      Signature *[Signature]*      Month **5** Day **23** Year **06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**      Signature **N/A**      Month **.** Day **.** Year **.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **R. CUFFEE**      Signature *[Signature]*      Month **5** Day **23** Year **06**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*      Signature *[Signature]*      Month **5** Day **23** Year **06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-3-06**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **767** ) **445-8703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
~~Cam Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No.	Type	13. Total Quantity	14. Unit Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
.	.	.	.
.	.	.	.

b.

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c.

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d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 118539**

*Usage*

**Transactions# 13342044**

**Actual Weight: 20.59**

16. 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.

Printed/Typed Name *RM Harts*

Signature *[Signature]*      Month Day Year **5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*      Month Day Year . . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *Steve Coulter*

Signature *[Signature]*      Month Day Year **5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*      Month Day Year **5 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01307**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**~~C&H Trucking~~**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13342035**

**Project# 118539**

**Actual Weight: 17.71**

*Osage*

16. 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.

Printed/Typed Name

*RM HART*

Signature

*[Signature]*

Month Day Year

**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. . .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Agnes Robinson*

Signature

*[Signature]*

Month Day Year

**5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

**5 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-308**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name **C&H Trucking # 5**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description  
**a. Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
.	.	.	.

b.

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c.

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d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 118539**  
*Capitol*

**Transaction#:** *13342030*  
**Actual Weight:** *18.28*

16. 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.

Printed/Typed Name *RM Hart*

Signature *[Signature]*

Month Day Year  
. . .

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *L SCOTT*

Signature *[Signature]*

Month Day Year  
*5 23 06*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
. . .

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
*5 23 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. **01-309**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703** **Attn: Rob Schonk**

5. Transporter 1 Company Name **C&H Trucking # 11** 6. US EPA ID Number **NOT REQUIRED**

A. Transporter's Phone **757 449-2761**

7. Transporter 2 Company Name ~~South Norfolk Trucking~~ 8. US EPA ID Number **NOT REQUIRED**

B. Transporter's Phone **757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill**  
**1 Bob Foeller Drive**  
**Suffolk, VA 23434**

10. US EPA ID Number **NOT REQUIRED** C. Facility's Phone **757 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
--------------------	--------------------	-----------------

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

--	--	--	--

c.

--	--	--	--

d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Transaction#:** 13342045  
**Project#** 116539 **Actual Weight:** 20.50  
*Capitol*

16. 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.

Printed/Typed Name *R M HART*

Signature *[Signature]*

Month Day Year . . .

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name *M. Smith*

Signature *[Signature]*

Month Day Year **5 | 23 | 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
 Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year . . .

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year **5 | 23 | 06**

GENERATOR

TRANSPORTER

FACILITY

11A-111

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED** Manifest Document No. **07310**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **446-6703** **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**G&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #30**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001 DT 00020 T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 118539**  
*Osage*

**Transaction#:**  
**Actual Weight:**  
**133 42051**  
**19.25**

16. 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.

Printed/Typed Name **BM Hart**

Signature *BM Hart*

Month Day Year  
**5 23 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
**.**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Wayne Bashaw**

Signature *Wayne Bashaw*

Month Day Year  
**5 23 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
**5 23 06**

GENERATOR

TRANSPORTER

FACILITY

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13341572  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 07:23  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pymt Type: Charge
GROSS WEIGHT:	68620	34.31	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25480	12.74	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	43140	21.57		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13341565  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 07:13  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	73680	36.84	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27020	13.51	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	46660	23.33		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16  
Trailer:

Tag:16  
Tag:

Transaction #: 13341573  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 07:24  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	71720	35.86	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27860	13.93	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	43860	21.93		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15

Tag:15

Transaction #: 13341577

Trailer:

Tag:

Attendant ID: DS

Customer: 602719

CAPITOL ENVIRONMENTAL SERV, INC.

Date: 05/23/06

15-C TROLLEY SQUARE

Time: 07:29

WILMINGTON DE 19806

Site: 13

REFUSE TYPE:ADC1575-Gray

				Tran Type: Capitol Environmental
	LBS	TONS		Pymt Type: Charge
GROSS WEIGHT:	76720	38.36	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27320	13.66	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	49400	24.70		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:18                      Tag:18                      Transaction #: 13341582  
Trailer:                      Tag:                      Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.                      Date: 05/23/06  
15-C TROLLEY SQUARE                      Time: 07:35  
WILMINGTON                      DE                      19806                      Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pymt Type: Charge
GROSS WEIGHT: 70220	35.11	SCALE:MAN WT		Origin: Offsite Waste Producer
TARE WEIGHT: 25160	12.58	SCALE:(K)		Dest: Regional Landfill
NET WEIGHT: 45060	22.53			State: VA MSW
VOL: 0				Driver: N/A

REMARKS:

-----  
THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29  
Trailer:

Tag:#29  
Tag:

Transaction #: 13341589  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 07:42  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pynt Type: Charge
GROSS WEIGHT:	63460	31.73	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	26660	13.33	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	36800	18.40		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13341596  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 07:51  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pynt Type: Charge
GROSS WEIGHT:	68440	34.22	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25960	12.98	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	42480	21.24		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13341586  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 07:39  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	64320	32.16	SCALE:MAN WT
TARE WEIGHT:	25760	12.88	SCALE:(K)
NET WEIGHT:	38560	19.28	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: N/A  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#33  
Trailer:

Tag:#33  
Tag:

Transaction #: 13341601  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 07:56  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pynt Type: Charge
GROSS WEIGHT:	64080	32.04	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25920	12.96	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	38160	19.08		State: VA MSW
VOL:	0			Driver: N/A

REMARKS :

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13341620  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 08:32  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS
GROSS WEIGHT:	75980	37.99
TARE WEIGHT:	27020	13.51
NET WEIGHT:	48960	24.48
VOL:	0	

Tran Type: Capitol Environmental  
Pynt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!



SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13341632  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 08:46  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	68480	34.24	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25480	12.74	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	43000	21.50		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15  
Trailer:

Tag:15  
Tag:

Transaction #: 13341635  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 08:49  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	77520	38.76	SCALE:MAN WT
TARE WEIGHT:	27320	13.66	SCALE:(K)
NET WEIGHT:	50200	25.10	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18 Tag:18 Transaction #: 13341642  
Trailer: Tag: Attendant ID: DS

Customer: 602719 Date: 05/23/06  
CAPITOL ENVIRONMENTAL SERV, INC. Time: 08:54  
15-C TROLLEY SQUARE Site: 13  
WILMINGTON DE 19806

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	69100	34.55	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	25160	12.58	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	43940	21.97		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13341645  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 09:00  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	64480	32.24	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25760	12.88	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	38720	19.36		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: N/A
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29  
Trailer:

Tag:#29  
Tag:

Transaction #: 13341649  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 09:04  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	63880	31.94	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	26660	13.33	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	37220	18.61		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS :

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13341652  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 09:10  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:	MAN WT	Tran Type: Osage of Virginia
GROSS WEIGHT:	68420	34.21	SCALE:MAN	WT	Pynt Type: Charge
TARE WEIGHT:	25960	12.98	SCALE:(K)		Origin: Offsite Waste Producer
NET WEIGHT:	42460	21.23			Dest: Regional Landfill
VOL:	0				State: VA MSW
					Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#33  
Trailer:

Tag:#33  
Tag:

Transaction #: 13341658  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 09:18  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT	Tran Type: Osage of Virginia
GROSS WEIGHT:	61520	30.76	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25920	12.96	SCALE: (K)	Origin: Offsite Waste Producer
NET WEIGHT:	35600	17.80		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13341683  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 09:44  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 73220 36.61 SCALE:MAN WT  
TARE WEIGHT: 27020 13.51 SCALE:(K)  
NET WEIGHT: 46200 23.10  
VOL: 0

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16  
Trailer:

Tag:16  
Tag:

Transaction #: 13341685  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 09:45  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	70500	35.25	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27860	13.93	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	42640	21.32		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13341697  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 09:59  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	64900	32.45	SCALE:MAN WT
TARE WEIGHT:	25480	12.74	SCALE:(K)
NET WEIGHT:	39420	19.71	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15 Tag:15 Transaction #: 13341704  
Trailer: Tag: Attendant ID: DS

Customer: 602719 Date: 05/23/06  
CAPITOL ENVIRONMENTAL SERV, INC. Time: 10:05  
15-C TROLLEY SQUARE Site: 13  
WILMINGTON DE 19806

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	74560	37.28	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	27320	13.66	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	47240	23.62		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13341709  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 10:11  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	62200	31.10	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25760	12.88	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	36440	18.22		Dest: Regional Landfill
VOL:	0			State: N/A
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18  
Trailer:

Tag:18  
Tag:

Transaction #: 13341712  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 10:13  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	69560	34.78	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	25160	12.58	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	44400	22.20		Origin: Offsite Waste Producer
VOL:	0			Dest: Suffolk Transfer
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29  
Trailer:

Tag:#29  
Tag:

Transaction #: 13341715  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 10:19  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	62120	31.06	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	26660	13.33	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	35460	17.73		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13341759  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 11:07  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:	MAN	WT	Origin:
GROSS WEIGHT:	70880	35.44	SCALE:MAN	WT		Offsite Waste Producer
TARE WEIGHT:	25960	12.98	SCALE:(K)			Dest: Regional Landfill
NET WEIGHT:	44920	22.46				State: VA MSW
VOL:	0					Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#33  
Trailer:

Tag:#33  
Tag:

Transaction #: 13341726  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 10:31  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	61160	30.58	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25920	12.96	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	35240	17.62		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13341739  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 10:48  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	74800	37.40	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27020	13.51	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	47780	23.89		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16  
Trailer:

Tag:16  
Tag:

Transaction #: 13341745  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 10:55  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT	Tran Type: Capitol Environmental
GROSS WEIGHT:	68400	34.20	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	27860	13.93	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	40540	20.27		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13341762  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 11:11  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	66160	33.08	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25480	12.74	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	40680	20.34		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15  
Trailer:

Tag:15  
Tag:

Transaction #: 13341771  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 11:20  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS
GROSS WEIGHT:	78400	39.20
TARE WEIGHT:	27320	13.66
NET WEIGHT:	51080	25.54
VOL:	0	

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18  
Trailer:

Tag:18  
Tag:

Transaction #: 13341781  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 11:28  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	65640	32.82	SCALE:MAN WT
TARE WEIGHT:	25160	12.58	SCALE:(K)
NET WEIGHT:	40480	20.24	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28 Tag:#28 Transaction #: 13341791  
Trailer: Tag: Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 11:36  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pynt Type: Charge
GROSS WEIGHT:	62460	31.23	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25760	12.88	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	36700	18.35		State: N/A
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29  
Trailer:

Tag:#29  
Tag:

Transaction #: 13341793  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 11:38  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN	WT
GROSS WEIGHT:	59300	29.65	SCALE:(K)	
TARE WEIGHT:	26660	13.33		
NET WEIGHT:	32640	16.32		
VOL:	0			

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#33  
Trailer:

Tag:#33  
Tag:

Transaction #: 13341803  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 11:47  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	56200	28.10	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25920	12.96	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	30280	15.14		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13341808  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 11:54  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT	Tran Type: Capitol Environmental
GROSS WEIGHT:	75860	37.93	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	27020	13.51	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	48840	24.42		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16  
Trailer:

Tag:16  
Tag:

Transaction #: 13341813  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 12:00  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:	Tran Type:
GROSS WEIGHT:	68900	34.45	MAN WT	Capitol Environmental
TARE WEIGHT:	27860	13.93	(K)	Pymt Type: Charge
NET WEIGHT:	41040	20.52		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13341838  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 12:25  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	65700	32.85	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25480	12.74	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	40220	20.11		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15  
Trailer:

Tag:15  
Tag:

Transaction #: 13341840  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 12:27  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	74440	37.22	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27320	13.66	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	47120	23.56		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13341832  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 12:17  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	71520	35.76	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25960	12.98	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	45560	22.78		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18 Tag:18  
Trailer: Tag:

Transaction #: 13341845  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 12:37  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	66660	33.33	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	25160	12.58	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	41500	20.75		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#33                      Tag:#33                      Transaction #: 13341860  
Trailer:                      Tag:                      Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC                      Date: 05/23/06  
2618A COLLEY AVENUE                      Time: 12:51  
NORFOLK                      VA      23517                      Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pymt Type: Charge
GROSS WEIGHT:	59560	29.78	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25920	12.96	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	33640	16.82		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

-----  
THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13341867  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 13:04  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	76320	38.16	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27020	13.51	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	49300	24.65		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS :

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13341890  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 13:34  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN	WT
GROSS WEIGHT:	62720	31.36	SCALE:(K)	
TARE WEIGHT:	25760	12.88		
NET WEIGHT:	36960	18.48		
VOL:	0			

Tran Type: Osage of Virginia  
Pynt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: N/A  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#34                      Tag:#34                      Transaction #: 13341898  
Trailer:                      Tag:                      Attendant ID: KS  
-----

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK                      VA      23517  
Date: 05/23/06  
Time: 13:40  
Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	68300	34.15	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25960	12.98	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	42340	21.17		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

-----  
THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29  
Trailer:

Tag:#29  
Tag:

Transaction #: 13341911  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 13:51  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	62940	31.47	SCALE:MAN WT
TARE WEIGHT:	26660	13.33	SCALE:(K)
NET WEIGHT:	36280	18.14	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13341903  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 13:42  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	68500	34.25	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25480	12.74	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	43020	21.51		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16 Tag:16 Transaction #: 13341915  
Trailer: Tag: Attendant ID: DS

Customer: 602719 Date: 05/23/06  
CAPITOL ENVIRONMENTAL SERV, INC. Time: 13:57  
15-C TROLLEY SQUARE Site: 13  
WILMINGTON DE 19806

REFUSE TYPE:ADC1575-Gray  
Tran Type: Capitol Environmental  
LBS TONS Pymt Type: Charge  
GROSS WEIGHT: 67860 33.93 SCALE:MAN WT Origin: Offsite Waste Producer  
TARE WEIGHT: 27860 13.93 SCALE:(K) Dest: Regional Landfill  
NET WEIGHT: 40000 20.00 State: VA MSW  
VOL: 0 Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15 Tag:15  
Trailer: Tag:

Transaction #: 13341919  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 14:02  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT
GROSS WEIGHT:	75000	37.50	SCALE:(K)
TARE WEIGHT:	27320	13.66	
NET WEIGHT:	47680	23.84	
VOL:	0		

Tran Type: Capitol Environmental  
Pynt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:18                      Tag:18                      Transaction #: 13341926  
Trailer:                      Tag:                      Attendant ID: KS  
-----

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON              DE      19806

Date: 05/23/06  
Time: 14:09  
Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pymt Type: Charge
GROSS WEIGHT:	68560	34.28	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25160	12.58	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	43400	21.70		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#33  
Trailer:

Tag:#33  
Tag:

Transaction #: 13341955  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 14:35  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	61320	30.66	SCALE:MAN WT
TARE WEIGHT:	25920	12.96	SCALE:(K)
NET WEIGHT:	35400	17.70	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13341949  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 14:27  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 76980 38.49 SCALE:MAN WT  
TARE WEIGHT: 27020 13.51 SCALE:(K)  
NET WEIGHT: 49960 24.98  
VOL: 0

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#34                      Tag:#34                      Transaction #: 13341962  
Trailer:                      Tag:                      Attendant ID: KS  
-----

Customer: 602723                      Date: 05/23/06  
OSAGE OF VIRGINIA INC                      Time: 14:42  
2618A COLLEY AVENUE                      Site: 13  
NORFOLK                      VA      23517  
-----

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pynt Type: Charge
GROSS WEIGHT:	69120	34.56	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25960	12.98	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	43160	21.58		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13341974  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 14:50  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	61860	30.93	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25760	12.88	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	36100	18.05		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: N/A
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13341980  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 14:53  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 65500 32.75 SCALE:MAN WT  
TARE WEIGHT: 25480 12.74 SCALE:(K)  
NET WEIGHT: 40020 20.01  
VOL: 0

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29  
Trailer:

Tag:#29  
Tag:

Transaction #: 13341982  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 14:55  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	62140	31.07	SCALE:MAN WT
TARE WEIGHT:	26660	13.33	SCALE:(K)
NET WEIGHT:	35480	17.74	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:16  
Trailer:

Tag:16  
Tag:

Transaction #: 13342001  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 15:12  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT
GROSS WEIGHT:	69640	34.82	SCALE:MAN WT
TARE WEIGHT:	27860	13.93	SCALE:(K)
NET WEIGHT:	41780	20.89	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15  
Trailer:

Tag:15  
Tag:

Transaction #: 13342024  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 15:33  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN	WT
GROSS WEIGHT:	72520	36.26	SCALE:(K)	
TARE WEIGHT:	27320	13.66		
NET WEIGHT:	45200	22.60		
VOL:	0			

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:18                      Tag:18                                      Transaction #: 13342010  
Trailer:                      Tag:    Attendant ID: KS  
-----

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON              DE      19806

Date: 05/23/06  
Time: 15:20  
Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	67320	33.66	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	25160	12.58	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	42160	21.08		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29 Tag:#29 Transaction #: 13342052  
Trailer: Tag: Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 16:08  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	60160	30.08	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	26660	13.33	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	33500	16.75		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#28                      Tag:#28                      Transaction #: 13342050  
Trailer:                      Tag:                      Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK                      VA      23517

Date: 05/23/06  
Time: 16:05  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pynt Type: Charge
GROSS WEIGHT:	61020	30.51	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25760	12.88	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	35260	17.63		State: N/A
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13342044  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 15:59  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	67140	33.57	SCALE:MAN WT
TARE WEIGHT:	25960	12.98	SCALE:(K)
NET WEIGHT:	41180	20.59	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#33  
Trailer:

Tag:#33  
Tag:

Transaction #: 13342035  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 15:44  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	61340	30.67	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25920	12.96	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	35420	17.71		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

*Perdner*

Truck:#5  
Trailer:

Tag:#5  
Tag:

Transaction #: 13342030  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 15:38  
Site: 13

REFUSE TYPE: ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	62900	31.45	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	26340	13.17	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	36560	18.28		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

PER DRIVER

Truck:11  
Trailer:

Tag:11  
Tag:

Transaction #: 13342045  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/23/06  
Time: 16:00  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	66340	33.17	SCALE:MAN WT
TARE WEIGHT:	25340	12.67	SCALE:(K)
NET WEIGHT:	41000	20.50	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13342051  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/23/06  
Time: 16:07  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	63980	31.99	SCALE:MAN WT
TARE WEIGHT:	25480	12.74	SCALE:(K)
NET WEIGHT:	38500	19.25	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

May 24, 2006

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. **01311**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

Attn: **Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking** *214*

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2781**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill**  
**1 Bob Foeller Drive**  
**Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description  
**Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

a.	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

Transaction#: **13342157**

Actual Weight: **20.87**

16. 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.

Printed/Typed Name **BM HART**

Signature *[Signature]*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **Quinton Cross**

Signature *[Signature]*

Month Day Year  
**15 12 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
**15 12 06**

19. Discrepancy Indication Space

Month Day Year  
 . . .

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

Printed/Typed Name **Denise Saal**

Signature *[Signature]*

Month Day Year  
**05 23**

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

11111

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. **01-3-12**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: MNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-5703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~C&H Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #30**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001 DT 00020 T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:**

**Project# 116539**

**Actual Weight:**

*Usage*

**133 42159**

**18.74**

16. **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.

Printed/Typed Name

*B M Hart*

Signature

*B M Hart*

Month Day Year

**5 24 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**- - -**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bashaw*

Signature

*Wayne Bashaw*

Month Day Year

**5 24 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*D Sapp*

Month Day Year

**05 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07-3-13**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **446-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking # 11**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4887**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** 13342163  
**Actual Weight:** 19.38

**Project# 116539**

*Capitol*

16. **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.

Printed/Typed Name *RM HART*

Signature *[Signature]*

Month Day Year  
**5 24 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *M. Smith*

Signature *[Signature]*

Month Day Year  
**5 24 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
. . .

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sapp*

Signature *[Signature]*

Month Day Year  
**10 24 06**

TRANSPORTER FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07-3-14**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~CAN Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill**

**1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:**

**13342166**

**Project# 116539**

**Actual Weight:**

**20.38**

*Osage*

16. **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.

Printed/Typed Name

*BM Hart*

Signature

*[Signature]*

Month Day Year

**5 | 24 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. | . | .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Coulter*

Signature

*Steve Coulter*

Month Day Year

**5 | 24 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Seff*

Signature

*[Signature]*

Month Day Year

**10 | 5 | 24 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**07-315**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill**

**1 Bob Foeller Drive**

**Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions:**

**13342169**

**Project# 116639**

**Actual Weight:**

**17.11**

*Osage*

16. **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.

Printed/Typed Name

*RM HANT*

Signature

*[Signature]*

Month Day Year

**15 24 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. . .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Robbison*

Signature

*[Signature]*

Month Day Year

**15 24 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna SGRP*

Signature

*[Signature]*

Month Day Year

**10 24 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01316**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **446-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**      *#16*

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

12. Containers  
No.      Type

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001      DT      00020      T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
  
**Project# 116539**  
*Capitol*

**Transaction#:** *13342178*  
**Actual Weight:** *19.02*

16. **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.

Printed/Typed Name *RM Harvey*

Signature *RM Harvey*      Month Day Year *5 24 06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *C. Bates*

Signature *C. Bates*      Month Day Year *5 24 06*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *N/A*

Signature *N/A*      Month Day Year *. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sapp*

Signature *Donna Sapp*      Month Day Year *05 24 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **07-3-17**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name **#15  
C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transactions: 13342172**

**Actual Weight: 23.53**

16. 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.

Printed/Typed Name

*RM HART*

Signature

*RM Hart*

Month Day Year

**5 24 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*W. Wiggins*

Signature

*W. Wiggins*

Month Day Year

**5 24 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. . .**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Seep*

Signature

*D Seep*

Month Day Year

**05 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01318**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No.      Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001      DT      00020      T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions: 13342176**  
**Actual Weight: 20.42**

**Project# 116539**

*Capitol*

16. **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.

Printed/Typed Name *RM HART*

Signature *[Signature]*

Month Day Year  
**5 24 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *KW FALLS*

Signature *[Signature]*

Month Day Year  
**5 24 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
**. . .**

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sepp*

Signature *[Signature]*

Month Day Year  
**05 23 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest  
Document No.  
**07.3.1.9**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
~~GM Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #28**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4887**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No.    Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001    DT    00020    T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transaction#:** **13342179**

**Actual Weight:** **17.03**

16. **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.

Printed/Typed Name *R.M. Harts*

Signature *[Signature]*

Month Day Year  
**3 29 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **R. CUFFEE**

Signature *R. Cuffee*

Month Day Year  
**5 24 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *Dennis Sepp*

Signature *[Signature]*

Month Day Year  
**10 5 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01320**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transaction#:**

*13342168*

**Actual Weight:**

*17.34*

16. **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.

Printed/Typed Name

*RM HART*

Signature

*RM Hart*

Month Day Year

*15 24 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*15 24 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Dawn Edwards*

Signature

*Dawn Edwards*

Month Day Year

*15 24 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*Donna Sapp*

Month Day Year

*05 24 06*

TRANSPORTER FACILITY

ORIGINAL - RETURN TO GENERATOR

6

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. **01321**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23611-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **446-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking (DD4B)**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
.	.	.	.
.	.	.	.
.	.	.	.

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Transaction#:**  
**Project# 116539**  
**Actual Weight:**

*Capitol*

16. 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.

Printed/Typed Name *BM Harty*

Signature *[Signature]*

Month Day Year  
**5 24 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Jeffrey M SCATON*

Signature *[Signature]*

Month Day Year  
**5 24 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
.

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sapp*

Signature *[Signature]*

Month Day Year  
**05 24 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**0.7.3.22**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

A. Transporter's Phone  
**767 449-2761**

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

B. Transporter's Phone  
**767 487-4867**

8. US EPA ID Number  
**NOT REQUIRED**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

C. Facility's Phone  
**767 539-9373**

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description

12. Containers

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No.	Type	13. Total Quantity	14. Unit Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
.	.	.	.
.	.	.	.
.	.	.	.

b.

.	.	.	.
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c.

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d.

.	.	.	.
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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** **13342189**

**Project# 116539**

**Actual Weight:** **17.90**

*Capitol*

16. 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.

Printed/Typed Name **BM HART**

Signature *[Signature]*      Month Day Year **15 24 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **George GEORGE SORRELL**

Signature *[Signature]*      Month Day Year **15 24 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**      Month Day Year . . .

19. Discrepancy Indication Space

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

Printed/Typed Name **Dean Saff**

Signature *[Signature]*      Month Day Year **10 24 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**DT-3-23**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St, Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking # 14**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		
a. <b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>
b.			
c.			
d.			

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**      **DT**      **00020**      **T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** ~~1334206~~ **1334206**

**Project# 116539**

**Actual Weight:** **23.51**

**Capitol**

16. **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.

Printed/Typed Name **BM Hart**

Signature *[Signature]*

Month Day Year  
**5 24 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **Quinton Cross**

Signature *[Signature]*

Month Day Year  
**5 24 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
**.**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sepp**

Signature *[Signature]*

Month Day Year  
**05 24 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07-324**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

# 11

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill**

**1 Bob Foeller Drive**

**Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 118539**

*Capitol*

**Transaction#:** *13342211*

**Actual Weight:** *21.82*

16. **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.

Printed/Typed Name *R M HART*

Signature *[Signature]*

Month Day Year  
**15 24 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *M. Smith*

Signature *[Signature]*

Month Day Year  
**15 24 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
**. . .**

19. Discrepancy Indication Space

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

Printed/Typed Name *Denise Sepp*

Signature *[Signature]*

Month Day Year  
**05 24 06**

TRANSPORTER FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01325**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #30**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116639**

*Osage*

**Transaction#:**

**13342216**

**Actual Weight:**

**19.08**

16. **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.

Printed/Typed Name

*RM HART*

Signature

*RM HART*

Month Day Year

**5 24 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bashaw*

Signature

*Wayne Bashaw*

Month Day Year

**5 24 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Serr*

Signature

*DS*

Month Day Year

**05 24 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01326**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **446-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
~~CMT Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #29**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

12. Containers

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No.	Type	13. Total Quantity	14. Unit Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
.	.	.	.
.	.	.	.
.	.	.	.

b.

.	.	.	.
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c.

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d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

Transaction#: **133 422 15**

Actual Weight: **17.63**

16. 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.

Printed/Typed Name *RM Hares*

Signature *[Signature]*      Month Day Year **5/24/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*      Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *Dawn Edwards*

Signature *[Signature]*      Month Day Year **5/24/06**

19. Discrepancy Indication Space

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

Printed/Typed Name *Donn Sepp*

Signature *[Signature]*      Month Day Year **05/24/06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-327**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #34**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4887**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No.      Type

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001      DT      00020      T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116639**  
*Usage*

**Transaction# 1334222**  
**Actual Weight: 21.39**

16. 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.

Printed/Typed Name *BM HANG*

Signature *[Signature]*

Month Day Year  
**15 24 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year  
**15 24 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *Dean Sapp*

Signature *[Signature]*

Month Day Year  
**15 24 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
*01-328*

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-8703**      **Atn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No.	Type	13. Total Quantity	14. Unit Wt/Vol
001	DT	00020	T
.	.	.	.

b.

.	.	.	.
---	---	---	---

c.

.	.	.	.
---	---	---	---

d.

.	.	.	.
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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Osage*

**Transaction# 13342223**

**Actual Weight: 16.97**

16. 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.

Printed/Typed Name **RM HART**

Signature *[Signature]*      Month Day Year **5 24 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**      Month Day Year . . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *[Signature]*

Signature *[Signature]*      Month Day Year **5 24 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Seff**

Signature *[Signature]*      Month Day Year **05 24 06**

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07-729**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name **#15**

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill**

**1 Bob Foeller Drive**

**Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

*13342234*

**Actual Weight:**

*22.45*

16. **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.

Printed/Typed Name

*RM HART*

Signature

*[Signature]*

Month Day Year

*15 24 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*E. Wiggins*

Signature

*[Signature]*

Month Day Year

*15 24 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sepp*

Signature

*[Signature]*

Month Day Year

*05 24 06*

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-330**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **767** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
--------------------	--------------------	-----------------

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

--	--	--	--

c.

--	--	--	--

d.

--	--	--	--

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 118639**

*Capitol*

Transaction#: **13342293**

Actual Weight: **21.94**

16. 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.

Printed/Typed Name *RM Hoot*

Signature *[Signature]*

Month Day Year  
**5 24 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year  
**5 24 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
**. . .**

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sepp*

Signature *[Signature]*

Month Day Year  
**05 24 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01331**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~G&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking # 28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 118539**

*Osasé*

**Transactions: 13342235**

**Actual Weight: 18.81**

16. **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.

Printed/Typed Name

*BM HART*

Signature

*BM HART*

Month Day Year  
**5 24 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R. CUFFEE*

Signature

*R. Cuffee*

Month Day Year  
**5 24 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*D Sapp*

Month Day Year  
**05 23 06**

GENERATOR

TRANSPORTER

FACILITY

Double

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. **01372**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703** Attn: **Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4887**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001 DT 00020 T**

b.

.

c.

.

d.

.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
*Capitol*

Transaction#: **13342250**

Actual Weight: **19.08**

16. 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.

Printed/Typed Name *R M Hart*

Signature *[Signature]* Month Day Year **5 24 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year **5 24 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *N/A*

Signature *N/A* Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sepp*

Signature *[Signature]* Month Day Year **05 24 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**0-1-3-53**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking (D) (B)**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2781**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No.	Type	13. Total Quantity	14. Unit Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
.	.	.	.

b.

.	.	.	.
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c.

.	.	.	.
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d.

.	.	.	.
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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116639**  
**Capitol**

**Transaction#:** 13342242  
**Actual Weight:** 17.40

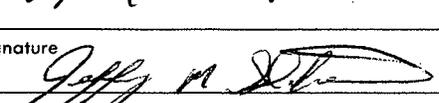
16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Printed/Typed Name **RM HART**

Signature       Month Day Year **5 24 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **Jeffrey M SLATON**

Signature       Month Day Year **5 24 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

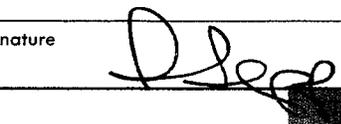
Printed/Typed Name **N/A**

Signature **N/A**      Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Seff**

Signature       Month Day Year **05 24 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01334**

2. Page 1 of **1**

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **446-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name **C&H Trucking**      **214**  
6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~  
8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

12. Containers

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No.	Type	13. Total Quantity	14. Unit Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
.	.	.	.
.	.	.	.
.	.	.	.

b.

.	.	.	.
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c.

.	.	.	.
---	---	---	---

d.

.	.	.	.
---	---	---	---

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** **13342279**

**Project# 116639**

**Actual Weight:** **24.37**

*Capitol*

16. 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.

Printed/Typed Name *B M Hart*

Signature *[Signature]*      Month Day Year **5 24 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Quinton Cross*

Signature *[Signature]*      Month Day Year **5 24 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*      Month Day Year . . .

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sapp*

Signature *[Signature]*      Month Day Year **05 24 06**

GENERATOR  
TRANSPORTER  
FACILITY

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13342152  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/24/06  
Time: 07:23  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 68760 34.38 SCALE:MAN WT  
TARE WEIGHT: 27020 13.51 SCALE:(K)  
NET WEIGHT: 41740 20.87  
VOL: 0

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13342159  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/24/06  
Time: 07:33  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	62960	31.48	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25480	12.74	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	37480	18.74		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:11  
Trailer:

Tag:11  
Tag:

Transaction #: 13342163  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/24/06  
Time: 07:37  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	64100	32.05	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	25340	12.67	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	38760	19.38		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#34                      Tag:#34                      Transaction #: 13342166  
Trailer:                      Tag:                      Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK                      VA      23517

Date: 05/24/06  
Time: 07:39  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pymt Type: Charge
GROSS WEIGHT:	66720	33.36	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25960	12.98	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	40760	20.38		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#33  
Trailer:

Tag:#33  
Tag:

Transaction #: 13342169  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/24/06  
Time: 07:48  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	60140	30.07	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25920	12.96	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	34220	17.11		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:16 Tag:16 Transaction #: 13342178  
Trailer: Tag: Attendant ID: DS  
-----

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/24/06  
Time: 08:02  
Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	65900	32.95	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	27860	13.93	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	38040	19.02		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15  
Trailer:

Tag:15  
Tag:

Transaction #: 13342172  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/24/06  
Time: 07:50  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	74380	37.19	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27320	13.66	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	47060	23.53		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18  
Trailer:

Tag:18  
Tag:

Transaction #: 13342176  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/24/06  
Time: 07:58  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	66000	33.00	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	25160	12.58	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	40840	20.42		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13342179  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/24/06  
Time: 08:03  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT
GROSS WEIGHT:	59800	29.90	SCALE:(K)
TARE WEIGHT:	25760	12.88	
NET WEIGHT:	34040	17.02	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: N/A  
Driver: N/A

REMARKS :

THANK YOU FOR CHOOSING SPSA!



SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:6  
Trailer:

Tag:6  
Tag:

Transaction #: 13342191  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/24/06  
Time: 08:27  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	58140	29.07	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	23320	11.66	SCALE:MAN WT	Pynt Type: Charge
NET WEIGHT:	34820	17.41		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:10  
Trailer:

Tag:10  
Tag:

Transaction #: 13342189  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/24/06  
Time: 08:24  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN	WT
GROSS WEIGHT:	60780	30.39	SCALE:MAN	WT
TARE WEIGHT:	24980	12.49	SCALE:MAN	WT
NET WEIGHT:	35800	17.90		
VOL:	0			

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

---

Truck:14                      Tag:14                      Transaction #: 13342206  
Trailer:                      Tag:                      Attendant ID: DS

---

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.                      Date: 05/24/06  
15-C TROLLEY SQUARE                      Time: 08:41  
WILMINGTON                      DE                      19806                      Site: 13

---

REFUSE TYPE:ADC1575-Gray

				Tran Type: Capitol Environmental
	LBS	TONS		Pymt Type: Charge
GROSS WEIGHT:	74040	37.02	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27020	13.51	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	47020	23.51		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:11 Tag:11 Transaction #: 13342211  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC. Date: 05/24/06  
15-C TROLLEY SQUARE Time: 08:52  
WILMINGTON DE 19806 Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pymt Type: Charge
GROSS WEIGHT:	68980	34.49	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25340	12.67	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	43640	21.82		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13342216  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/24/06  
Time: 09:04  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	63640	31.82	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25480	12.74	SCALE: (K)	Pynt Type: Charge
NET WEIGHT:	38160	19.08		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS :

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

---

Truck:#29                      Tag:#29                      Transaction #: 13342215  
Trailer:                      Tag:                      Attendant ID: DS

---

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK                      VA      23517

Date: 05/24/06  
Time: 09:03  
Site: 13

---

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	61920	30.96	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	26660	13.33	SCALE: (K)	Pynt Type: Charge
NET WEIGHT:	35260	17.63		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13342222  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 05/24/06  
Time: 09:10  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	68740	34.37	SCALE:MAN WT
TARE WEIGHT:	25960	12.98	SCALE:(K)
NET WEIGHT:	42780	21.39	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#33 Tag:#33 Transaction #: 13342223  
Trailer: Tag: Attendant ID: DS

Customer: 602723 OSAGE OF VIRGINIA INC Date: 05/24/06  
2618A COLLEY AVENUE Time: 09:12  
NORFOLK VA 23517 Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pymt Type: Charge
GROSS WEIGHT: 59860	29.93	SCALE:MAN WT		Origin: Offsite Waste Producer
TARE WEIGHT: 25920	12.96	SCALE:(K)		Dest: Regional Landfill
NET WEIGHT: 33940	16.97			State: VA MSW
VOL: 0				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15  
Trailer:

Tag:15  
Tag:

Transaction #: 13342234  
Attendant ID: ~~DS~~

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/24/06  
Time: 09:26  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	72220	36.11	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27320	13.66	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	44900	22.45		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18 Tag:18 Transaction #: 13342243  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/24/06  
Time: 09:38  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	69040	34.52	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25160	12.58	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	43880	21.94		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28

Tag:#28

Transaction #: 13342235

Trailer:

Tag:

Attendant ID: DS

Customer: 602723

OSAGE OF VIRGINIA INC

2618A COLLEY AVENUE

NORFOLK

VA

23517

Date: 05/24/06

Time: 09:28

Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	63380	31.69	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25760	12.88	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	37620	18.81		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: N/A
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!



SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:6 Tag:6 Transaction #: 13342242  
Trailer: Tag: Attendant ID: DS

Customer: 602719 Date: 05/24/06  
CAPITOL ENVIRONMENTAL SERV, INC. Time: 09:36  
15-C TROLLEY SQUARE Site: 13  
WILMINGTON DE 19806

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	58120	29.06	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	23320	11.66	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	34800	17.40		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13342279  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 05/24/06  
Time: 10:22  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	75760	37.88	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27020	13.51	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	48740	24.37		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

June 8, 2006

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01735**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

*#14*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13348916**

**Project# 116539**

**Actual Weight: 23.24**

*Capitol*

16. **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.

Printed/Typed Name

*Bob Hantz*

Signature

*[Signature]*

Month Day Year

*6 8 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Quinton Cross*

Signature

*[Signature]*

Month Day Year

*6 8 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*.*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Dennis Sapp*

Signature

*[Signature]*

Month Day Year

*06 08 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01336**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~Carl Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #30**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeffer Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
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a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** **13348918**

**Project# 116539**

**Actual Weight:**

*Osage*

**13.33**

16. **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.

Printed/Typed Name *B M Hart*

Signature *[Signature]*

Month Day Year  
**6 28 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
- - -

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *Wayne Bashaw*

Signature *Wayne Bashaw*

Month Day Year  
**16 8 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Saff*

Signature *[Signature]*

Month Day Year  
**10 6 08 10 06**

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01337**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~Carl Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #28**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
--------------------	--------------------	-----------------

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

--	--	--	--

c.

--	--	--	--

d.

--	--	--	--

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Transaction#: 13348924**  
**Project# 116539**      **Actual Weight: 13.07**  
*usage*

16. 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.

Printed/Typed Name **RM HART**

Signature *[Signature]*      Month **6** Day **29** Year **06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A**      Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **R. CUFFEE**

Signature *[Signature]*      Month **6** Day **8** Year **06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sapp**

Signature *[Signature]*      Month **06** Day **08** Year **06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01338**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
.	.	.	.

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions: 13348927**

**Project# 116539**

**Actual Weight: 16.86**

*Capitol*

16. **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.

Printed/Typed Name **Rm Hart**

Signature *[Signature]*

Month Day Year  
**6 8 06**

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **M. Smith**

Signature *[Signature]*

Month Day Year  
**6 8 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
**.**

19. Discrepancy Indication Space

FACILITY

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

Printed/Typed Name **Donna Sapp**

Signature *[Signature]*

Month Day Year  
**06 08 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **07-3-39**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**CAFF Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
.	.	.	.
.	.	.	.
.	.	.	.

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**13348926**

**Actual Weight:**

**13.60**

*Usage*

16. 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.

Printed/Typed Name

*RM Harris*

Signature

*[Signature]*

Month Day Year

**16 | 8 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. | . | .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Dawn Edwards*

Signature

*Dawn Edwards*

Month Day Year

**16 | 8 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*[Signature]*

Month Day Year

**06 | 08 | 06**

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01340**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

*15*

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

12. Containers  
No.      Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13348929*  
**Actual Weight:** *19.68*

**Project# 116539**

*Capitol*

16. **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.

Printed/Typed Name *RM Hart*

Signature *[Signature]*

Month Day Year  
*16 8 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Erin Wiggins*

Signature *[Signature]*

Month Day Year  
*16 8 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sade*

Signature *[Signature]*

Month Day Year  
*16 08 06*

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
*01-341*

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

*#14*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~**SOUTH NORFOLK TRUCKING**~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.

Type

13. Total  
Quantity

14. Unit  
Wt/Vol

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions#:** *13348959*

**Project# 116639**

**Actual Weight:** *20.70*

*Capitol*

16. **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.

Printed/Typed Name

*RM Hart*

Signature

*[Signature]*

Month Day Year

*6 8 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Q. Cross*

Signature

*[Signature]*

Month Day Year

*6 8 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*n/a*

Signature

*n/a*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donn Sapp*

Signature

*[Signature]*

Month Day Year

*06 08 06*

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

602,660

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01.3.42**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~**GHI Trucking**~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #30**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol	
No.	Type			
a. <b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.				
c.				
d.				

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions:**

**13348967**

**Project# 116539**

**Actual Weight:**

**18.69 T**

*Usage*

16. **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.

Printed/Typed Name **R M Hart**

Signature *R M Hart*

Month Day Year  
**6 8 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **Wayne Bashaw**

Signature *Wayne Bashaw*

Month Day Year  
**10 18 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sapp**

Signature *Donna Sapp*

Month Day Year  
**06 08 06**

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01343**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name      # **11**  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

12. Containers      13. Total      14. Unit  
No.      Type      Quantity      Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001      DT      00020      T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions: 13349970**

**Project# 116539**

**Actual Weight:**

*Capitol*

*19.65*

16. 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.

Printed/Typed Name *BM Hart*

Signature *[Signature]*

Month Day Year  
**6 8 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *M Guite*

Signature *[Signature]*

Month Day Year  
**6 8 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
**.**

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sapp*

Signature *[Signature]*

Month Day Year  
**10 10 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01394**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~C&H Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2781**

7. Transporter 2 Company Name  
**South Norfolk Trucking #28**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
-----------------------	------	-----------------------	--------------------

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.  
c.  
d.


D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** 13348983

**Project# 116539**

**Actual Weight:** 16.20

*Usage*

16. **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.

Printed/Typed Name **R M HART**

Signature *[Signature]*

Month Day Year  
**6 | 8 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
. | . | .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **R. CUFFEE**

Signature *[Signature]*

Month Day Year  
**6 | 8 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sage**

Signature *[Signature]*

Month Day Year  
**06 | 08 | 06**

GENERATOR  
TRANSPORTER  
FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07345**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking # 29**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

**Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No. Type

13. Total

Quantity

14. Unit

Wt/Vol

**001**

**DT**

**00020**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*usage*

**Transactions:**

**13348977**

**Actual Weight:**

**16.10**

16. **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.

Printed/Typed Name

*RM Hart*

Signature

*RM Hart*

Month Day Year

**6 8 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Dawn Edwards*

Signature

*Dawn Edwards*

Month Day Year

**6 8 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Dawn Sapp*

Signature

*Dawn Sapp*

Month Day Year

**06 08 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01396**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**      *15*

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SP3A Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No.      Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001**

**DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** *13348992*

**Project# 116539**

**Actual Weight:** *19.74*

*Capitol*

16. **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.

Printed/Typed Name *RM HANT*

Signature *[Signature]*

Month Day Year  
*6 8 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Erin Wiggins*

Signature *[Signature]*

Month Day Year  
*6 8 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name *Deanne Sepp*

Signature *[Signature]*

Month Day Year  
*06 08 06*

TRANSPORTER FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **0-1-3-9-7**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

#14

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions: 13344034**

**Project# 116539**

**Actual Weight: 17.03**

*Capitol*

16. **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.

Printed/Typed Name

*RM Hart*

Signature

*RM Hart*

Month Day Year

*10 8 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Q. Cross*

Signature

*Q. Cross*

Month Day Year

*10 8 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*.*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*DSapp*

Month Day Year

*10 08 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01348**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~SOH TRUCKING~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #30**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
-----------------------	------	-----------------------	--------------------

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
------------	-----------	--------------	----------

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:**

**Project# 116539**

**Actual Weight:**

*Usage*

*13349033  
17.80T*

16. **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.

Printed/Typed Name *R M HART*

Signature *[Signature]*

Month Day Year  
*16 | 8 | 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
*|   |*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *Wayne Bashaw*

Signature *Wayne Bashaw*

Month Day Year  
*16 | 8 | 06*

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Seff*

Signature *[Signature]*

Month Day Year  
*06 | 08 | 06*

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01399**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking # 11**

6. US EPA ID Number

**.NOT REQUIRED.**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**.NOT REQUIRED.**

B. Transporter's Phone

**767 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**.NOT REQUIRED.**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Capitol*

**Transaction#:**

*13349046*

**Actual Weight:**

*17.67*

16. **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.

Printed/Typed Name

*RM Hart*

Signature

*[Signature]*

Month Day Year  
*6 8 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*M. Smith*

Signature

*[Signature]*

Month Day Year  
*6 8 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*[Signature]*

Month Day Year  
*06 08 06*

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01330**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
~~C&H Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. <b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions: 13349044**

**Project# 116539**

**Actual Weight: 15.54**

*Osage*

16. 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.

Printed/Typed Name *Rm Hart*      Signature *[Signature]*      Month **6** Day **8** Year **06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*      Signature *N/A*      Month **.** Day **.** Year **.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *Torren Edwards*      Signature *[Signature]*      Month **6** Day **8** Year **06**

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sapp*      Signature *[Signature]*      Month **06** Day **08** Year **06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01-33-1**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~GMH Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #28**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

**Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13349057**

**Project# 116639**

**Actual Weight: 15.31**

*Usage*

16. 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.

Printed/Typed Name

*RM Hart*

Signature

*[Signature]*

Month Day Year

**6 | 8 | 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**. | . | .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R CUFFEE*

Signature

*R. Cuffee*

Month Day Year

**6 | 8 | 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*[Signature]*

Month Day Year

**06 | 08 | 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-352**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-8703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking**      **15**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~**South Norfolk Trucking**~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. <b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** **13349066**

**Project# 116539**

**Actual Weight:** **19.96**

**Capitol**

16. **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.

Printed/Typed Name **RM HANS**      Signature **[Signature]**      Month **6** Day **8** Year **06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **Earl W. Higgins**      Signature **[Signature]**      Month **6** Day **8** Year **06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**      Signature **N/A**      Month **.** Day **.** Year **.**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sapp**      Signature **[Signature]**      Month **06** Day **10** Year **06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-353**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

**#14**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol
<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
.	.	.	.
.	.	.	.
.	.	.	.
.	.	.	.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** 13349150

**Project#** 116639

**Actual Weight:** 18.51

*Capitol*

16. **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.

Printed/Typed Name

*R M HART*

Signature

*R M HART*

Month Day Year  
**6 8 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Q Cross*

Signature

*Q Cross*

Month Day Year  
**6 8 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
.

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*D Sapp*

Month Day Year  
**10 6 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07-354**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
~~C&H Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

No.      Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001      DT      00020      T**

b.

.

c.

.

d.

.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** **13349143**

**Project# 116539**      **Actual Weight:** **15.39**

*Osage*

16. 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.

Printed/Typed Name *RM Hart*

Signature *[Signature]*      Month **16** Day **8** Year **06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*      Month . Day . Year .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *Down Edwards*

Signature *[Signature]*      Month **16** Day **8** Year **06**

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sage*

Signature *[Signature]*      Month **06** Day **05** Year **06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-3-53**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~**C&H Trucking**~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #30**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers  
No.      Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001      DT**

**00020**

**T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: **13349 138**

Project# **116539**

Actual Weight: **20.32 T**

*Use*

16. 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.

Printed/Typed Name **RM HART**

Signature *[Signature]*

Month Day Year  
**6 8 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
**. . .**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **Wayne Bashaw**

Signature *[Signature]*

Month Day Year  
**6 8 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sapp**

Signature *[Signature]*

Month Day Year  
**10 08 06**

TRANSPORTER FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
*01-356*

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116639**

*Capitol*

**Transaction#:**

*13349158*

**Actual Weight:**

*16.39*

16. **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.

Printed/Typed Name

*BM HART*

Signature

*[Signature]*

Month Day Year  
*6 8 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*M. Smith*

Signature

*[Signature]*

Month Day Year  
*6 8 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Dana Sapp*

Signature

*[Signature]*

Month Day Year  
*06 08 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01-3-5-7**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking** *15*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions: 13349139**

**Project# 116539**

**Actual Weight:**

*Capitol*

*18.46*

16. **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.

Printed/Typed Name

*RM Hart*

Signature

*[Signature]*

Month Day Year

*6 8 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*E. Higgins*

Signature

*[Signature]*

Month Day Year

*6 8 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*[Signature]*

Month Day Year

*10 6 06*

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01358**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
~~C&H Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #28**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** 13349159

**Project# 116539**

**Actual Weight:** 16.40

*Usage*

16. **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.

Printed/Typed Name **RM HART**

Signature *[Signature]*

Month Day Year  
**6 8 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
**- - -**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **R. CUFFEE**

Signature *[Signature]*

Month Day Year  
**6 8 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sepp**

Signature *[Signature]*

Month Day Year  
**06 08 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01359**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking #30**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 118539**

*Usage*

**Transactions:**

**133 49228**

**Actual Weight:**

**20.83 T**

16. **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.

Printed/Typed Name

*RM Hart*

Signature

*[Signature]*

Month Day Year

**10 6 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

**· · ·**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne Bashaw*

Signature

*Wayne Bashaw*

Month Day Year

**6 8 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*[Signature]*

Month Day Year

**06 08 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**01360**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**757 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking** *25*

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**757 487-4887**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**757 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001 DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

*Usage*

**Transaction#:**

**133 49247**

**Actual Weight:**

**15.82**

16. 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.

Printed/Typed Name

*RM Hunt*

Signature

*RM Hunt*

Month Day Year  
**06 8 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Dawn Edwards*

Signature

*Dawn Edwards*

Month Day Year  
**06 18 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sapp*

Signature

*D Sapp*

Month Day Year  
**06 08 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-361**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
~~**South Norfolk Trucking**~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
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a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions: 13749219**

**Project# 116539**

**Actual Weight: 19.21**

*Capitol*

16. **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.

Printed/Typed Name **RM Hant**

Signature *RM Hant*

Month Day Year  
**6 8 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **Q. Cross**

Signature *Quinta L. Cross*

Month Day Year  
**6 8 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
**. . .**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sepp**

Signature *Donna Sepp*

Month Day Year  
**06 08 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-3-63**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **767** ) **445-6703**      **Atn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #28**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. <b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**      **Transaction# 13349237**

**Actual Weight: 15.69**

*Osage*

16. 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.

Printed/Typed Name **R M HANT**      Signature *[Signature]*      Month **6** Day **8** Year **06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**      Signature **N/A**      Month **.** Day **.** Year **.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **R. LUFFEE**      Signature *R. Luffee*      Month **6** Day **8** Year **06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donne Sapp**      Signature *[Signature]*      Month **06** Day **08** Year **06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01-3-05**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **446-8703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #30**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SP3A Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total	14. Unit
No.	Type	Quantity	Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions#:** **133 49296**  
**Actual Weight:** **20.32 T**

**Project# 116539**

*Osage*

16. **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.

Printed/Typed Name *RM Harris*

Signature *[Signature]*

Month **6** Day **8** Year **06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*

Month . Day . Year .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *Wayne Bashaw*

Signature *Wayne Bashaw*

Month **6** Day **8** Year **06**

19. Discrepancy Indication Space

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

Printed/Typed Name *Denne Sapp*

Signature *[Signature]*

Month **06** Day **08** Year **06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07366**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**~~C&H Trucking~~**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking #28**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

a.	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
<b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.	.	.	.	.
c.	.	.	.	.
d.	.	.	.	.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13349299**

**Project# 116539**

**Actual Weight: 15.60**

*Osage*

16. 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.

Printed/Typed Name **BM Hunt**      Signature *[Signature]*      Month **6** Day **8** Year **06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**      Signature **N/A**      Month **.** Day **.** Year **.**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **R. CUFFEE**      Signature *[Signature]*      Month **6** Day **8** Year **06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Seff**      Signature *[Signature]*      Month **06** Day **08** Year **06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01307**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23611-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H TRUCKING~~

6. US EPA ID Number

**.NOT REQUIRED.**

A. Transporter's Phone

**757 449-2781**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**.NOT REQUIRED.**

B. Transporter's Phone

**757 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**.NOT REQUIRED.**

C. Facility's Phone

**757 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transactions#:**

**133 49303**

**Project# 116639**

**Actual Weight:**

**15.22**

*Usage*

16. **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.

Printed/Typed Name

*BM Hayes*

Signature

*BM Hayes*

Month Day Year  
**4 8 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Dawn Edwards*

Signature

*Dawn Edwards*

Month Day Year  
**6 8 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Sege*

Signature

*Donna Sege*

Month Day Year  
**08 08 06**

GENERATOR

TRANSPORTER

FACILITY

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13348916  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 06/08/06  
Time: 07:39  
Site: 13

REFUSE TYPE:ADC15-Gray So

	LBS	TONS		
GROSS WEIGHT:	73500	36.75	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	27020	13.51	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	46480	23.24		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30 Tag:#30 Transaction #: 13348918  
Trailer: Tag: Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 06/08/06  
Time: 07:41  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT	Tran Type: Osage of Virginia
GROSS WEIGHT:	52140	26.07	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25480	12.74	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	26660	13.33		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#28                      Tag:#28                      Transaction #: 13348924  
Trailer:                      Tag:                      Attendant ID: DS

Customer: 602723                      Date: 06/08/06  
OSAGE OF VIRGINIA INC                      Time: 07:46  
2618A COLLEY AVENUE                      Site: 13  
NORFOLK                      VA      23517

-----  
REFUSE TYPE:ADC1575-Gray

				Tran Type: Osage of Virginia
	LBS	TONS		Pymt Type: Charge
GROSS WEIGHT:	51900	25.95	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25760	12.88	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	26140	13.07		State: N/A
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:11  
Trailer:

Tag:11  
Tag:

Transaction #: 13348927  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 06/08/06  
Time: 07:49  
Site: 13

REFUSE TYPE:ADC15-Gray So

LBS TONS  
GROSS WEIGHT: 59060 29.53 SCALE:MAN WT  
TARE WEIGHT: 25340 12.67 SCALE:(K)  
NET WEIGHT: 33720 16.86  
VOL: 0

Tran Type: Capitol Environmental  
Pynt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#29 Tag:#29 Transaction #: 13348926  
Trailer: Tag: Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 06/08/06  
Time: 07:48  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT: 53860	26.93	SCALE:MAN WT		Pymt Type: Charge
TARE WEIGHT: 26660	13.33	SCALE:(K)		Origin: Offsite Waste Producer
NET WEIGHT: 27200	13.60			Dest: Regional Landfill
VOL: 0				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:15 Tag:15 Transaction #: 13348929  
Trailer: Tag: Attendant ID: DS

Customer: 602719 Date: 06/08/06  
CAPITOL ENVIRONMENTAL SERV, INC. Time: 07:57  
15-C TROLLEY SQUARE Site: 13  
WILMINGTON DE 19806

-----  
REFUSE TYPE:ADC15-Gray So

				Tran Type: Capitol Environmental
	LBS	TONS		Pynt Type: Charge
GROSS WEIGHT:	66680	33.34	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27320	13.66	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	39360	19.68		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13348959  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 06/08/06  
Time: 08:54  
Site: 13

REFUSE TYPE:ADC15-Gray So

	LBS	TONS	
GROSS WEIGHT:	68420	34.21	SCALE:MAN WT
TARE WEIGHT:	27020	13.51	SCALE:(K)
NET WEIGHT:	41400	20.70	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13348967  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 06/08/06  
Time: 09:04  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	62860	31.43	SCALE:MAN WT
TARE WEIGHT:	25480	12.74	SCALE:(K)
NET WEIGHT:	37380	18.69	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:11 Tag:11 Transaction #: 13348970  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 06/08/06  
Time: 09:07  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	64640	32.32	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	25340	12.67	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	39300	19.65		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13348983  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 06/08/06  
Time: 09:18  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
GROSS WEIGHT:	58160	29.08	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	25760	12.88	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	32400	16.20		Dest: Regional Landfill
VOL:	0			State: N/A
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29

Tag:#29

Transaction #: 13348977

Trailer:

Tag:

Attendant ID: DS

Customer: 602723

OSAGE OF VIRGINIA INC

2618A COLLEY AVENUE

NORFOLK

VA

23517

Date: 06/08/06

Time: 09:15

Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pymt Type: Charge
GROSS WEIGHT:	58860	29.43	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	26660	13.33	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	32200	16.10		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15 Tag:15 Transaction #: 13348992  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 06/08/06  
Time: 09:29  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	66800	33.40	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	27320	13.66	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	39480	19.74		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14  
Trailer:

Tag:14  
Tag:

Transaction #: 13349039  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 06/08/06  
Time: 10:25  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 61080 30.54 SCALE:MAN WT  
TARE WEIGHT: 27020 13.51 SCALE:(K)  
NET WEIGHT: 34060 17.03  
VOL: 0

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30  
Trailer:

Tag:#30  
Tag:

Transaction #: 13349033  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 06/08/06  
Time: 10:20  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	61080	30.54	SCALE:MAN WT
TARE WEIGHT:	25480	12.74	SCALE:(K)
NET WEIGHT:	35600	17.80	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:11 Tag:11 Transaction #: 13349046  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC. Date: 06/08/06  
15-C TROLLEY SQUARE Time: 10:33  
WILMINGTON DE 19806 Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	60680	30.34	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	25340	12.67	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	35340	17.67		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!



SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#28                      Tag:#28                      Transaction #: 13349057  
Trailer:                      Tag:                      Attendant ID: DS  
  
Customer: 602723  
OSAGE OF VIRGINIA INC                      Date: 06/08/06  
2618A COLLEY AVENUE                      Time: 10:41  
NORFOLK                      VA      23517                      Site: 13  
-----

REFUSE TYPE:ADC1575-Gray  
  
Tran Type: Osage of Virginia  
Pymt Type: Charge  
GROSS WEIGHT: 56380    LBS    TONS    SCALE:MAN WT    Origin: Offsite Waste Producer  
TARE WEIGHT: 25760    12.88    SCALE:(K)    Dest: Regional Landfill  
NET WEIGHT: 30620    15.31    State: N/A  
VOL:                      0                      Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:15  
Trailer:

Tag:15  
Tag:

Transaction #: 13349066  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 06/08/06  
Time: 10:51  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	
GROSS WEIGHT:	67240	33.62	SCALE:MAN WT
TARE WEIGHT:	27320	13.66	SCALE:(K)
NET WEIGHT:	39920	19.96	
VOL:	0		

Tran Type: Capitol Environmental  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:14 Tag:14 Transaction #: 13349150  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC. Date: 06/08/06  
15-C TROLLEY SQUARE Time: 12:43  
WILMINGTON DE 19806 Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

				Tran Type: Capitol Environmental
	LBS	TONS		Pynt Type: Charge
GROSS WEIGHT:	64040	32.02	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27020	13.51	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	37020	18.51		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#29 Tag:#29 Transaction #: 13349143  
Trailer: Tag: Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC Date: 06/08/06  
2618A COLLEY AVENUE Time: 12:35  
NORFOLK VA 23517 Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pynt Type: Charge
GROSS WEIGHT: 57440	28.72	SCALE:MAN	WT	Origin: Offsite Waste Producer
TARE WEIGHT: 26660	13.33	SCALE: (K)		Dest: Regional Landfill
NET WEIGHT: 30780	15.39			State: VA MSW
VOL: 0				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#30 Tag:#30 Transaction #: 13349138  
Trailer: Tag: Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC Date: 06/08/06  
2618A COLLEY AVENUE Time: 12:31  
NORFOLK VA 23517 Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pynt Type: Charge
GROSS WEIGHT: 66120	33.06	SCALE:MAN WT		Origin: Offsite Waste Producer
TARE WEIGHT: 25480	12.74	SCALE:(K)		Dest: Regional Landfill
NET WEIGHT: 40640	20.32			State: VA MSW
VOL: 0				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:11 Tag:11 Transaction #: 13349158  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC. Date: 06/08/06  
15-C TROLLEY SQUARE Time: 12:52  
WILMINGTON DE 19806 Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pynt Type: Charge
GROSS WEIGHT: 58120	29.06	SCALE:MAN WT	Origin: Offsite Waste Producer	
TARE WEIGHT: 25340	12.67	SCALE:(K)	Dest: Regional Landfill	
NET WEIGHT: 32780	16.39		State: VA MSW	
VOL: 0			Driver: N/A	

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:15                      Tag:15                      Transaction #: 13349139  
Trailer:                      Tag:                      Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.                      Date: 06/08/06  
15-C TROLLEY SQUARE                      Time: 12:32  
WILMINGTON                      DE    19806                      Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pymt Type: Charge
GROSS WEIGHT: 64240	32.12	SCALE:MAN WT		Origin: Offsite Waste Producer
TARE WEIGHT: 27320	13.66	SCALE:(K)		Dest: Regional Landfill
NET WEIGHT: 36920	18.46			State: VA MSW
VOL: 0				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#28                      Tag:#28                      Transaction #: 13349159  
Trailer:                      Tag:                      Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC                      Date: 06/08/06  
2618A COLLEY AVENUE                      Time: 12:53  
NORFOLK                      VA      23517                      Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

				Tran Type: Osage of Virginia
	LBS	TONS		Pynt Type: Charge
GROSS WEIGHT:	58560	29.28	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25760	12.88	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	32800	16.40		State: N/A
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#30

Tag:#30

Transaction #: 13349228

Trailer:

Tag:

Attendant ID: DS

Customer: 602723

OSAGE OF VIRGINIA INC

Date: 06/08/06

2618A COLLEY AVENUE

Time: 14:06

NORFOLK

VA

23517

Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pymt Type: Charge
GROSS WEIGHT:	67140	33.57	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25480	12.74	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	41660	20.83		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#29  
Trailer:

Tag:#29  
Tag:

Transaction #: 13349247  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 06/08/06  
Time: 14:23  
Site: 13

REFUSE TYPE:ADC1575-Gray Soils

RATE: \$15.75 / tn  
LBS TONS

Tran Type: Capitol Environmental  
Pymt Type: Charge

GROSS WEIGHT: 58300 29.15 SCALE:MAN WT Origin: Offsite Waste Producer  
TARE WEIGHT: 26660 13.33 SCALE:(K) Dest: Regional Landfill  
NET WEIGHT: 31640 15.82 State: VA MSW  
VOL: 0 Driver: N/A

TRANSACTION AMOUNT: \$249.17

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:14

Tag:14

Transaction #: 13349219

Trailer:

Tag:

Attendant ID: DS

Customer: 602719

CAPITOL ENVIRONMENTAL SERV, INC.

Date: 06/08/06

15-C TROLLEY SQUARE

Time: 13:59

WILMINGTON DE 19806

Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pymt Type: Charge
GROSS WEIGHT:	65440	32.72	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	27020	13.51	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	38420	19.21		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#28  
Trailer:

Tag:#28  
Tag:

Transaction #: 13349237  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 06/08/06  
Time: 14:14  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN WT
GROSS WEIGHT:	57140	28.57	SCALE:MAN WT
TARE WEIGHT:	25760	12.88	SCALE:(K)
NET WEIGHT:	31380	15.69	
VOL:	0		

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: N/A  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#30 Tag:#30 Transaction #: 13349296  
Trailer: Tag: Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC Date: 06/08/06  
2618A COLLEY AVENUE Time: 15:36  
NORFOLK VA 23517 Site: 13  
-----

REFUSE TYPE:ADC1575-Gray

				Tran Type: Osage of Virginia
	LBS	TONS		Pynt Type: Charge
GROSS WEIGHT:	66120	33.06	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25480	12.74	SCALE: (K)	Dest: Regional Landfill
NET WEIGHT:	40640	20.32		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

---

Truck:#28	Tag:#28	Transaction #: 13349299
Trailer:	Tag:	Attendant ID: DS
Customer: 602723		Date: 06/08/06
OSAGE OF VIRGINIA INC		Time: 15:46
2618A COLLEY AVENUE		Site: 13
NORFOLK VA 23517		

---

REFUSE TYPE:ADC1575-Gray

			Tran Type: Osage of Virginia
			Pynt Type: Charge
GROSS WEIGHT: 56960	LBS	TONS	Origin: Offsite Waste Producer
28.48			Dest: Regional Landfill
TARE WEIGHT: 25760			State: N/A
12.88			Driver: N/A
NET WEIGHT: 31200			
15.60			
VOL: 0			

REMARKS:

THANK YOU FOR CHOOSING SPSA!



June 21, 2006



**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**      Manifest Document No. **01369**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St, Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      Attn: **Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**      6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~      8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**      C. Facility's Phone  
**757 639-9373**

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
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a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

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c.

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d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
*Capitol*

**Transactions:** *13354620*  
**Actual Weight:** *20.92*

16. 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.

Printed/Typed Name *BM Hant*

Signature *[Signature]*      Month *6* Day *21* Year *06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *SW Falls*

Signature *[Signature]*      Month *6* Day *21* Year *06*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *N/A*

Signature *N/A*      Month *.* Day *.* Year *.*

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sapp*

Signature *[Signature]*      Month *06* Day *10* Year *06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01370**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

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c.

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d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#:** 13354670

**Project#** 116639

**Actual Weight:** 62260

*Osage*

16. 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.

Printed/Typed Name *RM HART*

Signature *[Signature]*      Month Day Year **6 21 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*

Signature *N/A*      Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *Steve Coulter*

Signature *Steve Coulter*      Month Day Year **6 21 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sage*

Signature *[Signature]*      Month Day Year **06 21 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.

*01371*

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( *757* ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking** *K18*

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

~~South Norfolk Trucking~~

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 539-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers

No.	Type
001	DT

13. Total Quantity

00020

14. Unit Wt/Vol

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 118539**

*Capitol*

**Transactions#:**

*13354666*

**Actual Weight:**

*18.34*

16. **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.

Printed/Typed Name

*R M Hart*

Signature

*[Signature]*

Month	Day	Year
6	21	06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R W Falls*

Signature

*[Signature]*

Month	Day	Year
6	21	06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month	Day	Year
.	.	.

19. Discrepancy Indication Space

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

Printed/Typed Name

*Donna Seiff*

Signature

*[Signature]*

Month	Day	Year
10	21	06

TRANSPORTER FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**013-12**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking #18**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~Seah Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers

No.      Type

13. Total Quantity

14. Unit Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

**001      DT      00020      T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
*Capitol*

**Transaction#:** *13354706*  
**Actual Weight:** *19.81*

16. 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.

Printed/Typed Name *RM HART*

Signature *RM Hart*      Month Day Year *16 | 2 | 06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *RW Falls*

Signature *RW Falls*      Month Day Year *16 | 2 | 06*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *N/A*

Signature *N/A*      Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name *Donna Sapp*

Signature *D Sapp*      Month Day Year *10 | 2 | 06*

GENERATOR  
TRANSPORTER  
FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. **07373**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1610 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703** Attn: **Rob Schonk**

5. Transporter 1 Company Name  
~~C&H Trucking~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking** #34

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill**  
**1 Bob Foster Drive**  
**Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
*Osage*

Transactions: **13354709**  
 Actual Weight: **63600**

16. 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.

Printed/Typed Name **RM Hart**

Signature *[Signature]* Month Day Year **16 21 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name **N/A**

Signature **N/A** Month Day Year . . .

18. Transporter 2 Acknowledgement of Receipt of Materials  
 Printed/Typed Name **Steve Coulter**

Signature *[Signature]* Month Day Year **16 21 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Seff**

Signature *[Signature]* Month Day Year **10 21 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**013.24**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking #128**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2781**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers	13. Total	14. Unit
No.	Quantity	Wt/Vol

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
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b.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
  
**Project# 116539**  
  
*Capitol*

**Transactions: 13354768**  
**Actual Weight: 20.01**

16. **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.

Printed/Typed Name **RM HART**

Signature *RM Hart*      Month Day Year **16 21 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **XW FALLS**

Signature *XW Falls*      Month Day Year **16 21 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A**      Month Day Year **.**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Saff**

Signature *Donna Saff*      Month Day Year **0 12 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01375**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foster Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description

12. Containers

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

No.	Type	13. Total Quantity	14. Unit Wt/Vol
001	DT	00020	T
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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116639**  
*usage*

**Transaction# 13354776**  
**Actual Weight: 65320**

16. 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.

Printed/Typed Name **RM Hunt**

Signature *[Signature]*

Month Day Year  
**6 21 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **N/A**

Signature **N/A**

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Steve Coulter**

Signature *[Signature]*

Month Day Year  
**6 21 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sage**

Signature *[Signature]*

Month Day Year  
**10 21 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document #  
**01376**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 GILBERT ST., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-8703**      **Attn: Rob Schonk**

**Site: NNSY Paradise Creek**

5. Transporter 1 Company Name  
**C&H Trucking #18**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
..	.	..	

b.

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c.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 118539**

*Capitol*

**Transaction#: 13354812**

**Actual Weight: 19.95**

16. 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.

Printed/Typed Name **RM HART**

Signature *[Signature]*      Month Day Year **6 21 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **KW FALLS**

Signature *[Signature]*      Month Day Year **6 21 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **N/A**

Signature **N/A**      Month Day Year **. . .**

19. Discrepancy Indication Space

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

Printed/Typed Name **Donna Sage**

Signature *[Signature]*      Month Day Year **06 21 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No.  
**107377**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**.NOT REQUIRED.**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**.NOT REQUIRED.**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**.NOT REQUIRED.**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Transaction#: 13354823**

**Project# 118639**

**Actual Weight: 64080**

*Osage*

16. 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.

Printed/Typed Name

*BM Hant*

Signature

*[Signature]*

Month Day Year  
**6 21 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year  
**- - -**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Coathier*

Signature

*[Signature]*

Month Day Year  
**6 21 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

*Dona Seff*

Signature

*[Signature]*

Month Day Year  
**06 21 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No. **017378**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 GILBERT ST., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking #18**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 639-9373**

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. <b>Beneficial Re-Use Soil/Calcium Hydroxide Mixture</b>	<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**  
*Capitol*

**Transactions#:** *13354876*  
**Actual Weight:** *19.30*

16. 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.

Printed/Typed Name *RM Hunt*      Signature *RM Hunt*      Month *6* Day *21* Year *06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *KW Falls*      Signature *KW Falls*      Month *6* Day *21* Year *06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *N/A*      Signature *N/A*      Month *.* Day *.* Year *.*

19. Discrepancy Indication Space

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

Printed/Typed Name *Denna Seff*      Signature *Denna Seff*      Month *06* Day *21* Year *06*

GENERATOR  
TRANSPORTER  
FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

**NOT REQUIRED**

Manifest Document No. **01379**

2. Page 1 of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**.NOT REQUIRED.**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**.NOT REQUIRED.**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**.NOT REQUIRED.**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total Quantity

**00020**

14. Unit Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction# 13354882**

**Actual Weight: 63 260**

*Asafe*

16. 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.

Printed/Typed Name

*RM Hart*

Signature

*[Signature]*

Month Day Year

*6 21 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*n/a*

Signature

*n/a*

Month Day Year

*. . .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Covert*

Signature

*[Signature]*

Month Day Year

*6 21 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*6 21 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest  
Document No.  
**01-380**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-6703**

**Attn: Rob Schonk**

5. Transporter 1 Company Name

~~C&H Trucking~~

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

**767 449-2761**

7. Transporter 2 Company Name

**South Norfolk Trucking**

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

**767 487-4867**

9. Designated Facility Name and Site Address

**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

**767 639-9373**

11. Waste Shipping Name and Description

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

12. Containers  
No. Type

**001**

**DT**

13. Total  
Quantity

**00020**

14. Unit  
Wt/Vol

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**Project# 118539**

*Osage*

**Transaction#:** *13354951*  
**Actual Weight:** *64940*

16. **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.

Printed/Typed Name

*RM HART*

Signature

*RM HART*

Month Day Year

*6 21 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*N/A*

Signature

*N/A*

Month Day Year

*. . .*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Steve Coulter*

Signature

*Steve Coulter*

Month Day Year

*6 21 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

*6 21 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**01381**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737**

Site: **NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703** Attn: **Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking #16**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
~~South Norfolk Trucking~~

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4887**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 539-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
------------	-----------	--------------	----------

b.

--	--	--	--

c.

--	--	--	--

d.

--	--	--	--

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116539**  
**Capital**

**Transaction#:** **13354935**  
**Actual Weight:** **18.34**

16. 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.

Printed/Typed Name  
**RM Hans**

Signature  
*RM Hans*

Month Day Year  
**6 21 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
**KW Falls**

Signature  
*KW Falls*

Month Day Year  
**6 21 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
**N/A**

Signature  
**N/A**

Month Day Year  
**.**

19. Discrepancy Indication Space

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

Printed/Typed Name  
**Dennis Sog**

Signature  
*Dennis Sog*

Month Day Year  
**06 21 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**07-3-83**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Site: NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**      **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**767 487-4867**

9. Designated Facility Name and Site Address  
**SPSA Regional Landfill  
1 Bob Foeller Drive  
Suffolk, VA 23434**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**767 539-9373**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		

a. **Beneficial Re-Use Soil/Calcium Hydroxide Mixture**

<b>001</b>	<b>DT</b>	<b>00020</b>	<b>T</b>
------------	-----------	--------------	----------

b.

--	--	--	--

c.

--	--	--	--

d.

--	--	--	--

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 118539**  
*usage*

**Transaction#:** *13354989*  
**Actual Weight:** *68860*

16. 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.

Printed/Typed Name *R M Hunt*

Signature *R M Hunt*

Month Day Year  
*6 21 06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *N/A*

Signature *N/A*

Month Day Year  
*.*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Steve Coulter*

Signature *Steve Coulter*

Month Day Year  
*6 21 06*

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
*6 21 06*

GENERATOR  
TRANSPORTER  
FACILITY

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13354616  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 06/21/06  
Time: 07:35  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:MAN	WT
GROSS WEIGHT:	64420	32.21	SCALE:(K)	
TARE WEIGHT:	25960	12.98		
NET WEIGHT:	38460	19.23		
VOL:	0			

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18 Tag:18 Transaction #: 13354620  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 06/21/06  
Time: 07:48  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS	SCALE:	Tran Type: Capitol Environmental
GROSS WEIGHT:	67000	33.50	MAN WT	Pymt Type: Charge
TARE WEIGHT:	25160	12.58	(K)	Origin: Offsite Waste Producer
NET WEIGHT:	41840	20.92		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13354670  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 06/21/06  
Time: 09:19  
Site: 13

REFUSE TYPE:ADC1575-Gray

LBS TONS  
GROSS WEIGHT: 62260 31.13 SCALE:MAN WT  
TARE WEIGHT: 25960 12.98 SCALE:(K)  
NET WEIGHT: 36300 18.15  
VOL: 0

Tran Type: Osage of Virginia  
Pymt Type: Charge  
Origin: Offsite Waste Producer  
Dest: Regional Landfill  
State: VA MSW  
Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18  
Trailer:

Tag:18  
Tag:

Transaction #: 13354666  
Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 06/21/06  
Time: 09:16  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	61840	30.92	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	25160	12.58	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	36680	18.34		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18 Tag:18 Transaction #: 13354708  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 06/21/06  
Time: 10:24  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	64780	32.39	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	25160	12.58	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	39620	19.81		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13354709  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 06/21/06  
Time: 10:25  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pymt Type: Charge
GROSS WEIGHT:	63600	31.80	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25960	12.98	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	37640	18.82		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:18                      Tag:18                      Transaction #: 13354768  
Trailer:                      Tag:                      Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.                      Date: 06/21/06  
15-C TROLLEY SQUARE                      Time: 11:26  
WILMINGTON                      DE                      19806                      Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
				Pymt Type: Charge
GROSS WEIGHT:	65180	32.59	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25160	12.58	SCALE: (K)	Dest: Regional Landfill
NET WEIGHT:	40020	20.01		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13354776  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 06/21/06  
Time: 11:38  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	65320	32.66	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25960	12.98	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	39360	19.68		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:18 Tag:18 Transaction #: 13354812  
Trailer: Tag: Attendant ID: DS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 06/21/06  
Time: 12:33  
Site: 13

-----  
REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	65060	32.53	SCALE:MAN WT	Pymt Type: Charge
TARE WEIGHT:	25160	12.58	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	39900	19.95		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13354823  
Attendant ID: DS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 06/21/06  
Time: 12:43  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	64080	32.04	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25960	12.98	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	38120	19.06		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18  
Trailer:

Tag:18  
Tag:

Transaction #: 13354876  
Attendant ID: KS

Customer: 602719  
CAPITOL ENVIRONMENTAL SERV, INC.  
15-C TROLLEY SQUARE  
WILMINGTON DE 19806

Date: 06/21/06  
Time: 13:43  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	63760	31.88	SCALE:MAN WT	Tran Type: Capitol Environmental
TARE WEIGHT:	25160	12.58	SCALE:(K)	Pynt Type: Charge
NET WEIGHT:	38600	19.30		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

-----  
Truck:#34 Tag:#34 Transaction #: 13354882  
Trailer: Tag: Attendant ID: KS

Customer: 602723 Date: 06/21/06  
OSAGE OF VIRGINIA INC Time: 13:53  
2618A COLLEY AVENUE Site: 13  
NORFOLK VA 23517

-----  
REFUSE TYPE:ADC1575-Gray

				Tran Type: Osage of Virginia
				Pynt Type: Charge
GROSS WEIGHT:	LBS	TONS	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	63260	31.63	SCALE: (K)	Dest: Regional Landfill
NET WEIGHT:	25960	12.98		State: VA MSW
VOL:	37300	18.65		Driver: N/A
	0			

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13354951  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIRGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 06/21/06  
Time: 15:12  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Osage of Virginia
				Pymt Type: Charge
GROSS WEIGHT:	64940	32.47	SCALE:MAN WT	Origin: Offsite Waste Producer
TARE WEIGHT:	25960	12.98	SCALE:(K)	Dest: Regional Landfill
NET WEIGHT:	38980	19.49		State: VA MSW
VOL:	0			Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:18 Tag:18 Transaction #: 13354935  
Trailer: Tag: Attendant ID: KS

Customer: 602719 Date: 06/21/06  
CAPITOL ENVIRONMENTAL SERV, INC. Time: 14:54  
15-C TROLLEY SQUARE Site: 13  
WILMINGTON DE 19806

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		Tran Type: Capitol Environmental
GROSS WEIGHT:	61840	30.92	SCALE:MAN WT	Pynt Type: Charge
TARE WEIGHT:	25160	12.58	SCALE:(K)	Origin: Offsite Waste Producer
NET WEIGHT:	36680	18.34		Dest: Regional Landfill
VOL:	0			State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

SOUTHEASTERN PUBLIC  
SERVICE AUTHORITY  
P.O. BOX 1346  
CHESAPEAKE, VA 23320  
(757) 420-4700

Truck:#34  
Trailer:

Tag:#34  
Tag:

Transaction #: 13354989  
Attendant ID: KS

Customer: 602723  
OSAGE OF VIGINIA INC  
2618A COLLEY AVENUE  
NORFOLK VA 23517

Date: 06/21/06  
Time: 16:31  
Site: 13

REFUSE TYPE:ADC1575-Gray

	LBS	TONS		
GROSS WEIGHT:	68860	34.43	SCALE:MAN WT	Tran Type: Osage of Virginia
TARE WEIGHT:	25960	12.98	SCALE:(K)	Pymt Type: Charge
NET WEIGHT:	42900	21.45		Origin: Offsite Waste Producer
VOL:	0			Dest: Regional Landfill
				State: VA MSW
				Driver: N/A

REMARKS:

THANK YOU FOR CHOOSING SPSA!

81910

**WATERWAY MATERIALS CORP. L.L.C.**

1401 PRECON DRIVE, SUITE 101  
CHESAPEAKE, VIRGINIA 23320  
PHONE (757) 545-0004 / FAX (757) 545-1763

DATE: 8-22-06

SOLD TO: C.H. Trucking

JOB NAME / #: Paradise Creek

TRUCK #: 7

SINGLE AXLE

DOUBLE AXLE  Overized

TRI/QUAD AXLE  12cy

DUMP TRAILER  1100.00

DUMP CHARGE  NO CHARGE

CLEAN CONC.  / CONC. W/ REBAR  ASPHALT

PICK UP

#57  SIZE    21A  SIZE    21B  SIZE    #3  SIZE

SIGNED HAULER: [Signature]

81992

**WATERWAY MATERIALS CORP. L.L.C.**

1401 PRECON DRIVE, SUITE 101  
CHESAPEAKE, VIRGINIA 23320  
PHONE (757) 545-0004 / FAX (757) 545-1763

DATE: 8-22-06

SOLD TO: C.H. Hauling

JOB NAME / #: Paradise Creek

TRUCK #: 7

SINGLE AXLE  \$100.00

DOUBLE AXLE

TRI/QUAD AXLE  12cy

DUMP TRAILER  oversize

**DUMP** CHARGE  NO CHARGE   
CLEAN CONC.  / CONC. W/ REBAR  / ASPHALT

PICK UP:  
#57  21A  21B  #3   
SIZE SIZE SIZE SIZE

SIGNED HAULER *B. [Signature]*

82973

**WATERWAY MATERIALS CORP. L.L.C.**

1401 PRECON DRIVE, SUITE 101  
CHESAPEAKE, VIRGINIA 23320  
PHONE (757) 545-0004 / FAX (757) 545-1763

DATE: 10-12-06

SOLD TO: Shaw Environmental

JOB NAME / #: U. Day Blvd

TRUCK #: B&M

SINGLE AXLE  \_\_\_\_\_

DOUBLE AXLE  10cy (8.13)

TRI/QUAD AXLE  \_\_\_\_\_

DUMP TRAILER  \_\_\_\_\_

38120  
21840  
16260

**DUMP** CHARGE  NO CHARGE

CLEAN CONC.  / CONC. W/ REBAR  / ASPHALT

PICK UP

#57   
SIZE

21A   
SIZE

21B   
SIZE

#3   
SIZE

SIGNED HAULER CH Trucking

84403

**WATERWAY MATERIALS CORP. L.L.C.**

1401 PRECON DRIVE, SUITE 101  
CHESAPEAKE, VIRGINIA 23320  
PHONE (757) 545-0004 / FAX (757) 545-1763

DATE: 8.22.06

SOLD TO: C. H. Trucking

JOB NAME / #: Paradise Creek

TRUCK #: 4

SINGLE AXLE  10000

DOUBLE AXLE

TRI/QUAD AXLE  12000

DUMP TRAILER  Over sized

DUMP CHARGE  NO CHARGE   
CLEAN CONC.  / CONC. W/ REBAR  / ASPHALT

PICK UP

#57  21A  21B  #3   
SIZE SIZE SIZE SIZE

SIGNED HAULER R. J. [Signature]

84424

**WATERWAY MATERIALS CORP. L.L.C.**

1401 PRECON DRIVE, SUITE 101  
CHESAPEAKE, VIRGINIA 23320  
PHONE (757) 545-0004 / FAX (757) 545-1763

DATE: 8.22.06

SOLD TO: C. H. Trucking

JOB NAME / #: Paradise

TRUCK #: 7

SINGLE AXLE  Oversized

DOUBLE AXLE

TRI/QUAD AXLE  12cy

DUMP TRAILER  \$100.00

DUMP CHARGE  NO CHARGE   
CLEAN CONC.  / CONC. W/ REBAR  / ASPHALT

PICK UP

#57  21A  21B  #3   
SIZE SIZE SIZE SIZE

SIGNED HAULER R. J. [Signature]

**THIS SHIPPING ORDER**

must be legibly filled in, in Ink, in Indelible Pencil, or in Carbon, and retained by the Agent

Shipper's No. \_\_\_\_\_

(Carrier) C+H TRUCKING

SCAC. \_\_\_\_\_

Carrier's No. #29

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and all applicable state and federal regulations:

at \_\_\_\_\_ date \_\_\_\_\_ from \_\_\_\_\_

the Property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said company (the word company being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to delivery at said destination, if on its route, or otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said Property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said Property that every service to be performed hereunder shall be subject to all the conditions not prohibited by law, whether printed or written, herein contained, including the conditions on the back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns.

(Mail or street address of consignee for purposes of notification only.)

TO: Consignee WATERWAY MATERIALS  
 Street 1401 PRECON DR SUITE 101  
 Destination CHESAPEAKE, VA Zip 23320

FROM: C+H TRUCKING  
 Shipper 311 DAFFODIL LANE  
 Street CHESAPEAKE, VA Zip 23325

Route: \_\_\_\_\_

Delivering Carrier

Trailer Initial/Number

U.S. DOT Hazmat Reg. Number

No. of packages	HM	Description of articles, special marks, and exceptions	Hazard Class	I.D. Number	Packing Group	*Weight (subject to correction)	Class or rate	Labels required (or exemption)	Check column
1		15 TONS ESTIMATED							

Remit C.O.D. to:

Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**COD AMT:**

\$ \_\_\_\_\_  
 Charges Advanced \$ \_\_\_\_\_

Subject to Section 7 of conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of consignor)

**C. O. D. FEE:**

Prepaid   
 Collect  \$ \_\_\_\_\_

**FREIGHT CHARGES**

Prepaid  Collect

Note: - where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \_\_\_\_\_ per \_\_\_\_\_

NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B). 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.

**PLACARDS REQUIRED**

**PLACARDS SUPPLIED**

YES  NO - FURNISHED BY CARRIER  
 DRIVER'S SIGNATURE: \_\_\_\_\_

SHIPPER: Richard C Kilb

CARRIER: Bob Justice

PER: \_\_\_\_\_ DATE: 8/22/06

PER: \_\_\_\_\_ DATE: 8/22/06

**EMERGENCY RESPONSE**

TELEPHONE NUMBER: ( ) \_\_\_\_\_

Permanent post office address of shipper

Monitored at all times the Hazardous Material is in transportation including storage incidental to transportation (\$172.604)

**THIS SHIPPING ORDER** must be legibly filled in, in Ink, in Indelible Pencil, or in Carbon, and retained by the Agent

Shipper's No. \_\_\_\_\_

(Carrier) **C+H TRUCKING**

SCAC \_\_\_\_\_

Carrier's No. **#30**

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request; and all applicable state and federal regulations;

at \_\_\_\_\_ date \_\_\_\_\_ from \_\_\_\_\_

the Property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said company (the word company being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to delivery at said destination, if on its route, or otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said Property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said Property that every service to be performed hereunder shall be subject to all the conditions not prohibited by law, whether printed or written, herein contained, including the conditions on the back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns.

(Mail or street address of consignee for purposes of notification only.)

TO: **WATERWAY MATERIALS**  
 Consignee **1401 PRECON DR SUITE 101**  
 Street  
 Destination **CHESAPEAKE, VA** Zip **23320**

FROM: **C+H TRUCKING**  
 Shipper **311 DAFFODIL LANE**  
 Street  
 Origin **CHESAPEAKE, VA** Zip **23325**

Route: \_\_\_\_\_

Delivering Carrier

Trailer Initial/Number

U.S. DOT Hazmat Reg. Number

No. of packages	HM	Description of articles, special marks, and exceptions	Hazard Class	I.D. Number	Packing Group	*Weight (subject to correction)	Class or rate	Labels required (or exemption)	Check column
1	15	TONS ESTIMATED							

Remit C.O.D. to:

Address:

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**COD AMT:**

\$ \_\_\_\_\_

Charges Advanced

\$ \_\_\_\_\_

Subject to Section 7 of conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of consignor)

**C. O. D. FEE:**

Prepaid

Collect  \$ \_\_\_\_\_

**FREIGHT CHARGES**

Prepaid  Collect

Note - where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \_\_\_\_\_ per \_\_\_\_\_

NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B). 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.

**PLACARDS REQUIRED**

**PLACARDS SUPPLIED**

YES  NO - FURNISHED BY CARRIER  
 DRIVER'S SIGNATURE: \_\_\_\_\_

SHIPPER: **Richard C. Kuhn**

PER: \_\_\_\_\_ DATE: **8/22/06**

CARRIER: **Rick Trotman**

PER: \_\_\_\_\_ DATE: **8/22/06**

**EMERGENCY RESPONSE TELEPHONE NUMBER:** ( ) \_\_\_\_\_

Permanent post office address of shipper

Monitored at all times the Hazardous Material is in transportation including storage incidental to transportation (§172.604)

# THIS SHIPPING ORDER

must be legibly filled in, in Ink, in Indelible Pencil, or in Carbon, and retained by the Agent

Shipper's No. **#31**

(Carrier) **CYH TRUCKING**

SCAC

Carrier's No.

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and all applicable state and federal regulations:

at \_\_\_\_\_ date \_\_\_\_\_ from \_\_\_\_\_

the Property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said company, (the word company being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to delivery at said destination; if on its route, or otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said Property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said Property that every service to be performed hereunder shall be subject to all the conditions not prohibited by law, whether printed or written, herein contained, including the conditions on the back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns.

(Mail or street address of consignee for purposes of notification only.)

TO: **WATERWAY MATERIALS**  
 Consignee  
 Street **1401 PRECON DR SUITE 101**  
 Destination **CHESAPEAKE, VA** Zip **23320**

FROM:  
 Shipper  
 Street  
 Origin Zip

Route:

Delivering Carrier

Trailer Initial/Number

U.S. DOT Hazmat Reg. Number

No. of packages	HM	Description of articles, special marks, and exceptions	Hazard Class	I.D. Number	Packing Group	*Weight (subject to correction)	Class or rate	Labels required (or exemption)	Check column
1	15	TONS ESTIMATED							

Remit C.O.D. to:

Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**COD AMT:**  
 \$ \_\_\_\_\_

Subject to Section 7 of conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

**C. O. D. FEE:**

Prepaid   
 Collect  \$ \_\_\_\_\_

Note - where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \_\_\_\_\_ per \_\_\_\_\_

**Charges Advanced**  
 \$ \_\_\_\_\_

(Signature of consignor)

**FREIGHT CHARGES**

Prepaid  Collect

NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B). 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.

**PLACARDS REQUIRED**

**PLACARDS SUPPLIED**

YES  NO - FURNISHED BY CARRIER  
 DRIVER'S SIGNATURE: \_\_\_\_\_

SHIPPER: **Richard C. Kih**

CARRIER: **Rich [Signature]**

PER: \_\_\_\_\_ DATE: **8/22/06**

PER: \_\_\_\_\_ DATE: **8/22/06**

**EMERGENCY RESPONSE TELEPHONE NUMBER:** ( )

Permanent post office address of shipper

Monitored at all times the Hazardous Material is in transportation including storage incidental to transportation (\$172.604)

**THIS SHIPPING ORDER**

must be legibly filled in, in ink, in Indelible Pencil, or in Carbon, and retained by the Agent

Shipper's No. **# 32**

(Carrier) **C+H TRUCKING** SCAC \_\_\_\_\_

Carrier's No. \_\_\_\_\_

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request; and all applicable state and federal regulations;

at \_\_\_\_\_ date \_\_\_\_\_ from \_\_\_\_\_  
 the Property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said company (the word company being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to delivery at said destination; if on its route, or otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any portion of said route to destination, and as to each party at any time interested in all or any of said Property that every service to be performed hereunder shall be subject to all the conditions not prohibited by law, whether printed or written, herein contained, including the conditions on the back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns.

(Mail or street address of consignee for purposes of notification only.)  
**TO: WATERWAY MATERIALS**  
 Consignee  
 Street **1401 PRECON DR SUITE 101**  
 Destination **CHESAPEAKE VA** Zip **23320**

**FROM: C+H TRUCKING**  
 Shipper  
 Street **311 DAFFODIL LANE**  
 Origin **CHESAPEAKE, VA** Zip **23325**

Route: \_\_\_\_\_

Delivering Carrier \_\_\_\_\_ Trailer Initial/Number \_\_\_\_\_ U.S. DOT Hazmat Reg. Number \_\_\_\_\_

No. of packages	HM	Description of articles, special marks, and exceptions	Hazard Class	I.D. Number	Packing Group	*Weight (subject to correction)	Class or rate	Labels required (or exemption)	Check column
1	15	TONS ESTIMATED							

Remit C.O.D. to:  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**COD** AMT: \$ \_\_\_\_\_

Subject to Section 7 of conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

**C. O. D. FEE:**  
 Prepaid   
 Collect  \$ \_\_\_\_\_

Note: - where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \_\_\_\_\_ per \_\_\_\_\_

Charges Advanced \$ \_\_\_\_\_

(Signature of consignor) \_\_\_\_\_

**FREIGHT CHARGES**  
 Prepaid  Collect

NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B). 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.

**PLACARDS REQUIRED**

**PLACARDS SUPPLIED**

YES  NO - FURNISHED BY CARRIER  
 DRIVER'S SIGNATURE: \_\_\_\_\_

SHIPPER: **Richard C. Kell**  
 PER: \_\_\_\_\_ DATE: **8/22/06**

CARRIER: **Richard Kell**  
 PER: \_\_\_\_\_ DATE: **8/22/06**

**EMERGENCY RESPONSE**  
 TELEPHONE NUMBER: ( ) \_\_\_\_\_  
 Monitored at all times the Hazardous Material is in transportation including storage incidental to transportation. (§172.604)

Permanent post office address of shipper \_\_\_\_\_

**THIS SHIPPING ORDER**

must be legibly filled in, in Ink, in Indelible Pencil, or in Carbon, and retained by the Agent

Shipper's No. **#33**

(Carrier) **CH TRUCKING** SCAC. \_\_\_\_\_

Carrier's No. \_\_\_\_\_

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and all applicable state and federal regulations;

at \_\_\_\_\_, date **10/12/06** from \_\_\_\_\_

The Property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said company (the word company being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to delivery at said destination, if on its route, or otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any part of said Property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said Property that every service to be performed hereunder shall be subject to all the conditions not prohibited by law, whether printed or written, hereinafter contained, including the conditions on the back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns.

TO: (Mail or street address of consignee for purposes of notification only.)

Consignee **WATERWAY MATERIALS**  
 Street **1401 PRECON DR SUITE 101**  
 Destination **CHESAPEAKE VA** Zip **23320**

FROM:

Shipper **5 VICTORY BLVD**  
 Street **PORTSMOUTH, VA**  
 Origin **PORTSMOUTH, VA** Zip **23701**

Route \_\_\_\_\_

Delivering Carrier \_\_\_\_\_

Trailer Initial/Number \_\_\_\_\_

U.S. DOT Hazmat Reg. Number \_\_\_\_\_

No. of packages	HM	Description of articles, special marks, and exceptions	Hazard Class	I.D. Number	Packing Group	*Weight (subject to correction)	Class or rate	Labels required (or exemption)	Check column
1	15	ESTIMATED TON OF CONCRETE							
		INVOICE CAPED							

Remit C.O.D. to:

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**COD**

AMT: \_\_\_\_\_

\$ \_\_\_\_\_

Charges Advanced \$ \_\_\_\_\_

Subject to Section 7 of conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of consignor)

**C. O. D. FEE:**

Prepaid

Collect  \$ \_\_\_\_\_

**FREIGHT CHARGES**

Prepaid  Collect

Note. -- where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \_\_\_\_\_ per \_\_\_\_\_

NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B). 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.

**PLACARDS REQUIRED**

**PLACARDS SUPPLIED**

YES  NO - FURNISHED BY CARRIER  
 DRIVER'S SIGNATURE: \_\_\_\_\_

SHIPPER: **Richard G. Kilm**

PER: **SHAW ENVIRONMENTAL** DATE: **10/12/06**

CARRIER: **CH TRUCKING**

PER: \_\_\_\_\_ DATE: \_\_\_\_\_

EMERGENCY RESPONSE TELEPHONE NUMBER: \_\_\_\_\_

Permanent post office address of shipper \_\_\_\_\_

Monitored at all times the Hazardous Material is in transportation including storage incidental to transportation (\$172.604)

9-BLS-A3 431 (Rev. 11/04)

Agent must detach and retain this Shipping Order and must sign the Original Bill of Lading.



CHESAPEAKE, VIRGINIA 23320

NON-HAZARDOUS SPECIAL WASTE MANIFEST

GENERATOR

Generator Name Commander Navy REGTON mid - Atlantic Generating Location \_\_\_\_\_

Address 1510 Gilbert Street Address \_\_\_\_\_  
Building N26, Norfolk VA 23511

Phone No. 757-3965121 Phone No. \_\_\_\_\_

Description of Waste	Quantity	Units	Containers		Type
			No.	Type	
NON-HAZARDOUS NON-Regulated material (recycle)	30	Y	06	Y	D-Drum C-Carton B-Bag S-Sq. Ft. P-Pounds Y-Yards O-Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, 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.

Generator Authorized Agent Name Richard M Harris Signature [Signature] Shipment Date 021006

Abatement Company Name Earth CARE SOLUTIONS INC.

Billing Address 9826 Dominion Force Circle  
FREDRICKSBURG, VA 22408

Abatement Authorized Agent Name \_\_\_\_\_ Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

TRANSPORTER I

Transporter Name ABLE BODY DEMONSTRATION Phone No. 757-6193714

Address PO. BOX 1384 Driver Name (Print) Dwayne Burgess  
CHESAPEAKE, VA 23320 Vehicle License No., State LA9-252

Truck No. Pete 17 Cont. No. \_\_\_\_\_ Transporter Identification No. \_\_\_\_\_

I hereby certify that the above named material was picked up at the generator site listed above. I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature Dwayne Burgess Shipment Date 021006 Driver Signature [Signature] Delivery Date 021006

TRANSPORTER II

Transporter Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_ Driver Name (Print) \_\_\_\_\_

Vehicle License No., State \_\_\_\_\_

Truck No. \_\_\_\_\_ Cont. No. \_\_\_\_\_ Transporter Identification No. \_\_\_\_\_

I hereby certify that the above named material was picked up at the generator site listed above. I hereby certify that the above named material was delivered without incident to the destination listed below.

Delivery Date \_\_\_\_\_

438-5616

HOLLAND LANDFILL

1702

4801 Nansemond Pkwy.

Suffolk, VA 23435

VISA

LOAD NO. \_\_\_\_\_

DATE 2-10, 2000

CUSTOMER Able Body Abatement

JOB Pajismouth

MATERIAL DRUSH V36-240

In 42880 OUT 35640 Net. 7240

TRUCKER Vnds 3.63

REC'D BY Julie Harb



CHESAPEAKE, VIRGINIA 1320

# NON-HAZARDOUS SPECIAL WASTE MANIFEST

## GENERATOR

Generator Name Commander Navy Generating Location Mid-Atlantic  
 Address 15106 1/2 Bert St. Address \_\_\_\_\_  
Building 204, Norfolk, VA 23511  
 Phone No. 757 39651211 Phone No. \_\_\_\_\_

Description of Waste	Quantity	Units	Containers		Type
			No.	Type	
<u>NON-HAZARDOUS</u>	<u>30</u>	<u>Y</u>	<u>01</u>	<u>Y</u>	
<u>NON-REGULATED materials</u>					
<u>(Recycle)</u>					

- Type
- D-Drum
- C-Carton
- B-Bag
- S-Sq. Ft.
- P-Pounds
- Y-Yards
- O-Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, 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.

Generator Authorized Agent Name Richard M. Hartz Signature [Signature] Shipment Date 020706

Abatement Company Name EarthCare Solutions  
 Billing Address 4826 Dominion Force Circle  
Fredricksburg, VA 22408  
 Abatement Authorized Agent Name \_\_\_\_\_ Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

## TRANSPORTER I

Transporter Name ABLE Body Condition Phone No. 757 6193714  
 Address P.O. BOX 13870 Driver Name (Print) Dewayne Burgess  
CHESAPEAKE, VA 23320 Vehicle License No., State VA 9-252  
 Truck No. Pete 1# Cont. No. \_\_\_\_\_ Transporter Identification No. \_\_\_\_\_

I hereby certify that the above named material was picked up at the generator site listed above. I hereby certify that the above named material was delivered without incident to the destination listed below.  
 Driver Signature Dewayne Burgess Shipment Date 020706 Driver Signature [Signature] Delivery Date 020706

## TRANSPORTER II

Transporter Name \_\_\_\_\_ Phone No. \_\_\_\_\_  
 Address \_\_\_\_\_ Driver Name (Print) \_\_\_\_\_  
 Vehicle License No., State \_\_\_\_\_  
 Truck No. \_\_\_\_\_ Cont. No. \_\_\_\_\_ Transporter Identification No. \_\_\_\_\_

I hereby certify that the above named material was picked up at the generator site listed above. I hereby certify that the above named material was delivered without incident to the destination listed below.  
 \_\_\_\_\_ Delivery Date \_\_\_\_\_

10:25 AM 02 07 06  
54480 1b

54480  
11:53 AM 02 08 06  
38460 lb  

---

16020  
%. 2000  

---

8.01 TONS



# NON-HAZARDOUS SPECIAL WASTE MANIFEST

## GENERATOR

Generator Name Commandary Navy Region mid-Atlantic Generating Location \_\_\_\_\_

Address 1510 Gilbert St Address \_\_\_\_\_  
Building 226, NORFOLK, VA 23511

Phone No. 757-3965121 Phone No. \_\_\_\_\_

Description of Waste	Quantity	Units	Containers		Type
			No.	Type	
<u>NON-HAZARDOUS</u>	<u>30</u>	<u>Y</u>	<u>02</u>	<u>Y</u>	
<u>NON-Regulated materials</u>					

- Type
- D-Drum
- C-Carton
- B-Bag
- S-Sq. Ft.
- P-Pounds
- Y-Yards
- O-Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, 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.

Generator Authorized Agent Name Richard M. Hunt Signature [Signature] Shipment Date 020706

Abatement Company Name EarthCare Solutions, INC  
Billing Address 9826 Dominion Drive Circle  
Fredericksburg, VA 22408

Abatement Authorized Agent Name \_\_\_\_\_ Signature \_\_\_\_\_ Shipment Date 020706

## TRANSPORTER I

Transporter Name Bobz Body Remediator Phone No. 757-6193714  
Address P.O. Box 1387 Driver Name (Print) Dewayne Burgess  
Chesapeake, VA 23320 Vehicle License No., State VA 9-252  
Truck No. PETE #1 Cont. No. \_\_\_\_\_ Transporter Identification No. \_\_\_\_\_

I hereby certify that the above named material was picked up at the generator site listed above. I hereby certify that the above named material was delivered without incident to the destination listed below.  
Driver Signature Dewayne Burgess Shipment Date \_\_\_\_\_ Driver Signature [Signature] Delivery Date 020706

## TRANSPORTER II

Transporter Name \_\_\_\_\_ Phone No. \_\_\_\_\_  
Address \_\_\_\_\_ Driver Name (Print) \_\_\_\_\_  
Vehicle License No., State \_\_\_\_\_  
Truck No. \_\_\_\_\_ Cont. No. \_\_\_\_\_ Transporter Identification No. \_\_\_\_\_

I hereby certify that the above named material was picked up at the generator site listed above. I hereby certify that the above named material was delivered without incident to the destination listed below.  
Shipment Date \_\_\_\_\_ Delivery Date \_\_\_\_\_

12:09 PM 02 07 06  
62260 1b

62260

11:53 AM 02 08 06

38460 lb

23800

%. 2000

11.90 TONS



CHESAPEAKE, VIRGINIA 320

# NON-HAZARDOUS SPECIAL WASTE MANIFEST

## GENERATOR

Generator Name Commandor Way REGION - mid-Atlantic Generating Location \_\_\_\_\_

Address 1510 Gilbert St Building 226, Norfolk VA 23511 Address \_\_\_\_\_

Phone No. 757-3965121 Phone No. \_\_\_\_\_

Description of Waste	Quantity	Units	Containers		Type
			No.	Type	
<u>NON-HAZARDOUS</u>	<u>30</u>	<u>Y</u>	<u>03</u>	<u>Y</u>	
<u>NON-Regulated materials created</u>					

- Type
- D-Drum
- C-Carton
- B-Bag
- S-Sq. Ft.
- P-Pounds
- Y-Yards
- O-Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, 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.

Generator Authorized Agent Name Richard M. Hart Signature [Signature] Shipment Date 020706

Abatement Company Name EarthCare Solutions, Inc Billing Address 9826 Dominion Blvd Circle Fredricksburg, VA 22408

Abatement Authorized Agent Name \_\_\_\_\_ Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

## TRANSPORTER I

Transporter Name ABLE Body Demolition Phone No. 757-6193714  
Address P.O. BOX 1384 Chesapeake VA 23320 Driver Name (Print) DWAYNE BURGESS  
Truck No. PETE #1 Cont. No. \_\_\_\_\_ Vehicle License No., State VA 9-252  
Transporter Identification No. \_\_\_\_\_

I hereby certify that the above named material was picked up at the generator site listed above. I hereby certify that the above named material was delivered without incident to the destination listed below.  
Driver Signature Dwayne Burgess Shipment Date 020706 Driver Signature [Signature] Delivery Date 020706

## TRANSPORTER II

Transporter Name \_\_\_\_\_ Phone No. \_\_\_\_\_  
Address \_\_\_\_\_ Driver Name (Print) \_\_\_\_\_  
Truck No. \_\_\_\_\_ Cont. No. \_\_\_\_\_ Vehicle License No., State \_\_\_\_\_  
Transporter Identification No. \_\_\_\_\_

I hereby certify that the above named material was picked up at the generator site listed above. I hereby certify that the above named material was delivered without incident to the destination listed below.  
\_\_\_\_\_ \_\_\_\_\_

1:57 PM 02 07 06  
65580 1b

65580  
11:53 AM 02 08 06  
38440 lb  
27140  
% 2000  
13.57 TONS



CHESAPEAKE, VIRGINIA 320

# NON-HAZARDOUS SPECIAL WASTE MANIFEST

## GENERATOR

Generator Name Commander Navy Region Mid-Atlantic Generating Location \_\_\_\_\_  
 Address 1510 Gilbert St Address \_\_\_\_\_  
Building 426, NORFOLK ROAD 3511  
 Phone No. 757-3965121 Phone No. \_\_\_\_\_

Description of Waste	Quantity	Units	Containers		Type
			No.	Type	
<u>NON-HAZARDOUS</u>	<u>30</u>	<u>y</u>	<u>04</u>		
<u>NON-Regulated materials</u>					

- Type
- D-Drum
- C-Carton
- B-Bag
- S-Sq. Ft.
- P-Pounds
- Y-Yards
- O-Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, 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.

Generator Authorized Agent Name Richard M. Hart Signature [Signature] Shipment Date 020706

Abatement Company Name EarthCare Solutions  
 Billing Address 9826 Dominion Blvd Circle  
Fredricksburg, VA 22408  
 Abatement Authorized Agent Name \_\_\_\_\_ Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

## TRANSPORTER I

Transporter Name ABLE BOOY Demolition Phone No. 757-6193713  
 Address P.O. BOX 13870 Driver Name (Print) Dewayne Burgess  
CHESAPEAKE, VA 23320 Vehicle License No., State VA 9-252  
 Truck No. PETE #1 Cont. No. \_\_\_\_\_ Transporter Identification No. \_\_\_\_\_

I hereby certify that the above named material was picked up at the generator site listed above. I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature Dewayne Burgess Shipment Date 020706 Driver Signature [Signature] Delivery Date 020706

## TRANSPORTER II

Transporter Name \_\_\_\_\_ Phone No. \_\_\_\_\_  
 Address \_\_\_\_\_ Driver Name (Print) \_\_\_\_\_  
 \_\_\_\_\_ Vehicle License No., State \_\_\_\_\_  
 Truck No. \_\_\_\_\_ Cont. No. \_\_\_\_\_ Transporter Identification No. \_\_\_\_\_

I hereby certify that the above named material was picked up at the generator site listed above. I hereby certify that the above named material was delivered without incident to the destination listed below.

\_\_\_\_\_ Delivery Date \_\_\_\_\_

4:10 PM 02 07 06  
62480 lb GROSS

11:52 AM 02 08 06  
38460 lb NE  
24020  
%. 2000  
12.01 TONS



10:24 AM 02 08 06  
74260 lb GROSS

11:51 AM 02 08 06  
38440 lb NET

35820 lb TARE

17.91 TONS

# C & M Industries, Inc.

WORK ORDER

60808

Telephones: (757) 543-8775  
(757) 543-7665  
121 Republic Road  
Chesapeake, Virginia 23324

EPA I.D. Number  
VAR 000004721

TO: SIGN ENVIRONMENTAL

ADDRESS:

JOB SITE: SURFACE STORAGE SITE

Date: JANUARY 12 2000

Purchase Order No. 148889

Truck Charge: .....

Shipping Name: Petroleum Oil

\*Gallons Charge 2902 at 205 per gallon

\$ 580.40

Hazard Class: Combustible Liquid

Oil Water

\$

I.D. Number: NA 1270

\$

PGK Group: III

\$

Truck Load:

\$

Empty:

\$

Total Charge \$

Received from Shell EEE 221541 Code

Received by [Signature]

# C & M Industries, Inc.

WORK ORDER

60810

Telephones: (757) 543-8775  
(757) 543-7665  
121 Republic Road  
Chesapeake, Virginia 23324

EPA I.D. Number  
VAR 000004721

Emergency Contact (24 HR)

TO: John Emberton

ADDRESS:

JOB SITE: NSTY - TANK 2 Site

Date: January 15 1980

Purchase Order No. \_\_\_\_\_

Truck Charge: \_\_\_\_\_

Shipping Name: Petroleum Oil

Gallage Charge 1509 at 20¢ per gallon \$ 301.80

Hazard Class: Combustible Liquid

I.D. Number: NA 1270

RGK Group: III

Truck Load: \_\_\_\_\_

Empty: \_\_\_\_\_

CATEGORY 1 2 3 4 5 6 7 8 9 \$ \_\_\_\_\_

Total Charge \$ \_\_\_\_\_

Received from Shawnee ETL

Received by [Signature]

# C & M Industries, Inc.

WORK ORDER

60824

Telephones: (757) 543-8775  
(757) 543-7665

121 Republic Road  
Chesapeake, Virginia 23324

EPA I.D. Number  
VAR 000004721

(757) 475-4837 Emergency Contact (24 HR)

TO: Small Environmental

ADDRESS:

JOB SITE: NEW NAVA SHIPYARD Phase 4

Date: JANUARY 12 2006

Purchase Order No. \_\_\_\_\_

Truck Charge..... \$ \_\_\_\_\_

Shipping Name: Petroleum Oil

Gallage Charge 887 at 204 per gallon \$ 177,408

Hazard Class: Combustible Liquid

Bill Mangel

I.D. Number: NA 1270

\_\_\_\_\_

PGK Group: III

\_\_\_\_\_

Truck Load:

\_\_\_\_\_

Empty:

CATEGORY 1 2 3 4 5 6 7 8 9 \$ \_\_\_\_\_

Total Charge \$ \_\_\_\_\_

Received from Small Env

Received by SM

0800-1530

# C & M Industries, Inc.

WORK ORDER

61574

Telephones: (757) 543-8775  
(757) 543-7665  
(757) 475-4837

121 Republic Road  
Chesapeake, Virginia 23324

EPA I.D. Number  
VAR 000004721

Emergency Contact (24 HR)

TO: Shaw Environmental

ADDRESS: \_\_\_\_\_

JOB SITE: ALICE PAM SP5A

Date: 1-17-06

Purchase Order No. \_\_\_\_\_

Truck Charge: \_\_\_\_\_

Shipping Name: Petroleum Oil

Gallage Charge 12.10 at 204 per gallon \$ 260.00

Hazard Class: Combustible Liquid

Pump Water Replacement Ad

I.D. Number: NA 1270

93009415

PGK Group: III

11

Truck Load: \_\_\_\_\_

CATEGORY 1 2 3 4 5 6 7 8 9 \$ \_\_\_\_\_

Empty: \_\_\_\_\_

Received from Shaw E&I 93 Site

Received by [Signature]

Carver

Total Charge \$ \_\_\_\_\_

# C & M Industries, Inc.

WORK ORDER

00446

Telephones: (757) 543-8775  
(757) 543-7665

121 Republic Road  
Chesapeake, Virginia 23324

EPA I.D. Number  
VAR 000004721

(757) 475-4837 Emergency Contact (24 HR)

TO: SMW ENVIRONMENTAL

ADDRESS:

JOB SITE: OPA - NRSY - Borknath

Date: JANUARY 21 2000

Purchase Order No. \_\_\_\_\_

Truck Charge.....

Shipping Name: Petroleum Oil

Gallons Charge 2259 at 2.04 per gallon

\$

456.80

Hazard/Class:

Combustible Liquid

I.D. Number:

NA 1270

PGK Group:

III

Truck Load:

Empty:

-108 Gw Subac @ 41.25

\$

45.00

CATEGORY 1 2 3 4 5 6 7 8 9 \$

Total Charge \$

Received from SMW Environmental

Received by SMW

Shaw Kelly

# C & M Industries, Inc.

## WORK ORDER

61868

Telephones: (757) 543-8775  
(757) 543-7665  
(757) 475-4837

121 Republic Road  
Chesapeake, Virginia 23324

EPA I.D. Number  
VAR 000004721

Emergency Contact (24 HR)

TO: John Williams

ADDRESS: 14055 4001 5755A Williams Blvd

DATE: 1-20-86 Purchase Order No. \_\_\_\_\_

Truck Charge: \_\_\_\_\_ \$<sup>40</sup> \_\_\_\_\_

Gallage Charge 1300 at 20¢ per gallon \$ 260.00

11442 I.D. Number: NA 1270

11442 PGK Group: III

Truck Load: \_\_\_\_\_

Empty: \_\_\_\_\_

Received from John Williams Received by John Williams

CATEGORY 1 2 3 4 5 6 7 8 9 \$ \_\_\_\_\_ Total Charge \$ \_\_\_\_\_

# GRIDS 1, 2, 3, 7, and 9

## WASTE PACKAGE INCLUDES:

- WM Application
  - SPSW form Application
  - Map
  - Full TCLP results and TPH, pH, and  
TCLP pb only results
- Grids 1, 2, 3, 7, and 9

DEPARTMENT OF ENVIRONMENTAL QUALITY  
TIDEWATER REGIONAL OFFICE

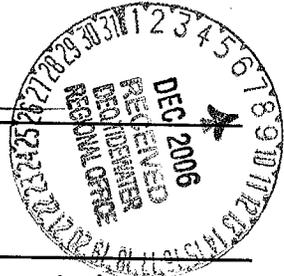
Company Name: SHAW (S)

Person delivering item: TAYLOR SWORD  
(PRINT)

Item delivered: GRIND 8, GRIND 1-23, 79 PKGS

Received By: Barbara A Jones  
(PRINT)

(Signature) *Barbara A Jones*



\_\_\_\_\_  
(Date of Receipt)

**Waste Management Application**

**Navy Signature req'd**



**GENERATOR'S WASTE PROFILE SHEET**  
PLEASE PRINT IN INK OR TYPE

Service Agreement on File?  YES  NO

Profile Number: WMI \_\_\_\_\_

Hazardous  Non-Hazardous  TSCA

Renewal Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**A. Waste Generator Information**

1. Generator Name: Commander, Navy Region Mid-Atlantic (CNRMA) 2. SIC Code: \_\_\_\_\_
3. Facility Street Address: 1510 Gilbert St, 4. Phone: (757) 445-6703
5. Facility City: Norfolk 6. State/Province: VA
7. Zip/Postal Code: 23511-2737 8. Generator USEPA/Federal ID #: NOT APPLICABLE
9. County: \_\_\_\_\_ 10. State/Province ID #: NOT APPLICABLE
11. Customer Name: Capital Environmental ~~NAVEAL~~ 12. Customer Phone: (804) 299-0968 - 757-444-6890
13. Customer Contact: Matt Gemmel - TIM REISCH 14. Customer Fax: 804-790-3326 - 757-444-5922
15. Billing Address  Same as above

**B. Waste Stream Information**

1. **Description**
- a. Name of Waste: Soil contaminated with Wood Debris
- b. Process Generating Waste: Excavation

c. Color <u>gray to black</u>	d. Strong odor (describe): <u>none</u>	e. Physical state @ 70°F <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> Sludge <input type="checkbox"/> Other	f. Layers <input checked="" type="checkbox"/> Single Layer <input type="checkbox"/> Multi-layer	g. Free liquid range <u>n/a to</u> %  h. pH: Range <u>7.2 to 8.2</u>
----------------------------------	---	---	---	--

- i. Liquid Flash Point:  <73°F  73-99°F  100-139°F  140-199°F  ≥ 200°F  Not applicable
- j. Chemical Composition (List all constituents [including halogenated organics, debris, and UHC's] present in any concentration and submit representative analysis):

Constituents	Concentration Range	Constituents	Concentration Range
See attached analytical			

**TOTAL COMPOSITION MUST EQUAL OR EXCEED 100%**

- Check all that apply:
- k.  Oxidizer  Pyrophoric  Explosive  Radioactive  
 Carcinogen  Infectious  Shock Sensitive  Water Reactive
- l. Does the waste represented by this profile contain any of the carcinogens which require OSHA notification? (list in Section B.1.j).....  YES  NO
- m. Does the waste represented by this profile contain dioxins? (list in Section B.1.j).....  YES  NO
- n. Does the waste represented by this profile contain asbestos?.....  YES  NO  
If yes.....  friable  non-friable
- o. Does the waste represented by this profile contain benzene?.....  YES  NO  
If yes, concentration \_\_\_\_\_ ppm  
Is the waste subject to the benzene waste operations NESHAP?.....  YES  NO
- p. Is the waste subject to RCRA Subpart CC controls?.....  YES  NO  
If yes, volatile organic concentration \_\_\_\_\_ ppmw
- q. Does the waste contain any Class I or Class II ozone-depleting substances?.....  YES  NO
- r. Does the waste contain debris? (list in Section B.1.j).....  YES  NO

2. **Quantity of Waste**  
Estimated Annual Volume ~7500 cy 6,200 cy  Tons  Yards  Drums  Other (specify) \_\_\_\_\_

3. **Shipping Information**
- a. Packaging:  
 Bulk Solid; Type/Size: dump trucks  Bulk Liquid; Type/Size: \_\_\_\_\_  
 Drum; Type; Size: \_\_\_\_\_  Other: \_\_\_\_\_
- b. Shipping Frequency: Units truck loads Per:  Month  Quarter  Year  One time  Other
- c. Is this a U.S. Department of Transportation (USDOT) Hazardous Material? (If no, skip d, e, and f).....  YES  NO



**GENERATOR'S WASTE PROFILE SHEET** Profile Number: WMI  
PLEASE PRINT IN INK OR TYPE

- d. Reportable Quantity (lbs.; kgs.): \_\_\_\_\_ e. Hazard Class/ID #: \_\_\_\_\_  
 f. USDOT Shipping Name: \_\_\_\_\_  
 g. Personal Protective Equipment Requirements: \_\_\_\_\_  
 h. Transporter/Transfer Station: \_\_\_\_\_

**C. Generator's Certification** (Please check appropriate responses, sign, and date below.)

1. Is this a USEPA hazardous waste (40 CFR Part 261)? If the answer is no, skip to 2.  YES  NO
  - a. If yes, identify ALL USEPA listed and characteristic waste code numbers (D, F, K, P, U) \_\_\_\_\_
  - b. If a characteristic hazardous waste, do underlying hazardous constituents (UHCs) apply? (if yes, list in Section B.1.)  YES  NO
  - c. Does this waste contain debris? (if yes, list size and type in Chemical Composition - B.1.)  YES  NO
2. Is this a state hazardous waste?  YES  NO  
Identify ALL state hazardous waste codes \_\_\_\_\_
3. Is the waste from a CERCLA (40 CFR 300, Appendix B) or state mandated clean-up?  YES  NO  
If yes, attach Record of Decision (ROD), 104/106 or 122 order or court order that governs site clean-up activity. For state mandated clean-up, provide relevant documentation.
4. Does the waste represented by this waste profile sheet contain radioactive material, or is disposal regulated by the Nuclear Regulatory Commission?  YES  NO
5. Does the waste represented by this waste profile sheet contain concentrations of Polychlorinated Biphenyls (PCBs) regulated by 40 CFR 761? (if yes, list in Chemical Composition - B.1.)  YES  NO
  - a. If yes, were the PCBs imported into the U.S.?  YES  NO
6. Do the waste profile sheet and all attachments contain true and accurate descriptions of the waste material, and has all relevant information within the possession of the Generator regarding known or suspected hazards pertaining to the waste been disclosed to the Contractor?  YES  NO
7. Will all changes which occur in the character of the waste be identified by the Generator and disclosed to the Contractor prior to providing the waste to the Contractor?  YES  NO

Check here if a Certificate of Destruction or Disposal is required.

Any sample submitted is representative as defined in 40 CFR 261 - Appendix I or by using an equivalent method. I authorize WMI to obtain a sample from any waste shipment for purposes of recertification. If this certification is made by a broker, the undersigned signs as authorized agent of the generator and has confirmed the information contained in this Profile Sheet from information provided by the generator and additional information as it has determined to be reasonably necessary. If approved for management, Contractor has all the necessary permits and licenses for the waste that has been characterized and identified by this approved profile.

Certification Signature: [Signature] Title: Project Manager - Env. Engineer  
 Name (Type or Print): TIMOTHY A. DESSERT Company Name: DAVPAC ENV.COM Date: 12/1/2006  
 Check if additional information is attached. Indicate the number of attached pages \_\_\_\_\_

D. WMI Management's Decision	FOR WMI USE ONLY
1. Management Method <input type="checkbox"/> Landfill <input type="checkbox"/> Non-hazardous Solidification <input type="checkbox"/> Bioremediation <input type="checkbox"/> Incineration <input type="checkbox"/> Hazardous Stabilization <input type="checkbox"/> Other (Specify) _____	
2. Proposed Ultimate Management Facility: _____	
3. Precautions, Special Handling Procedures, or Limitation on Approval: _____ _____ _____	
Special Waste Decision: _____	<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved
Salesperson's Signature: _____	Date: _____
Division Approval Signature (Optional): _____	Date: _____
Special Waste Approvals Person Signature: _____	Date: _____



## GENERATOR'S WASTE PROFILE SHEET

PLEASE PRINT IN INK OR TYPE

### Instructions

Information on this form is used to determine if the waste may be transported, treated, stored or disposed in a legal, safe, and environmentally sound manner. This information will be maintained in strict confidence. Answers must be provided for sections A, B, and C and must be printed in ink or typed. A response of "NONE" or "NA" (not applicable) can be made if appropriate. If additional space is needed, indicate on the form that additional information is attached, and attach the information to Generator's Waste Profile Sheet. If you have questions concerning this form, please contact the Contractor's sales representative.

#### A. Waste Generator Information

1. **Generator Name** - Enter the name of the facility where the waste is generated.
2. **SIC Code** - Enter the four digit Standard Industrial Classification Code for the facility where the waste is generated.
3. **Facility Street Address** - Enter the street address (not P.O. Box) of the facility where the waste is generated.
4. **Phone** - Enter Generator's area code and phone number.
5. **Facility City** - Enter the city where the waste is generated.
6. **State/Province** - Enter the state or province where the waste is generated.
7. **Zip/Postal Code** - Enter the generating facility's zip or postal code.
8. **Generator USEPA/Federal ID #** - Enter the identification number issued by the USEPA, Canadian, or Mexican Federal Agency to the facility generating the waste (if applicable).
9. **County** - Enter the county where the waste is generated.
10. **State/Province ID #** - Enter the identification number issued by the state or province to the facility generating the waste (if applicable).
11. **Customer Name** - Entity that the Contractor is directly working with regarding the represented waste stream. If the same as the Generator, mark "Same as Above".
12. **Customer Phone** - Enter technical contact's area code and telephone number.
13. **Customer Contact** - Enter the name of the person who can answer technical questions about the waste.
14. **Customer Fax** - Area code and facsimile number for the customer.
15. **Billing Address** - Address where bill for services should be sent.

#### B. Waste Stream Information

- 1.a. **Name of Waste** - Enter a name generally descriptive of this waste (e.g., paint sludge, fluorescent bulbs).
  - 1.b. **Process Generating Waste** - Describe the process generating the waste in detail. List the specific process/operation or source that generates the waste (e.g., incineration of municipal refuse, asbestos removal, wastewater treatment, building maintenance).  
At a minimum, the Generator should answer the following questions in determining the process generating the waste.
    - What chemicals are stored and/or used at the facility?
    - Is the waste generated from the production/manufacturing of any of the following industries: wood preservation; inorganic pigments; organic pigments; pesticides; explosives; petroleum refining; iron and steel, copper, lead or zinc production?
    - Is the waste a result from degreasing, solvent parts cleaning, recovery/reclaiming of solvents (bottoms), wastewater treatment (sludges), or electroplating?
  - 1.c. **Color** - Describe the color of the waste (e.g., blue, transparent, varies).
  - 1.d. **Strong odor** - **DO NOT SMELL THE WASTE!** If the waste has a known odor, then describe (e.g., acrid, pungent, solvent, sweet).
  - 1.e. **Physical state @ 70°F** - If the four boxes provided do not apply, a descriptive phrase may be entered after "Other" (e.g., multi-phase).
  - 1.f. **Layers** - Single Layer means the waste is homogenous. Multi-layer means the waste is comprised of two or more layers (e.g., oil/water/sludge).
  - 1.g. **Free liquid range** - Range (in percent by volume) of free liquids in the waste.
  - 1.h. **pH Range** - Indicate the pH range.
  - 1.i. **Liquid Flash Point** - Indicate the flash point obtained using the appropriate test method.
  - 1.j. **Chemical Composition** - List all organic and/or inorganic components of the waste using chemical names. If trade names are used, attach Material Safety Data Sheets or other documents that adequately describe the composition of the waste. For each component, estimate the range (in percent) in which the component is present.
  - 1.k. Check all that apply.
    - 1.l. Identify any element, chemical compound, or mixture in concentration of 0.1 percent or greater that is considered a carcinogen or potential carcinogen pursuant to OSHA.
  - 1.m. Indicate if the waste contains any dioxins (list in Section B.1.j).
  - 1.n. Indicate if the waste contains asbestos. Indicate if the asbestos is friable.
  - 1.o. Indicate if the waste contains benzene, the level in ppm, and whether it is subject to the benzene NESHAP.
  - 1.p. Indicate if the waste is subject to RCRA Subpart CC control. In addition, indicate the volatile organic concentration, if known, in parts per million weight.
  - 1.q. Indicate if the waste contains any Class I or Class II ozone-depleting controlled substances.
  - 1.r. Indicate if the waste contains debris (list size and type in B.1.j).
2. **Quantity of Waste** - Approximate volume in tons, yards, or other (e.g., drums, gallons) that will be received by the ultimate management facility. This volume amount is not intended for use in complying with state and/or permit restrictions.
  - 3.a. **Packaging** - Choose the appropriate option or "other" along with a description.
  - 3.b. **Shipping Frequency** - Choose the appropriate option or "other" along with a description.
  - 3.c. **Is this a U.S. Department of Transportation (USDOT) hazardous material?** - Choose the appropriate response: yes or no.
  - 3.d. **Reportable Quantity (lbs.; kgs.)** - If the answer to 3.c. is yes, enter the Reportable Quantity (RQ) established by 40 CFR 302.4 or equivalent Canadian or Mexican regulation for this waste. Indicate the appropriate units for the RQ.
  - 3.e. **Hazard Class/ID #** - If the answer to 3.c. is yes, indicate the proper USDOT hazard class and identification number.
  - 3.f. **USDOT Shipping Name** - IF the answer to 3.c. is yes, enter the proper USDOT shipping name for the waste.
  - 3.g. **Personal Protective Equipment Requirements** - All personal protective equipment necessary to safely manage the waste stream.
  - 3.h. **Transporter/Transfer Station** - Transporter and/or transfer station name.



## GENERATOR'S WASTE PROFILE SHEET

PLEASE PRINT IN INK OR TYPE

### C. Generator's Certification (Please check appropriate responses, sign, and date below.)

Indicate the appropriate response to questions/statements 1, 2, 3, 4, 5, 6, and 7. By signing this Generator's Waste Profile Sheet, the Generator certifies the responses are true and accurate with respect to the waste stream(s) listed.

**Certification Signature** - Signature of an authorized employee of the Generator or representative of the generator if authorized in writing by the generator.

**Title** - Enter Employee's title.

**Name** - Type or Print Employee's name.

**Company Name** - Company employing the person certifying the Generator's Waste Profile Sheet.

**Date** - Enter the date this Generator's Waste Profile Sheet is signed.

### D. WMI Management's Decision

To be completed by WMI.

FOR WMI USE ONLY

**SPSW-2 FORM**

**Signature Required**

**Form SPSW-2**  
**SPECIAL WASTE DISPOSAL REQUEST**  
**GENERATOR INFORMATION**

Section I. Generator Identification:

a. Generator Name: Commander, Navy Region Mid-Atlantic

b. Generator Address: 1510 Gilbert St, Norfolk VA, 23511-2737

-----

c. Generator Phone: Crystal St. Clair-Canali (757)445-6775 /

Tim Reisch (757) 444-6890

Section II. General Waste Profile:

Note: It is the duty of all persons to dispose of their solid waste in a legal manner (Va.Code ' 10.1-1418.1.A). In addition, any person who generates a solid waste shall determine if that waste is a hazardous waste (' 6.1 of the Virginia Hazardous Waste Management Regulations (VR 672-10-1) ("VHWMR")).

a. General description of waste, including its state (e.g., solid liquid, semi-solid, gas):

Solid material that includes Soil and debris (concrete and wood) consistent with construction debris. -----

-----

b. Amount of materials proposed for disposal:

Volume or Weight approximately 6,200 CY

Units cubic yards

The initial full TCLP sampling results, one each, from Grids 1, 2, 3, 7, and 9 determined that these grids would not require in-situ stabilization. Therefore, additional waste characterization (TCLP – Pb only, TPH, and pH) were collected from each grid based on rate of 1 sample per 500 CY. The waste volume estimate for these 5 grids was a total for 7,410 CY. When excavated and staged for disposal, the volume of debris from grid was conservatively estimated, assuming the staged waste was rectangular in shape, to be 8,684 CY, which did not conform to the characterization sampling rate of 1 per 500 CY. VDEQ was made aware of this situation and conservative assumption, and requested additional information. Accurate field measurements of the staged waste were taken to define the volumes for off-site disposal. Based on these accurate volume calculations, 6,160 CY of waste was excavated from these grids, below the original estimate of 7,410 CY.

Grid #	Initial (pre-excavation) Volume Estimated, CY	STOCKPILE / RECTANGLE VOLUME, CY	STOCKPILE / TRAPEZOIDAL VOLUME, CY
1	1482	2949	2182
2	1482	1975	1166
3	1482	0	0
7	1482	2631	2016
9	1482	1129	798
	<b>7410</b>	<b>8684</b>	<b>6162</b>

In consideration of the homogeneous nature of the mixed material and the sampling methodology to ensure the sampling was representative of the waste, the sampling waste characterization data provide herein is deemed adequate to characterize the debris for disposal.

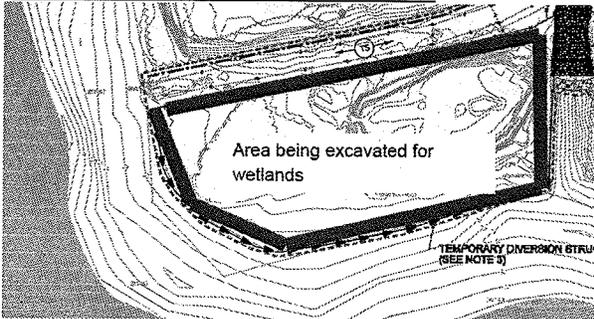
- c. Activities or processes from which the waste was generated, including process flow diagrams specifically addressing the waste stream(s), a description of the source of the waste, and a statement of whether the waste was formerly managed as a hazardous waste.

This waste material is being generated as a result of the excavation for construction of an engineered wetlands. The material was deposited originally as fill material adjacent to the top of a former landfill operated by Norfolk Naval Shipyard (NNSY). On top of the fill a calcium hydroxide berm impoundment was built. That impoundment has been removed. The remaining fill material dimensional lumber, (wood debris) and soil mix needs to be removed to accommodate the construction of an engineered landfill.

NOTE: Attach a flow diagram and indicate any deletions due to proprietary or trade secret information. The Department cannot protect proprietary information or trade secrets.

d. Location of generation:

The removal site is located between Paradise Creek on the southern boundary, and the northern boundary is the NNSY former Eastern Area Landfill and the Western Area Landfill. The area being excavated is on a bend in Paradise Creek : Attached map shows GRIDS 1, 2, 3, 7, and 9 AREAS SPECIFICALLY



e. Method of transportation:

Describe the manner in which the material is being transported for disposal (e.g., bulk containers):

Bulk shipment via Dump Trucks

f. Testing results

PARAMETER	ANALYZED (METHOD)	NOT ANALYZED (REASON)	RESULTS INCLUDED
Corrosivity	SW 846, Chapter 7	N/a	See attached analysis
Ignitability	SW 846 1010	N/a	See attached analysis
TCLP (a - e) only			
a. Metals	See attached table	N/a	See attached analysis
b. Volatile Organics	See attached table	N/a	See attached analysis
c. Semi-Volatile Organics	See attached table	N/a	See attached analysis

d. Pesticides	See attached table	N/a	See attached analysis
e. Herbicides	See attached table	N/a	See attached analysis
Total Metals		TCLP	N
Volatile Organics		TCLP	N
Semi-Volatile Organics		TCLP	N
Pesticides		TCLP	N
Herbicides		TCLP	N
PCB's	SW846 8082	N/a	See attached analysis
Paint Filter Test		To be performed during removal action	N
Radioactive Waste		Previous investigation, site history	N
Asbestos		Previous investigation, site history	N
Percent Solids	EPA 160.3		w/ TCLP results
TOX		Previous investigation, site history	N
TPH <sup>1</sup>	SW 846 8015M	N/a	See attached analysis

g. Sample location map included: Yes (xx) No ( )

### Section III. Generator Certification:

I hereby certify, based upon my diligent inquiry into the activities, materials, and processes generating the materials described on this form:

1. That these materials are not classified as listed or characteristic hazardous waste governed by the Commonwealth of Virginia or the state of origin of this waste;
2. That the materials are not regulated medical waste governed by the Virginia Regulated Medical Waste Management Regulations (VR 672-40-01);

<sup>1</sup>

TPH DRO samples are to be taken during removal prior to disposal for meeting disposal facility criteria at the frequency of 1 per 500 cubic yards material.

3. That the materials do not contain 50.0 parts per million or more of polychlorinated biphenyls (PCB's);
4. That the materials do not contain more than 1.0 part per billion of dioxins;  
*There is no reason to expect the presence of dioxins.*
5. That the material is not a radioactive waste or possess the property of radioactivity;
6. That the materials are not prohibited or restricted from disposal in a Virginia solid waste management facility; and
7. That the analytical results, completed application and attached documentation submitted in support of this special waste disposal request are a representative, true, and accurate description of these materials.

Print Name:

Crystal St. Clair-Canali

Title:

Regional Hazardous Waste Program Manager

Signature:

Crystal St. Clair-Canali

Date:

12/6/06

Notary Statement

State of NORFOLK

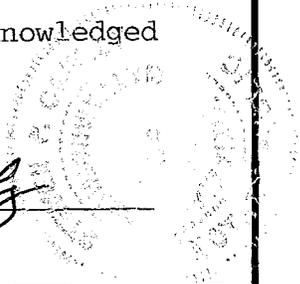
County of VAUGHN

On 6th day of December, 2006, Crystal E. Cair-Canaji  
personally appeared before me,

- who is personally known to me
- whose identity I proved on the basis of  
military department in civilian employe
- whose identity I proved on the oath/affirmation of  
\_\_\_\_\_, a credible witness

to be the signer of the above document, and he/she acknowledged that he/she signed it.

*James P. Galy*  
Notary Public



**Map –  
Grids 1, 2, 3, 7, 9  
Locations**

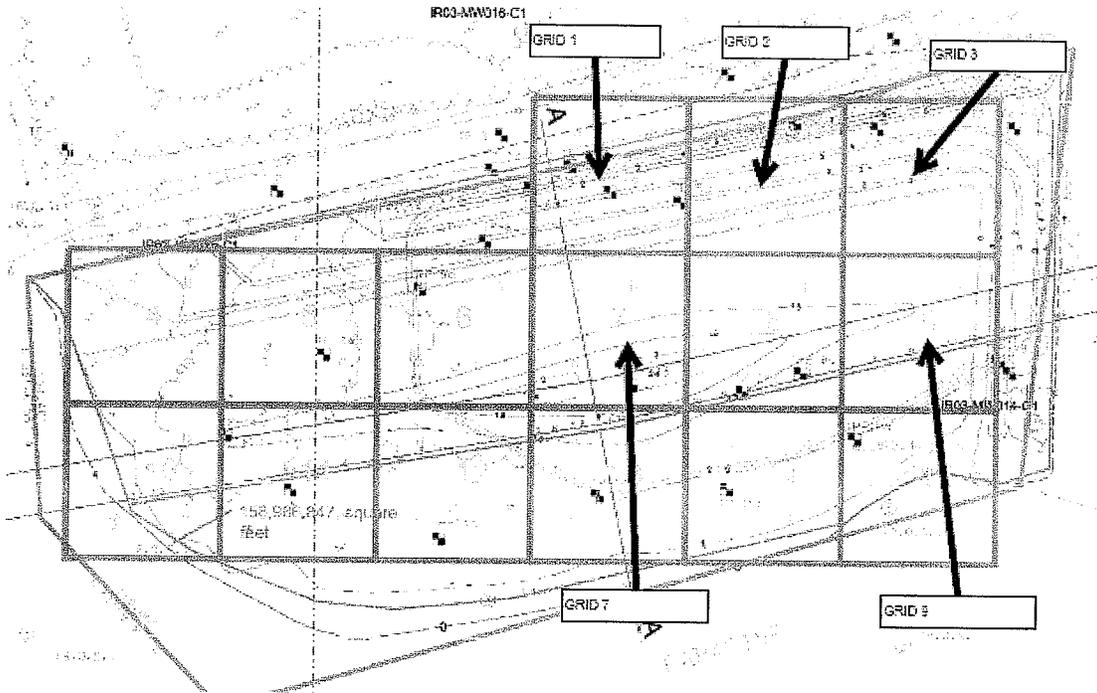


Figure 1

**Full TCLP Results;  
TCLP pb only, pH,  
and TPH – Grids 1,  
2, 3, 7, 9 Only**



IT'S ALL IN THE CHEMISTRY

08/03/06

## Technical Report for

Shaw E & I, Inc.

Paradise Creek

116539

Accutest Job Number: F42307

Sampling Date: 07/18/06



### Report to:

Shaw E & I, Inc.  
5700 Thurston Ave. Suite 116-B  
Virginia Beach, VA 23455  
natasha.sullivan@shawgrp.com

ATTN: Natasha Sullivan

Total number of pages in report: 102



Test results contained within this data package meet the requirements of the National Environmental Laboratory Accreditation Conference and/or state specific certification programs as applicable.

*Harry Behzadi*  
Harry Behzadi, Ph.D.  
Laboratory Director

Certifications: FL (DOH E83510), NC (573), NJ (FL002), MA (FL946), IA (366), LA (03051), KS (E-10327), SC, AK  
This report shall not be reproduced, except in its entirety, without the written approval of Accutest Laboratories.

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## Sample Summary

Shaw E &amp; I, Inc.

Job No: F42307

Paradise Creek  
Project No: 116539

Sample Number	Collected Date	Time By	Received	Matrix Code	Type	Client Sample ID
F42307-1	07/18/06	07:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID007
F42307-1A	07/18/06	07:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID007
F42307-2	07/18/06	08:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID008
F42307-2A	07/18/06	08:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID008
F42307-3	07/18/06	09:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID009
F42307-3A	07/18/06	09:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID009
F42307-4	07/18/06	10:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID0113
F42307-4A	07/18/06	10:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID0113
F42307-5	07/18/06	11:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID014
F42307-5A	07/18/06	11:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID014

---

Soil samples reported on a dry weight basis unless otherwise indicated on result page.



**Sample Results**

---

**Report of Analysis**

---

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID007	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-1	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 76.0
<b>Method:</b> SW846 8015	
<b>Project:</b> Paradise Creek	

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	CD070184.D	1	07/21/06	MM	n/a	n/a	GCD2898
Run #2							

	Initial Weight	Final Volume	Methanol Aliquot
Run #1	5.11 g	5.0 ml	100 ul
Run #2			

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	8.0	4.0	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
460-00-4	4-Bromofluorobenzene	93%		62-135%		
98-08-8	aaa-Trifluorotoluene	87%		65-118%		

(a) Sample was received in a bulk container but was not preserved within 48 hours of sampling.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID007	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-1	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 76.0
<b>Method:</b> SW846 8082 SW846 3550B	
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	ST49814.D	10	07/28/06	NAF	07/25/06	OP17353	GST1443
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.9 g	10.0 ml
Run #2		

**PCB List**

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	210	110	ug/kg	
11104-28-2	Aroclor 1221	ND	210	170	ug/kg	
11141-16-5	Aroclor 1232	ND	210	170	ug/kg	
53469-21-9	Aroclor 1242	ND	210	110	ug/kg	
12672-29-6	Aroclor 1248	ND	210	110	ug/kg	
11097-69-1	Aroclor 1254	ND	210	110	ug/kg	
11096-82-5	Aroclor 1260	ND	210	110	ug/kg	
11100-14-4	Aroclor 1268	730	210	110	ug/kg	
	Total PCBs	730	430		ug/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	86%		52-136%
2051-24-3	Decachlorobiphenyl	308% <sup>b</sup>		49-148%

- (a) All hits confirmed by dual column analysis.
- (b) Outside control limits due to dilution.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID007	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-1	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 76.0
<b>Method:</b> SW846 8015 M SW846 3550B	
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	ZF20860.D	5	07/27/06	ME	07/26/06	OP17355	GZF978
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.9 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	216	53	32	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	85%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Accutest Laboratories

## Report of Analysis

Page 1 of 1

2.1

2

**Client Sample ID:** PC-TP-116539-GRID007

**Lab Sample ID:** F42307-1

**Matrix:** SO - Soil

**Project:** Paradise Creek

**Date Sampled:** 07/18/06

**Date Received:** 07/20/06

**Percent Solids:** 76.0

**General Chemistry**

---

Report of Analysis

2.2  
2

Client Sample ID:	PC-TP-116539-GRID007		Date Sampled:	07/18/06
Lab Sample ID:	F42307-1A		Date Received:	07/20/06
Matrix:	SO - Soil		Percent Solids:	76.0
Method:	SW846 8260B SW846 1311			
Project:	Paradise Creek			

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	C0042612.D	10	08/03/06	KW	07/31/06	OP17412	VC1721
Run #2							

Run #	Purge Volume
Run #1	5.0 ml
Run #2	

VOA TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
71-43-2	Benzene	ND	D018	0.50	0.010	0.0050	mg/l	
108-90-7	Chlorobenzene	ND	D021	100	0.020	0.0050	mg/l	
67-66-3	Chloroform	ND	D022	6.0	0.020	0.0050	mg/l	
56-23-5	Carbon tetrachloride	ND	D019	0.50	0.020	0.0050	mg/l	
75-35-4	1,1-Dichloroethylene	ND	D029	0.70	0.020	0.0050	mg/l	
107-06-2	1,2-Dichloroethane	ND	D028	0.50	0.020	0.0050	mg/l	
106-46-7	p-Dichlorobenzene	ND	D027	7.5	0.020	0.0050	mg/l	
78-93-3	Methyl ethyl ketone	ND	D035	200	0.10	0.025	mg/l	
127-18-4	Tetrachloroethylene	ND	D039	0.70	0.020	0.0050	mg/l	
79-01-6	Trichloroethylene	ND	D040	0.50	0.020	0.0050	mg/l	
75-01-4	Vinyl chloride	ND	D043	0.20	0.010	0.0050	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	109%		86-115%
2037-26-5	Toluene-D8	101%		86-112%
460-00-4	4-Bromofluorobenzene	104%		83-119%
17060-07-0	1,2-Dichloroethane-D4	110%		73-126%

ND = Not detected      MDL - Method Detection Limit      J = Indicates an estimated value  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

## Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID007	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-1A	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 76.0
<b>Method:</b> SW846 8270C SW846 3510C	
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	R04132.D	1	08/02/06	NJ	07/31/06	OP17413	SR195
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	1.0 ml
Run #2		

## ABN TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	D023	200	0.050	0.020	mg/l	
	3&4-Methylphenol	ND	D024	200	0.050	0.020	mg/l	
87-86-5	Pentachlorophenol	ND	D037	100	0.25	0.10	mg/l	
95-95-4	2,4,5-Trichlorophenol	ND	D041	400	0.050	0.020	mg/l	
88-06-2	2,4,6-Trichlorophenol	ND	D042	2.0	0.050	0.020	mg/l	
106-46-7	1,4-Dichlorobenzene	ND	D027	7.5	0.050	0.010	mg/l	
121-14-2	2,4-Dinitrotoluene	ND	D030	0.13	0.050	0.020	mg/l	
118-74-1	Hexachlorobenzene	ND	D032	0.13	0.050	0.010	mg/l	
87-68-3	Hexachlorobutadiene	ND	D033	0.50	0.050	0.020	mg/l	
67-72-1	Hexachloroethane	ND	D034	3.0	0.050	0.020	mg/l	
98-95-3	Nitrobenzene	ND	D036	2.0	0.050	0.010	mg/l	
110-86-1	Pyridine	ND	D038	5.0	0.10	0.030	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
367-12-4	2-Fluorophenol	25%		19-90%
4165-62-2	Phenol-d5	15%		10-68%
118-79-6	2,4,6-Tribromophenol	83%		36-137%
4165-60-0	Nitrobenzene-d5	76%		49-119%
321-60-8	2-Fluorobiphenyl	75%		45-118%
1718-51-0	Terphenyl-d14	91%		46-135%

ND = Not detected MDL - Method Detection Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)  
E = Indicates value exceeds calibration range

J = Indicates an estimated value  
B = Indicates analyte found in associated method blank  
N = Indicates presumptive evidence of a compound

**Report of Analysis**

<b>Client Sample ID:</b>	PC-TP-116539-GRID007	<b>Date Sampled:</b>	07/18/06
<b>Lab Sample ID:</b>	F42307-1A	<b>Date Received:</b>	07/20/06
<b>Matrix:</b>	SO - Soil	<b>Percent Solids:</b>	76.0
<b>Method:</b>	SW846 8081A SW846 3510C		
<b>Project:</b>	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	KK13807.D	1	08/01/06	AA	07/31/06	OP17414	GKK523
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

**Pesticide TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	D013	0.40	0.00050	0.00020	mg/l	
12789-03-6	Chlordane	ND	D020	0.030	0.0050	0.0025	mg/l	
72-20-8	Endrin	ND	D012	0.020	0.0010	0.00040	mg/l	
76-44-8	Heptachlor	ND	D031	0.0080	0.00050	0.00020	mg/l	
1024-57-3	Heptachlor epoxide	ND	D031	0.0080	0.00050	0.00020	mg/l	
72-43-5	Methoxychlor	ND	D014	10	0.0010	0.00040	mg/l	
8001-35-2	Toxaphene	ND	D015	0.50	0.025	0.015	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	69%		60-138%
2051-24-3	Decachlorobiphenyl	50%		31-148%

ND = Not detected      MDL - Method Detection Limit      J = Indicates an estimated value  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

### Report of Analysis

2.2  
2

<b>Client Sample ID:</b> PC-TP-116539-GRID007	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-1A	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 76.0
<b>Method:</b> SW846 8151 SW846 3510C	
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	DD57599.D	1	07/31/06	ATX	07/28/06	T:OP6178	T:GDD1085
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

**Herbicide TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
94-75-7	2,4-D	ND	D016	10	0.015	0.011	mg/l	
93-72-1	2,4,5-TP (Silvex)	ND	D017	1.0	0.0020	0.00060	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
19719-28-9	2,4-DCAA	105%		23-171%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

ND = Not detected MDL - Method Detection Limit  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

**Report of Analysis**

<b>Client Sample ID:</b> PC-TP-116539-GRID007	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-1A	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 76.0
<b>Project:</b> Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Arsenic <sup>a</sup>	0.0056 U	D004	5.0	0.020	0.0056	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Barium	0.57 B	D005	100	1.0	0.20	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Cadmium	0.026	D006	1.0	0.0050	0.00030	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Chromium	0.020	D007	5.0	0.010	0.00060	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Lead	0.30	D008	5.0	0.050	0.0017	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Mercury	0.0010 U	D009	0.20	0.010	0.0010	mg/l	1	08/01/06	08/01/06	MS SW846 7470A <sup>2</sup>
Selenium <sup>a</sup>	0.042 B	D010	1.0	0.10	0.040	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Silver	0.00090 U	D011	5.0	0.010	0.00090	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>

- (1) Instrument QC Batch: MA5127
- (2) Instrument QC Batch: MA5128
- (3) Prep QC Batch: MP10008
- (4) Prep QC Batch: MP10014

(a) Elevated RL/MDL due to positive bias of Method Blank.

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result > = MDL but < RL

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID009	
<b>Lab Sample ID:</b> F42307-3	<b>Date Sampled:</b> 07/18/06
<b>Matrix:</b> SO - Soil	<b>Date Received:</b> 07/20/06
<b>Method:</b> SW846 8015	<b>Percent Solids:</b> 82.1
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	CD070193.D	1	07/21/06	MM	n/a	n/a	GCD2898
Run #2							

Run #	Initial Weight	Final Volume	Methanol Aliquot
Run #1	4.85 g	5.0 ml	100 ul
Run #2			

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	7.4	3.7	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
460-00-4	4-Bromofluorobenzene	85%		62-135%
98-08-8	aaa-Trifluorotoluene	86%		65-118%

(a) Sample was received in a bulk container but was not preserved within 48 hours of sampling.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

**Report of Analysis**

<b>Client Sample ID:</b> PC-TP-116539-GRID009	
<b>Lab Sample ID:</b> F42307-3	<b>Date Sampled:</b> 07/18/06
<b>Matrix:</b> SO - Soil	<b>Date Received:</b> 07/20/06
<b>Method:</b> SW846 8082 SW846 3550B	<b>Percent Solids:</b> 82.1
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	DD32910.D	20	07/31/06	NAF	07/25/06	OP17353	GDD919
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.1 g	10.0 ml
Run #2		

**PCB List**

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	400	200	ug/kg	
11104-28-2	Aroclor 1221	ND	400	320	ug/kg	
11141-16-5	Aroclor 1232	ND	400	320	ug/kg	
53469-21-9	Aroclor 1242	ND	400	200	ug/kg	
12672-29-6	Aroclor 1248	ND	400	200	ug/kg	
11097-69-1	Aroclor 1254	ND	400	200	ug/kg	
11096-82-5	Aroclor 1260 <sup>b</sup>	1110	400	200	ug/kg	J
11100-14-4	Aroclor 1268 <sup>b</sup>	832	400	200	ug/kg	J
	Total PCBs	1940	810		ug/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	0% <sup>c</sup>		52-136%
2051-24-3	Decachlorobiphenyl	0% <sup>c</sup>		49-148%

- (a) All hits confirmed by dual column analysis.
- (b) Estimated value due to the presence of multiple overlapping Aroclor patterns.
- (c) Outside control limits due to dilution.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

**Report of Analysis**

2.5  
2

<b>Client Sample ID:</b>	PC-TP-116539-GRID009	
<b>Lab Sample ID:</b>	F42307-3	<b>Date Sampled:</b> 07/18/06
<b>Matrix:</b>	SO - Soil	<b>Date Received:</b> 07/20/06
<b>Method:</b>	SW846 8015 M SW846 3550B	<b>Percent Solids:</b> 82.1
<b>Project:</b>	Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	ZF20828.D	4	07/27/06	ME	07/26/06	OP17355	GZF978
Run #2							

Run #	Initial Weight	Final Volume
Run #1	31.6 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	111	39	23	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	79%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID009	
<b>Lab Sample ID:</b> F42307-3	<b>Date Sampled:</b> 07/18/06
<b>Matrix:</b> SO - Soil	<b>Date Received:</b> 07/20/06
	<b>Percent Solids:</b> 82.1
<b>Project:</b> Paradise Creek	

### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Corrosivity as pH	7.7			1	07/21/06	EM	SW846 CHAP7
Cyanide Reactivity	< 2.3	2.3	mg/kg	1	07/25/06	SJL	SW846 CHAP7
Ignitability (Flashpoint) <sup>a</sup>	> 200		Deg. F	1	07/21/06	CP	SW846 1010
Solids, Percent	82.1		%	1	07/20/06	KG	EPA 160.3 M
Sulfide Reactivity	< 50	50	mg/kg	1	07/25/06	LE	SW846 CHAP7

(a) Not ignitable

RL = Reporting Limit

**Report of Analysis**

<b>Client Sample ID:</b> PC-TP-116539-GRID009	
<b>Lab Sample ID:</b> F42307-3A	<b>Date Sampled:</b> 07/18/06
<b>Matrix:</b> SO - Soil	<b>Date Received:</b> 07/20/06
<b>Method:</b> SW846 8260B SW846 1311	<b>Percent Solids:</b> 82.1
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	C0042614.D	10	08/03/06	KW	07/31/06	OP17412	VC1721
Run #2							

Run #	Purge Volume
Run #1	5.0 ml
Run #2	

**VOA TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
71-43-2	Benzene	ND	D018	0.50	0.010	0.0050	mg/l	
108-90-7	Chlorobenzene	ND	D021	100	0.020	0.0050	mg/l	
67-66-3	Chloroform	ND	D022	6.0	0.020	0.0050	mg/l	
56-23-5	Carbon tetrachloride	ND	D019	0.50	0.020	0.0050	mg/l	
75-35-4	1,1-Dichloroethylene	ND	D029	0.70	0.020	0.0050	mg/l	
107-06-2	1,2-Dichloroethane	ND	D028	0.50	0.020	0.0050	mg/l	
106-46-7	p-Dichlorobenzene	ND	D027	7.5	0.020	0.0050	mg/l	
78-93-3	Methyl ethyl ketone	ND	D035	200	0.10	0.025	mg/l	
127-18-4	Tetrachloroethylene	ND	D039	0.70	0.020	0.0050	mg/l	
79-01-6	Trichloroethylene	ND	D040	0.50	0.020	0.0050	mg/l	
75-01-4	Vinyl chloride	ND	D043	0.20	0.010	0.0050	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	110%		86-115%
2037-26-5	Toluene-D8	102%		86-112%
460-00-4	4-Bromofluorobenzene	102%		83-119%
17060-07-0	1,2-Dichloroethane-D4	113%		73-126%

ND = Not detected      MDL - Method Detection Limit      J = Indicates an estimated value  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

**Report of Analysis**

<b>Client Sample ID:</b> PC-TP-116539-GRID009	
<b>Lab Sample ID:</b> F42307-3A	<b>Date Sampled:</b> 07/18/06
<b>Matrix:</b> SO - Soil	<b>Date Received:</b> 07/20/06
<b>Method:</b> SW846 8270C SW846 3510C	<b>Percent Solids:</b> 82.1
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	R04134.D	1	08/02/06	NJ	07/31/06	OP17413	SR195
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	1.0 ml
Run #2		

**ABN TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	D023	200	0.050	0.020	mg/l	
	3&4-Methylphenol	ND	D024	200	0.050	0.020	mg/l	
87-86-5	Pentachlorophenol	ND	D037	100	0.25	0.10	mg/l	
95-95-4	2,4,5-Trichlorophenol	ND	D041	400	0.050	0.020	mg/l	
88-06-2	2,4,6-Trichlorophenol	ND	D042	2.0	0.050	0.020	mg/l	
106-46-7	1,4-Dichlorobenzene	ND	D027	7.5	0.050	0.010	mg/l	
121-14-2	2,4-Dinitrotoluene	ND	D030	0.13	0.050	0.020	mg/l	
118-74-1	Hexachlorobenzene	ND	D032	0.13	0.050	0.010	mg/l	
87-68-3	Hexachlorobutadiene	ND	D033	0.50	0.050	0.020	mg/l	
67-72-1	Hexachloroethane	ND	D034	3.0	0.050	0.020	mg/l	
98-95-3	Nitrobenzene	ND	D036	2.0	0.050	0.010	mg/l	
110-86-1	Pyridine	ND	D038	5.0	0.10	0.030	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
367-12-4	2-Fluorophenol	22%		19-90%
4165-62-2	Phenol-d5	12%		10-68%
118-79-6	2,4,6-Tribromophenol	74%		36-137%
4165-60-0	Nitrobenzene-d5	72%		49-119%
321-60-8	2-Fluorobiphenyl	70%		45-118%
1718-51-0	Terphenyl-d14	82%		46-135%

ND = Not detected MDL - Method Detection Limit  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

**Report of Analysis**

<b>Client Sample ID:</b> PC-TP-116539-GRID009	
<b>Lab Sample ID:</b> F42307-3A	<b>Date Sampled:</b> 07/18/06
<b>Matrix:</b> SO - Soil	<b>Date Received:</b> 07/20/06
<b>Method:</b> SW846 8081A SW846 3510C	<b>Percent Solids:</b> 82.1
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	KK13809.D	1	08/01/06	AA	07/31/06	OP17414	GKK523
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

**Pesticide TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	D013	0.40	0.00050	0.00020	mg/l	
12789-03-6	Chlordane	ND	D020	0.030	0.0050	0.0025	mg/l	
72-20-8	Endrin	ND	D012	0.020	0.0010	0.00040	mg/l	
76-44-8	Heptachlor	ND	D031	0.0080	0.00050	0.00020	mg/l	
1024-57-3	Heptachlor epoxide	ND	D031	0.0080	0.00050	0.00020	mg/l	
72-43-5	Methoxychlor	ND	D014	10	0.0010	0.00040	mg/l	
8001-35-2	Toxaphene	ND	D015	0.50	0.025	0.015	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	84%		60-138%
2051-24-3	Decachlorobiphenyl	77%		31-148%

ND = Not detected    MDL - Method Detection Limit  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID009	
<b>Lab Sample ID:</b> F42307-3A	<b>Date Sampled:</b> 07/18/06
<b>Matrix:</b> SO - Soil	<b>Date Received:</b> 07/20/06
<b>Method:</b> SW846 8151 SW846 3510C	<b>Percent Solids:</b> 82.1
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	DD57601.D	1	07/31/06	ATX	07/28/06	T:OP6178	T:GDD1085
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

**Herbicide TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
94-75-7	2,4-D	ND	D016	10	0.015	0.011	mg/l	
93-72-1	2,4,5-TP (Silvex)	ND	D017	1.0	0.0020	0.00060	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
19719-28-9	2,4-DCAA	99%		23-171%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

ND = Not detected    MDL - Method Detection Limit  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

2.6  
2

<b>Client Sample ID:</b> PC-TP-116539-GRID009	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-3A	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 82.1
<b>Project:</b> Paradise Creek	

Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Arsenic <sup>a</sup>	0.020	D004	5.0	0.020	0.0056	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Barium	0.99 B	D005	100	1.0	0.20	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Cadmium	0.063	D006	1.0	0.0050	0.00030	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Chromium	0.0064 B	D007	5.0	0.010	0.00060	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Lead	0.45	D008	5.0	0.050	0.0017	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Mercury	0.0012 B	D009	0.20	0.010	0.0010	mg/l	1	08/01/06	08/01/06	MS SW846 7470A <sup>2</sup>
Selenium <sup>a</sup>	0.045 B	D010	1.0	0.10	0.040	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Silver	0.0012 B	D011	5.0	0.010	0.00090	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>

- (1) Instrument QC Batch: MA5127
- (2) Instrument QC Batch: MA5128
- (3) Prep QC Batch: MP10008
- (4) Prep QC Batch: MP10014

(a) Elevated RL/MDL due to positive bias of Method Blank.

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result >= MDL but < RL



## Misc. Forms

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## Custody Documents and Other Forms

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Includes the following where applicable:

- Chain of Custody

**F42307**

**CHAIN-OF-CUSTODY RECORD**

COC Number: 116539-7.18.06  
Purchase Order Number:



**SHAW Environmental & Infrastructure, INC. - 5700 Thurston Ave Suite 116B - Virginia Beach, VA 23455 - (757) 363 7190**

Client Information		Client Contact Information		Analysis Desired																							
<b>Accutest</b>		4405 Vineland Road Suite C-1, Orlando FL 32811 (407)426-6700																									
<b>Project Name</b>		<b>Sample Location</b>																									
Paradise Creek		Disposal Samples																									
<b>Client ID</b>		<b>Client Name</b>		<b>Client Phone</b>																							
116539		Natasha Kelley Sullivan		(410)528-7598																							
<b>Client Logo</b>		<b>Client Name</b>																									
Shaw		Taylor Sword																									
Item No	Sample Location	Date	Time	Wet	Dry	Sample Description	Number of Containers	Lead	TCLP	PCBs	TPH	Dioxin	OC	PAH	As	Pb	Cd	Hg	Cr	Mn	Co	Ni	Cu	Zn	Mg	Ca	Fe
1	PC-TP-116539-GRID007	07/18/08	0700		X		3 x 8 curos, 2 x 4 curos soil jar		X	X	X																
2	PC-TP-116539-GRID008	07/18/08	0800		X		3 x 8 curos, 2 x 4 curos soil jar		X	X	X																
3	PC-TP-116539-GRID009	07/18/08	0900		X		3 x 8 curos, 2 x 4 curos soil jar		X	X	X																
4	PC-TP-116539-GRID0113	07/18/08	1000		X		3 x 8 curos, 2 x 4 curos soil jar		X	X	X																
5	PC-TP-116539-GRID014	07/18/08	1100		X		3 x 8 curos, 2 x 4 curos soil jar		X	X	X																
6																											
7																											
8																											
9																											
10																											

<input checked="" type="checkbox"/> 14 Day TAT	Sampled By: Brooke Mourain, SHAW	Client ID: 116539-7.18.06	Laboratory Report No.:
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Transfer Number	Transfer Date	Transfer Time	Transfer By	Transfer Date	Transfer Time	Transfer By	Remarks
1	7/19/2008	1600	URS				<b>Summary Package</b> Deliverables: EDD Excel *** Fax results to Natasha Sullivan (410) 528-7598
2			URS	7/20/08	1030		
3							
4							

24

ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION

ACCUTEST'S JOB NUMBER: F42307 CLIENT: Shaw PROJECT: Paradise Creek  
DATE/TIME RECEIVED: 1030 7/29/06 # OF COOLERS RECEIVED: 1 COOLER TEMPS: 2.4  
METHOD OF DELIVERY: FEDEX  UPS  ACCUTEST COURIER GREYHOUND DELIVERY OTHER  
AIRBILL NUMBERS: 12 65V 742 01 9200 1298

COOLER INFORMATION

- CUSTODY SEAL NOT PRESENT OR NOT INTACT
- CHAIN OF CUSTODY NOT RECEIVED (COC)
- ANALYSIS REQUESTED IS UNCLEAR OR MISSING
- SAMPLE DATES OR TIMES UNCLEAR OR MISSING
- TEMPERATURE CRITERIA NOT MET

TRIP BLANK INFORMATION

- TRIP BLANK NOT PROVIDED
- TRIP BLANK NOT ON COC
- TRIP BLANK INTACT
- TRIP BLANK NOT INTACT
- RECEIVED WATER TRIP BLANK
- RECEIVED SOIL TRIP BLANK

MISC. INFORMATION

NUMBER OF ENCORES ? 1  
NUMBER OF 5035 FIELD KITS ? 2  
NUMBER OR LAB FILTERED METALS ? 1

SUMMARY OF COMMENTS:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TECHNICIAN SIGNATURE/DATE [Signature] 7/29/06 TECHNICIAN SIGNATURE/DATE \_\_\_\_\_

ASBD03/27/06

3.1  
3.1



## GC/MS Volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Leachate Blank Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17412-LB	C0042611.D	10	08/03/06	KW	07/31/06	OP17412	VC1721

4:1  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	Result	RL	MDL	Units	Q
71-43-2	Benzene	ND	10	5.0	ug/l	
108-90-7	Chlorobenzene	ND	20	5.0	ug/l	
67-66-3	Chloroform	ND	20	5.0	ug/l	
56-23-5	Carbon tetrachloride	ND	20	5.0	ug/l	
75-35-4	1,1-Dichloroethylene	ND	20	5.0	ug/l	
107-06-2	1,2-Dichloroethane	ND	20	5.0	ug/l	
106-46-7	p-Dichlorobenzene	ND	20	5.0	ug/l	
78-93-3	Methyl ethyl ketone	ND	100	25	ug/l	
127-18-4	Tetrachloroethylene	ND	20	5.0	ug/l	
79-01-6	Trichloroethylene	ND	20	5.0	ug/l	
75-01-4	Vinyl chloride	ND	10	5.0	ug/l	

CAS No.	Surrogate Recoveries		Limits
1868-53-7	Dibromofluoromethane	107%	86-115%
17060-07-0	1,2-Dichloroethane-D4	108%	73-126%
2037-26-5	Toluene-D8	101%	86-112%
460-00-4	4-Bromofluorobenzene	105%	83-119%

# Blank Spike Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VC1721-BS	C0042610.D	10	08/03/06	KW	n/a	n/a	VC1721

4.2  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
71-43-2	Benzene	250	258	103	80-120
108-90-7	Chlorobenzene	250	252	101	82-112
67-66-3	Chloroform	250	271	108	78-118
56-23-5	Carbon tetrachloride	250	302	121	69-137
75-35-4	1,1-Dichloroethylene	250	286	114	67-134
107-06-2	1,2-Dichloroethane	250	268	107	68-121
106-46-7	p-Dichlorobenzene	250	244	98	77-113
78-93-3	Methyl ethyl ketone	1250	1100	88	58-127
127-18-4	Tetrachloroethylene	250	273	109	75-126
79-01-6	Trichloroethylene	250	259	104	80-115
75-01-4	Vinyl chloride	250	328	131	70-151

CAS No.	Surrogate Recoveries	BSP	Limits
1868-53-7	Dibromofluoromethane	104%	86-115%
17060-07-0	1,2-Dichloroethane-D4	110%	73-126%
2037-26-5	Toluene-D8	102%	86-112%
460-00-4	4-Bromofluorobenzene	98%	83-119%



## GC/MS Semi-volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Leachate Blank Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17413-LB	R04125.D	1	08/02/06	NJ	08/01/06	OP17413	SR195

The QC reported here applies to the following samples:

Method: SW846 8270C

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	Result	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	50	20	ug/l	
	3&4-Methylphenol	ND	50	20	ug/l	
87-86-5	Pentachlorophenol	ND	250	100	ug/l	
95-95-4	2,4,5-Trichlorophenol	ND	50	20	ug/l	
88-06-2	2,4,6-Trichlorophenol	ND	50	20	ug/l	
106-46-7	1,4-Dichlorobenzene	ND	50	10	ug/l	
121-14-2	2,4-Dinitrotoluene	ND	50	20	ug/l	
118-74-1	Hexachlorobenzene	ND	50	10	ug/l	
87-68-3	Hexachlorobutadiene	ND	50	20	ug/l	
67-72-1	Hexachloroethane	ND	50	20	ug/l	
98-95-3	Nitrobenzene	ND	50	10	ug/l	
110-86-1	Pyridine	ND	100	30	ug/l	

CAS No.	Surrogate Recoveries		Limits
367-12-4	2-Fluorophenol	19%	19-90%
4165-62-2	Phenol-d5	10%	10-68%
118-79-6	2,4,6-Tribromophenol	70%	36-137%
4165-60-0	Nitrobenzene-d5	65%	49-119%
321-60-8	2-Fluorobiphenyl	62%	45-118%
1718-51-0	Terphenyl-d14	89%	46-135%

# Blank Spike Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17413-LBS	R04124.D	1	08/02/06	NJ	08/01/06	OP17413	SR195

The QC reported here applies to the following samples:

Method: SW846 8270C

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
95-48-7	2-Methylphenol	500	257	51	48-90
	3&4-Methylphenol	1000	452	45	43-94
87-86-5	Pentachlorophenol	1000	888	89	62-120
95-95-4	2,4,5-Trichlorophenol	500	408	82	67-103
88-06-2	2,4,6-Trichlorophenol	500	399	80	68-104
106-46-7	1,4-Dichlorobenzene	500	350	70	46-96
121-14-2	2,4-Dinitrotoluene	500	408	82	64-107
118-74-1	Hexachlorobenzene	500	410	82	69-103
87-68-3	Hexachlorobutadiene	500	376	75	48-100
67-72-1	Hexachloroethane	500	354	71	41-98
98-95-3	Nitrobenzene	500	383	77	60-102
110-86-1	Pyridine	500	205	41	17-65

CAS No.	Surrogate Recoveries	BSP	Limits
367-12-4	2-Fluorophenol	31%	19-90%
4165-62-2	Phenol-d5	19%	10-68%
118-79-6	2,4,6-Tribromophenol	83%	36-137%
4165-60-0	Nitrobenzene-d5	80%	49-119%
321-60-8	2-Fluorobiphenyl	80%	45-118%
1718-51-0	Terphenyl-d14	84%	46-135%

5.2

5

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17413-MS	R04129.D	1	08/02/06	NJ	07/31/06	OP17413	SR195
OP17413-MSD	R04130.D	1	08/02/06	NJ	07/31/06	OP17413	SR195
F42421-2A	R04128.D	1	08/02/06	NJ	07/31/06	OP17413	SR195

The QC reported here applies to the following samples:

Method: SW846 8270C

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	F42421-2A		MS ug/l	MS %	MSD		RPD	Limits Rec/RPD
		ug/l	Q			ug/l	%		
95-48-7	2-Methylphenol	ND	500	206	41	177	35*	15	40-102/25
	3&4-Methylphenol	257	1000	597	34*	518	26*	14	39-97/24
87-86-5	Pentachlorophenol	ND	1000	887	89	835	84	6	53-128/22
95-95-4	2,4,5-Trichlorophenol	ND	500	394	79	370	74	6	56-110/19
88-06-2	2,4,6-Trichlorophenol	ND	500	393	79	369	74	6	55-112/19
106-46-7	1,4-Dichlorobenzene	ND	500	360	72	325	65	10	43-102/24
121-14-2	2,4-Dinitrotoluene	ND	500	410	82	388	78	6	60-108/18
118-74-1	Hexachlorobenzene	ND	500	416	83	391	78	6	66-106/16
87-68-3	Hexachlorobutadiene	ND	500	387	77	348	70	11	46-107/26
98-95-3	Nitrobenzene	ND	500	386	77	341	68	12	50-107/25
110-86-1	Pyridine	ND	500	202	40	185	37	9	19-77/41

CAS No.	Surrogate Recoveries	MS	MSD	F42421-2A	Limits
367-12-4	2-Fluorophenol	23%	20%	22%	19-90%
4165-62-2	Phenol-d5	13%	11%	14%	10-68%
118-79-6	2,4,6-Tribromophenol	84%	79%	77%	36-137%
4165-60-0	Nitrobenzene-d5	78%	73%	66%	49-119%
321-60-8	2-Fluorobiphenyl	79%	74%	67%	45-118%
1718-51-0	Terphenyl-d14	86%	82%	69%	46-135%

5.3

## Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17413-DUP	R04127.D	1	08/02/06	NJ	07/31/06	OP17413	SR195
F42421-1A	R04126.D	1	08/02/06	NJ	07/31/06	OP17413	SR195

The QC reported here applies to the following samples:

Method: SW846 8270C

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	F42421-1A		Q	RPD	Limits
		ug/l	DUP Q ug/l			
95-48-7	2-Methylphenol	ND	ND		nc	
	3&4-Methylphenol	ND	ND		nc	
87-86-5	Pentachlorophenol	ND	ND		nc	
95-95-4	2,4,5-Trichlorophenol	ND	ND		nc	
88-06-2	2,4,6-Trichlorophenol	ND	ND		nc	
106-46-7	1,4-Dichlorobenzene	ND	ND		nc	
121-14-2	2,4-Dinitrotoluene	ND	ND		nc	
118-74-1	Hexachlorobenzene	ND	ND		nc	
87-68-3	Hexachlorobutadiene	ND	ND		nc	
67-72-1	Hexachloroethane	ND	ND		nc	
98-95-3	Nitrobenzene	ND	ND		nc	
110-86-1	Pyridine	ND	ND		nc	

CAS No.	Surrogate Recoveries	DUP	F42421-1A	Limits
367-12-4	2-Fluorophenol	23%	22%	19-90%
4165-62-2	Phenol-d5	13%	12%	10-68%
118-79-6	2,4,6-Tribromophenol	78%	83%	36-137%
4165-60-0	Nitrobenzene-d5	75%	79%	49-119%
321-60-8	2-Fluorobiphenyl	74%	76%	45-118%
1718-51-0	Terphenyl-d14	84%	89%	46-135%

5.4  
5



## GC Volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries



# Method Blank Summary

**Job Number:** F42307  
**Account:** ITVAVAB Shaw E & I, Inc.  
**Project:** Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GCD2898-MB	CD070182.D 1		07/21/06	MM	n/a	n/a	GCD2898

The QC reported here applies to the following samples:

Method: SW846 8015

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	5.0	2.5	mg/kg	

CAS No.	Surrogate Recoveries		Limits
460-00-4	4-Bromofluorobenzene	82%	62-135%
98-08-8	aaa-Trifluorotoluene	89%	65-118%

S1  
6

# Blank Spike Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GCD2898-BS	CD070181.D	1	07/21/06	MM	n/a	n/a	GCD2898

The QC reported here applies to the following samples:

Method: SW846 8015

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH-GRO (C6-C10)	20	19.7	99	66-122

CAS No.	Surrogate Recoveries	BSP	Limits
460-00-4	4-Bromofluorobenzene	96%	62-135%
98-08-8	aaa-Trifluorotoluene	99%	65-118%



# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F42301-1MS	CD070197.D	1	07/21/06	MM	n/a	n/a	GCD2898
F42301-1MSD	CD070198.D	1	07/21/06	MM	n/a	n/a	GCD2898
F42301-1	CD070189.D	1	07/21/06	MM	n/a	n/a	GCD2898

The QC reported here applies to the following samples:

Method: SW846 8015

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	F42301-1 mg/kg	Spike Q	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH-GRO (C6-C10)	ND	22.8	21.0	92	20.9	92	0	37-142/17

CAS No.	Surrogate Recoveries	MS	MSD	F42301-1	Limits
460-00-4	4-Bromofluorobenzene	101%	89%	80%	62-135%
98-08-8	aaa-Trifluorotoluene	105%	95%	85%	65-118%





## GC Semi-volatiles

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## QC Data Summaries

7

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Method Blank Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17353-MB	ST49793.D	1	07/28/06	NAF	07/25/06	OP17353	GST1443

The QC reported here applies to the following samples:

Method: SW846 8082

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	8.3	ug/kg	
11104-28-2	Aroclor 1221	ND	17	13	ug/kg	
11141-16-5	Aroclor 1232	ND	17	13	ug/kg	
53469-21-9	Aroclor 1242	ND	17	8.3	ug/kg	
12672-29-6	Aroclor 1248	ND	17	8.3	ug/kg	
11097-69-1	Aroclor 1254	ND	17	8.3	ug/kg	
11096-82-5	Aroclor 1260	ND	17	8.3	ug/kg	
11100-14-4	Aroclor 1268	ND	17	8.3	ug/kg	
	Total PCBs	ND	33		ug/kg	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	88%	52-136%
2051-24-3	Decachlorobiphenyl	101%	49-148%

7.1  
7

# Method Blank Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17353-MB	DD32907.D	1	07/31/06	NAF	07/25/06	OP17353	GDD919

The QC reported here applies to the following samples:

Method: SW846 8082

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	8.3	ug/kg	
11104-28-2	Aroclor 1221	ND	17	13	ug/kg	
11141-16-5	Aroclor 1232	ND	17	13	ug/kg	
53469-21-9	Aroclor 1242	ND	17	8.3	ug/kg	
12672-29-6	Aroclor 1248	ND	17	8.3	ug/kg	
11097-69-1	Aroclor 1254	ND	17	8.3	ug/kg	
11096-82-5	Aroclor 1260	ND	17	8.3	ug/kg	
11100-14-4	Aroclor 1268	ND	17	8.3	ug/kg	
	Total PCBs	ND	33		ug/kg	

CAS No.	Surrogate Recoveries	Limits	
877-09-8	Tetrachloro-m-xylene	105%	52-136%
2051-24-3	Decachlorobiphenyl	107%	49-148%



# Method Blank Summary

**Job Number:** F42307  
**Account:** ITVAVAB Shaw E & I, Inc.  
**Project:** Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17355-MB	ZF20823.D	1	07/27/06	ME	07/26/06	OP17355	GZF978

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries		Limits
84-15-1	o-Terphenyl	90%	57-115%

7.1  
7

# Leachate Blank Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17414-LB	KK13798.D	1	08/01/06	AA	08/01/06	OP17414	GKK523

The QC reported here applies to the following samples:

Method: SW846 8081A

F42307-1A, F42307-2A, F42307-3A, F42307-4A

CAS No.	Compound	Result	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	0.50	0.20	ug/l	
12789-03-6	Chlordane	ND	5.0	2.5	ug/l	
72-20-8	Endrin	ND	1.0	0.40	ug/l	
76-44-8	Heptachlor	ND	0.50	0.20	ug/l	
1024-57-3	Heptachlor epoxide	ND	0.50	0.20	ug/l	
72-43-5	Methoxychlor	ND	1.0	0.40	ug/l	
8001-35-2	Toxaphene	ND	25	15	ug/l	

CAS No.	Surrogate Recoveries	Limits	
877-09-8	Tetrachloro-m-xylene	79%	60-138%
2051-24-3	Decachlorobiphenyl	80%	31-148%

7.2  
7

# Leachate Blank Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17436-LB	TT01323.D	1	08/03/06	VS	08/02/06	OP17436	GTT53

The QC reported here applies to the following samples:

Method: SW846 8081A

F42307-5A

CAS No.	Compound	Result	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	0.50	0.20	ug/l	
12789-03-6	Chlordane	ND	5.0	2.5	ug/l	
72-20-8	Endrin	ND	1.0	0.40	ug/l	
76-44-8	Heptachlor	ND	0.50	0.20	ug/l	
1024-57-3	Heptachlor epoxide	ND	0.50	0.20	ug/l	
72-43-5	Methoxychlor	ND	1.0	0.40	ug/l	
8001-35-2	Toxaphene	ND	25	15	ug/l	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	99%	60-138%
2051-24-3	Decachlorobiphenyl	94%	31-148%

7.2  
7

# Blank Spike Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17414-LBS	KK13797.D	1	08/01/06	AA	08/01/06	OP17414	GKK523

The QC reported here applies to the following samples:

Method: SW846 8081A

F42307-1A, F42307-2A, F42307-3A, F42307-4A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
58-89-9	gamma-BHC (Lindane)	5	5.1	102	69-137
72-20-8	Endrin	5	5.0	100	78-134
76-44-8	Heptachlor	5	4.9	98	62-137
1024-57-3	Heptachlor epoxide	5	5.0	100	74-130
72-43-5	Methoxychlor	5	4.5	90	77-131

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	82%	60-138%
2051-24-3	Decachlorobiphenyl	90%	31-148%

7.3  
7

# Blank Spike Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17436-LBS <sup>a</sup>	TT01322.D	1	08/03/06	VS	08/02/06	OP17436	GTT53

The QC reported here applies to the following samples:

Method: SW846 8081A

F42307-5A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
58-89-9	gamma-BHC (Lindane)	5	6.1	122	69-137
72-20-8	Endrin	5	6.2	124	78-134
76-44-8	Heptachlor	5	7.1	142*	62-137
1024-57-3	Heptachlor epoxide	5	6.1	122	74-130
72-43-5	Methoxychlor	5	6.6	132*	77-131

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	101%	60-138%
2051-24-3	Decachlorobiphenyl	98%	31-148%

(a) Insufficient sample for MS/MSD.

7.3



# Blank Spike Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17353-BS	ST49792.D	1	07/28/06	NAF	07/25/06	OP17353	GST1443

The QC reported here applies to the following samples:

Method: SW846 8082

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Spike ug/kg	BSP ug/kg	BSP %	Limits
12674-11-2	Aroclor 1016	133	122	92	75-123
11096-82-5	Aroclor 1260	133	119	89	72-124

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	82%	52-136%
2051-24-3	Decachlorobiphenyl	103%	49-148%

7.3  
7

# Blank Spike Summary

**Job Number:** F42307  
**Account:** ITVAVAB Shaw E & I, Inc.  
**Project:** Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17355-BS	ZF20822.D	1	07/27/06	ME	07/26/06	OP17355	GZF978

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH (C10-C28)	33.3	26.0	78	62-114

CAS No.	Surrogate Recoveries	BSP	Limits
84-15-1	o-Terphenyl	94%	57-115%

7.3  
7

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17414-MS	KK13802.D	1	08/01/06	AA	07/31/06	OP17414	GKK523
OP17414-MSD	KK13803.D	1	08/01/06	AA	07/31/06	OP17414	GKK523
F42421-2A	KK13801.D	1	08/01/06	AA	07/31/06	OP17414	GKK523

The QC reported here applies to the following samples:

Method: SW846 8081A

F42307-1A, F42307-2A, F42307-3A, F42307-4A

CAS No.	Compound	F42421-2A ug/l	Spike Q	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
58-89-9	gamma-BHC (Lindane)	ND	5	5.4	108	5.5	110	2	75-140/21
72-20-8	Endrin	ND	5	5.7	114	5.7	114	0	72-149/21
76-44-8	Heptachlor	ND	5	5.6	112	5.6	112	0	74-136/25
1024-57-3	Heptachlor epoxide	ND	5	5.5	110	5.3	106	4	75-138/21
72-43-5	Methoxychlor	ND	5	5.2	104	5.4	108	4	69-145/27

CAS No.	Surrogate Recoveries	MS	MSD	F42421-2A	Limits
877-09-8	Tetrachloro-m-xylene	85%	83%	81%	60-138%
2051-24-3	Decachlorobiphenyl	84%	85%	84%	31-148%

7.4  
7

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17353-MS	ST49796.D	1	07/28/06	NAF	07/25/06	OP17353	GST1443
OP17353-MSD	ST49797.D	1	07/28/06	NAF	07/25/06	OP17353	GST1443
F42161-4	ST49795.D	1	07/28/06	NAF	07/25/06	OP17353	GST1443

The QC reported here applies to the following samples:

Method: SW846 8082

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	F42161-4 ug/kg	Q	Spike ug/kg	MS ug/kg	MS %	MSD ug/kg	MSD %	RPD	Limits Rec/RPD
12674-11-2	Aroclor 1016	18	U	144	132	92	130	91	2	54-138/22
11096-82-5	Aroclor 1260	18	U	144	128	89	127	89	1	46-138/21

CAS No.	Surrogate Recoveries	MS	MSD	F42161-4	Limits
877-09-8	Tetrachloro-m-xylene	91%	85%	78%	52-136%
2051-24-3	Decachlorobiphenyl	97%	102%	94%	49-148%

7.4  
7

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17355-MS	ZF20841.D	1	07/27/06	ME	07/26/06	OP17355	GZF978
OP17355-MSD	ZF20842.D	1	07/27/06	ME	07/26/06	OP17355	GZF978
F42359-4 <sup>a</sup>	ZF20840.D	1	07/27/06	ME	07/26/06	OP17355	GZF978

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	F42359-4 mg/kg	Spike Q mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH (C10-C28)	19.5	37.2	73.4	145*	64.0	120	14	31-136/36

CAS No.	Surrogate Recoveries	MS	MSD	F42359-4	Limits
84-15-1	o-Terphenyl	97%	90%	81%	57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

7.4  
7

# Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17414-DUP	KK13800.D	1	08/01/06	AA	07/31/06	OP17414	GKK523
F42421-1A	KK13799.D	1	08/01/06	AA	07/31/06	OP17414	GKK523

The QC reported here applies to the following samples:

Method: SW846 8081A

F42307-1A, F42307-2A, F42307-3A, F42307-4A

CAS No.	Compound	F42421-1A		Q	RPD	Limits
		ug/l	DUP Q ug/l			
58-89-9	gamma-BHC (Lindane)	ND	ND		nc	
12789-03-6	Chlordane	ND	ND		nc	
72-20-8	Endrin	ND	ND		nc	
76-44-8	Heptachlor	ND	ND		nc	
1024-57-3	Heptachlor epoxide	ND	ND		nc	
72-43-5	Methoxychlor	ND	ND		nc	
8001-35-2	Toxaphene	ND	ND		nc	

CAS No.	Surrogate Recoveries	DUP	F42421-1A	Limits
877-09-8	Tetrachloro-m-xylene	82%	85%	60-138%
2051-24-3	Decachlorobiphenyl	89%	85%	31-148%

7.5  
7



## Metals Analysis

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### QC Data Summaries



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Includes the following where applicable:

- Method Blank Summaries
- Matrix Spike and Duplicate Summaries
- Blank Spike and Lab Control Sample Summaries
- Serial Dilution Summaries

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F42307  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP10008  
Matrix Type: LEACHATE

Methods: SW846 6010B  
Units: mg/l

Prep Date: 07/31/06 07/31/06 07/31/06

Metal	RL	IDL	MB raw	final	MB raw	final	MB raw	final
Aluminum	0.20	.018						
Antimony	0.0060	.0034						
Arsenic	0.020	.0028	-0.0032	<0.020	0.0060	<0.020	-0.00027	<0.020
Barium	1.0	.0004	-0.000060	<1.0	0.0031	<1.0	0.0026	<1.0
Beryllium	0.0050	.0004						
Cadmium	0.0050	.0002	0.000050	<0.0050	0.000030	<0.0050	-0.000050	<0.0050
Calcium	5.0	.042						
Chromium	0.010	.0006	-0.000020	<0.010	0.0028	<0.010	0.0	<0.010
Cobalt	0.050	.0006						
Copper	0.025	.0009						
Iron	0.30	.012						
Lead	0.050	.0017	0.0010	<0.050	0.0063	<0.050	0.0075	<0.050
Magnesium	5.0	.0043						
Manganese	0.015	.0006						
Molybdenum	0.050	.0013						
Nickel	0.040	.0008	anr					
Potassium	10	.01						
Selenium	0.10	.002	0.0012	<0.10	0.033	<0.10	0.029	<0.10
Silver	0.010	.0009	0.00023	<0.010	0.00047	<0.010	0.00072	<0.010
Sodium	10	.5						
Thallium	0.010	.0023						
Tin	0.050	.0031						
Vanadium	0.050	.0006						
Zinc	0.10	.0013						

Associated samples MP10008: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

8.1.1  
8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MF10008  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 07/31/06 07/31/06

Metal	F42269-1 Original	DUP	RPD	QC Limits	F42269-1 Original MS	Spikelot MPFLICP1	% Rec	QC Limits
Aluminum								
Antimony								
Arsenic	0.0	0.0	NC	0-20	0.0	2.3	2.0	115.0 80-120
Barium	0.039	0.039	0.0	0-20	0.039	2.0	2.0	98.1 80-120
Beryllium								
Cadmium	0.0	0.0	NC	0-20	0.0	0.049	0.050	98.0 80-120
Calcium								
Chromium	0.010	0.010	0.0	0-20	0.010	0.20	0.20	95.0 80-120
Cobalt								
Copper								
Iron								
Lead	0.0044	0.0044	0.0	0-20	0.0044	0.49	0.50	97.1 80-120
Magnesium								
Manganese								
Molybdenum								
Nickel	anr							
Potassium								
Selenium	0.052	0.053	1.9	0-20	0.052	2.3	2.0	112.4 80-120
Silver	0.0	0.0012	200.0(a)	0-20	0.0	0.058	0.050	116.0 80-120
Sodium								
Thallium								
Tin								
Vanadium								
Zinc								

Associated samples MF10008: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested  
 (a) RPD acceptable due to low duplicate and sample concentrations.

8.12  
8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10008  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 07/31/06 07/31/06

Metal	F42269-1 Original MSD	Spikelot MPFLICP1 % Rec	MSD RPD	QC Limit	F42421-1A Original DUP	RPD	QC Limits
Aluminum							
Antimony							
Arsenic	0.0 2.3	2.0 115.0	0.0	20	0.0 0.0	NC (a)	0-20
Barium	0.039 2.0	2.0 98.1	0.0	20	0.10 0.083	18.6	0-20
Beryllium							
Cadmium	0.0 0.048	0.050 96.0	2.1	20	0.0020 0.0021	4.9	0-20
Calcium							
Chromium	0.010 0.20	0.20 95.0	0.0	20	0.0062 0.0012	135.1 (a)	0-20
Cobalt							
Copper							
Iron							
Lead	0.0044 0.49	0.50 97.1	0.0	20	0.0042 0.0	200.0 (a)	0-20
Magnesium							
Manganese							
Molybdenum							
Nickel	anr						
Potassium							
Selenium	0.052 2.3	2.0 112.4	0.0	20	0.048 0.049	2.1	0-20
Silver	0.0 0.058	0.050 116.0	0.0	20	0.0013 0.0	200.0 (a)	0-20
Sodium							
Thallium							
Tin							
Vanadium							
Zinc							

Associated samples MP10008: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes

(\*) Outside of QC limits

(N) Matrix Spike Rec. outside of QC limits

(anr) Analyte not requested

(a) RPD acceptable due to low duplicate and sample concentrations.

8.1.2  
8

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10008  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 07/31/06 07/31/06

Metal	BSP Result	Spikelet MPFLICP1 % Rec	QC Limits	BSP Result	Spikelet MPFLICP1 % Rec	QC Limits		
Aluminum								
Antimony								
Arsenic	2.2	2.0	110.0	80-120	2.4	2.0	120.0	80-120
Barium	2.1	2.0	105.0	80-120	2.0	2.0	100.0	80-120
Beryllium								
Cadmium	0.051	0.050	102.0	80-120	0.051	0.050	102.0	80-120
Calcium								
Chromium	0.20	0.20	100.0	80-120	0.20	0.20	100.0	80-120
Cobalt								
Copper								
Iron								
Lead	0.51	0.50	102.0	80-120	0.52	0.50	104.0	80-120
Magnesium								
Manganese								
Molybdenum								
Nickel	anr							
Potassium								
Selenium	1.9	2.0	95.0	80-120	2.3	2.0	115.0	80-120
Silver	0.053	0.050	106.0	80-120	0.057	0.050	114.0	80-120
Sodium								
Thallium								
Tin								
Vanadium								
Zinc								

Associated samples MP10008: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

8.13  
8

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10008  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 07/31/06

Metal	BSP Result	Spikelot MPFLICP1	% Rec	QC Limits
Aluminum				
Antimony				
Arsenic	2.2	2.0	110.0	80-120
Barium	2.1	2.0	105.0	80-120
Beryllium				
Cadmium	0.050	0.050	100.0	80-120
Calcium				
Chromium	0.20	0.20	100.0	80-120
Cobalt				
Copper				
Iron				
Lead	0.50	0.50	100.0	80-120
Magnesium				
Manganese				
Molybdenum				
Nickel	anr			
Potassium				
Selenium	2.1	2.0	105.0	80-120
Silver	0.051	0.050	102.0	80-120
Sodium				
Thallium				
Tin				
Vanadium				
Zinc				

Associated samples MP10008: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

8.1.3  
**8**

SERIAL DILUTION RESULTS SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10008  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: ug/l

Prep Date: 07/31/06

Metal	F42269-1 Original	SDL 1:5	RPD	QC Limits
-------	----------------------	---------	-----	--------------

Aluminum				
Antimony				
Arsenic	0.00	0.00	NC	0-10
Barium	38.9	40.8	4.9	0-10
Beryllium				
Cadmium	0.00	0.00	NC	0-10
Calcium				
Chromium	10.5	9.81	6.3	0-10
Cobalt				
Copper				
Iron				
Lead	4.39	0.00	100.0 (a)	0-10
Magnesium				
Manganese				
Molybdenum				
Nickel	anr			
Potassium				
Selenium	51.6	44.7	13.3 (a)	0-10
Silver	0.00	5.00		0-10
Sodium				
Thallium				
Tin				
Vanadium				
Zinc				

Associated samples MP10008: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes

(\*) Outside of QC limits

(anr) Analyte not requested

(a) Percent difference acceptable due to low initial sample concentration (< 50 times IDL).

8.1.4  
8

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F42307  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MF10014  
Matrix Type: LEACHATE

Methods: SW846 7470A  
Units: mg/l

Prep Date: 08/01/06 08/01/06 08/01/06

Metal	RL	IDL	MB		MB		MB	
			raw	final	raw	final	raw	final
Mercury	0.0010	.00008	0.000015	<0.0010	0.00038	<0.010	-0.00027	<0.010

Associated samples MF10014: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

8.2.1

8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10014  
 Matrix Type: LEACHATE

Methods: SW846 7470A  
 Units: mg/l

Prep Date: 08/01/06 08/01/06

Metal	F42421-1A Original	DUP	RPD	QC Limits	F42421-1A Original MS	Spikelot HGFLWS1	% Rec	QC Limits	
Mercury	0.0	0.0	NC	0-20	0.0	0.031	0.030	103.3	80-120

Associated samples MP10014: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested

8.2.2  
**8**

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MF10014  
 Matrix Type: LEACHATE

Methods: SW846 7470A  
 Units: mg/l

Prep Date: 08/01/06

Metal	F42421-1A Original MSD	Spikelot HGFLWS1	% Rec	MSD RPD	QC Limit
Mercury	0.0	0.031	0.030	103.3	0.0

Associated samples MF10014: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested

8.2.2  
**8**

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10014  
 Matrix Type: LEACHATE

Methods: SW846 7470A  
 Units: mg/l

Prep Date: 08/01/06 08/01/06

Metal	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.0030	0.0030	100.0	80-120	0.031	0.030	103.3	80-120

Associated samples MP10014: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

8.2.3

8

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F42307  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MF10014  
Matrix Type: LEACHATE

Methods: SW846 7470A  
Units: mg/l

Prep Date: 08/01/06

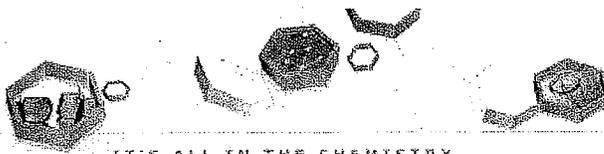
Metal	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.030	0.030	100.0	80-120

Associated samples MF10014: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

8.2.3

8



IT'S ALL IN THE CHEMISTRY

## General Chemistry

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank and Blank Spike Summaries
- Duplicate Summaries
- Matrix Spike Summaries

METHOD BLANK AND SPIKE RESULTS SUMMARY  
GENERAL CHEMISTRY

Login Number: F42307  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

Analyte	Batch ID	RL	MB Result	Units	Spike Amount	BSP Result	BSP %Recov	QC Limits
Cyanide Reactivity	GP8160/GN21501			mg/kg	5.00	1.6	32.8	0-100%
Cyanide Reactivity	GP8160/GN21501	1.5	<1.5	mg/kg	5.00	1.9	38.2	0-100%
Sulfide Reactivity	GP8161/GN21502	50	<50	mg/kg	53.7	2.0	3.7	0-100%

Associated Samples:

Batch GP8160: F42307-1, F42307-2, F42307-3, F42307-4, F42307-5  
Batch GP8161: F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

9.1  


DUPLICATE RESULTS SUMMARY  
GENERAL CHEMISTRY

Login Number: F42307  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

Analyte	Batch ID	QC Sample	Units	Original Result	DUP Result	RPD	QC Limits
Corrosivity as pH	GN21458	F42307-1		7.3	7.2		0-%
Ignitability (Flashpoint)	GN21505	F42224-1	Deg. F	>200	>200 (a)	0.0	0-38%
Solids, Percent	GN21440	F42301-1	%	92.2	92.6	0.4	0-30%

Associated Samples:

Batch GN21440: F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

Batch GN21458: F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

Batch GN21505: F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

(a) Not ignitable.

9.2





IT'S ALL IN THE CHEMISTRY

## Misc. Forms

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### Custody Documents and Other Forms

(Accutest Laboratories Gulf Coast, Inc.)

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Includes the following where applicable:

- Chain of Custody

10

ACCUTEST JOB #:  
ACCUTEST QUOTE #:

CLIENT INFORMATION		FACILITY INFORMATION				ANALYTICAL INFORMATION				MATRIX CODES			
NAME <i>ALSC</i>		PROJECT NAME <i>F42307</i>				<i>8151 TLP</i>				DW - DRINKING WATER GW - GROUND WATER WW - WASTE WATER SO - SOIL SL - SLUDGE OI - OIL LIQ - OTHER LIQUID SOL - OTHER SOLID			
ADDRESS		LOCATION											
CITY, STATE ZIP		PROJECT NO.											
SEND REPORT TO: PHONE #		FAX #											
ACCUTEST SAMPLE #	FIELD ID / POINT OF COLLECTION	COLLECTION			PRESERVATION							LAB USE ONLY	
		DATE	TIME	SAMPLED BY:	MATRIX	LOS	BOTTLES	HCl	NH <sub>4</sub> OH	HNO <sub>3</sub>	RESIN		NONE
	<i>F42307-1A</i>	<i>7/19/08</i>	<i>200</i>		<i>SO</i>	<i>1</i>						<i>X</i>	
	<i>" -2A</i>		<i>800</i>			<i>1</i>						<i>X</i>	
	<i>" -3A</i>		<i>900</i>			<i>1</i>						<i>X</i>	
	<i>" -4A</i>		<i>1000</i>			<i>1</i>						<i>X</i>	
	<i>" -5A</i>		<i>1100</i>			<i>1</i>						<i>X</i>	

DATA TURNAROUND INFORMATION		DATA DELIVERABLE INFORMATION		COMMENTS/REMARKS	
<input type="checkbox"/> STANDARD <input type="checkbox"/> 48 HOUR RUSH <input type="checkbox"/> 24 HOUR EMERGENCY <input checked="" type="checkbox"/> OTHER <i>14 DAY</i>		<input type="checkbox"/> STANDARD <input checked="" type="checkbox"/> COMMERCIAL "B" <input type="checkbox"/> DISK DELIVERABLE <input type="checkbox"/> STATE FORMS <input type="checkbox"/> OTHER (SPECIFY) _____		<i>ALSC</i> <i>- AFD -</i> <i>Airbill # 791057461648</i>	
APPROVED BY: _____		EMERGENCY OR RUSH IS FAX DATA UNLESS PREVIOUSLY APPROVED			

SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION, INCLUDING COURIER DELIVERY

RELINQUISHED BY SAMPLER: 1. <i>Steve Brown</i>	DATE TIME: <i>7-20-08</i>	RECEIVED BY: 1. _____	RELINQUISHED BY: 2. _____	DATE TIME: _____	RECEIVED BY: 2. _____
RELINQUISHED BY: 3. _____	DATE TIME: _____	RECEIVED BY: 3. _____	RELINQUISHED BY: 4. _____	DATE TIME: _____	RECEIVED BY: 4. _____
RELINQUISHED BY: 5. _____	DATE TIME: <i>7/20/08 09:50</i>	RECEIVED BY: <i>A. Koenig</i>	SEAL #	PRESERVE WHERE APPLICABLE <input type="checkbox"/>	ON ICE <input type="checkbox"/>

TEMPERATURE *3.8* C

10.1 10

F42307: Chain of Custody  
Page 1 of 3  
Accutest Laboratories Gulf Coast, Inc.



FedEx | Ship Manager | Label 7910 5746 6648

F42307

Ship Date: 20JUL06  
ActWgt: 25 LB  
System#: 627259INMET280  
Account#: S 00000000  
TREF:

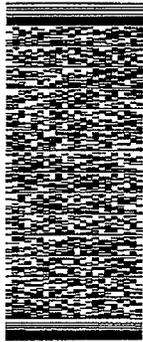


Delivery Address Bar Code



BILL RECEIPT

SHIP TO: (713)271-4700  
Sample Management  
Accutest Laboratories Gulf Coast  
10165 Harwin Drive  
Houston, TX 77036



PRIORITY OVERNIGHT  
TRK# 7910 5746 6648  
77036 -TX-US  
FORM 0201  
IAH A2  
FRI  
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F42307: Chain of Custody  
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IT'S ALL IN THE CHEMISTRY

## GC Semi-volatiles

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### QC Data Summaries

(Accutest Laboratories Gulf Coast, Inc.)

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

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# Method Blank Summary

Job Number: F42307  
Account: ALSE Accutest Laboratories Southeast, Inc.  
Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6178-MB	DD57593.D	1	07/31/06	RC	08/01/06	OP6178	GDD1085

The QC reported here applies to the following samples:

Method: SW846 8151

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	Result	RL	MDL	Units	Q
94-75-7	2,4-D	ND	10	5.0	ug/l	
93-72-1	2,4,5-TP (Silvex)	ND	2.0	1.5	ug/l	

CAS No.	Surrogate Recoveries	Limits
19719-28-9	2,4-DCAA	45% 23-171%

111  
11

# Blank Spike Summary

Job Number: F42307  
Account: ALSE Accutest Laboratories Southeast, Inc.  
Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6178-BS	DD57594.D	1	07/31/06	RC	08/01/06	OP6178	GDD1085

The QC reported here applies to the following samples:

Method: SW846 8151

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
94-75-7	2,4-D	20	19.6	98	44-152
93-72-1	2,4,5-TP (Silvex)	4	3.4	85	41-142

CAS No.	Surrogate Recoveries	BSP	Limits
19719-28-9	2,4-DCAA	94%	23-171%

11.2  
11

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42307  
 Account: ALSE Accutest Laboratories Southeast, Inc.  
 Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6178-MS	DD57597.D	1	07/31/06	RC	08/01/06	OP6178	GDD1085
OP6178-MSD	DD57598.D	1	07/31/06	RC	08/01/06	OP6178	GDD1085
F42421-2A	DD57596.D	1	07/31/06	RC	07/28/06	OP6178	GDD1085

The QC reported here applies to the following samples:

Method: SW846 8151

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	F42421-2A ug/l	Spike Q ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
94-75-7	2,4-D	ND	20	5.2	26*	11.2	56	73*	28-144/25
93-72-1	2,4,5-TP (Silvex)	ND	4	3.6	90	3.2	80	12	25-137/24

CAS No.	Surrogate Recoveries	MS	MSD	F42421-2A	Limits
19719-28-9	2,4-DCAA	132%	113%	121%	23-171%

11.3  
**11**

LabLink Analytical Data Report  
Paradise Creek 116539

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261.6/96)\*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F42307-1A	2,4-D	94-75-7	SW846 8151	ND		mg/l	0.015	10	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	2,4,5-TP (Silvex)	93-72-1	SW846 8151	ND		mg/l	0.002	1	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	gamma-BHC (Lindane)	58-89-9	SW846 8081A	ND		mg/l	0.0005	0.4	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Chlordane	12789-03-6	SW846 8081A	ND		mg/l	0.005	0.03	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Endrin	72-20-8	SW846 8081A	ND		mg/l	0.001	0.02	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Heptachlor	76-44-8	SW846 8081A	ND		mg/l	0.0005	0.008	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Heptachlor epoxide	1024-57-3	SW846 8081A	ND		mg/l	0.0005	0.008	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Methoxychlor	72-43-5	SW846 8081A	ND		mg/l	0.001	10	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Toxaphene	8001-35-2	SW846 8081A	ND		mg/l	0.025	0.5	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Tetrachloro-m-xylene	877-09-8	SW846 8081A	69		%			1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	2,4-DCAA	19719-28-9	SW846 8151	105		%			1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Decachlorobiphenyl	2051-24-3	SW846 8081A	50		%			1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Arsenic (e)	7440-38-2	SW846 6010B	0.0056	U	mg/l	0.02	5	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Barium	7440-39-3	SW846 6010B	0.57	B	mg/l		1	100	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Cadmium	7440-43-9	SW846 6010B	0.026		mg/l	0.005		1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Chromium	7440-47-3	SW846 6010B	0.02		mg/l	0.01		5	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Lead	7439-92-1	SW846 6010B	0.3		mg/l	0.05		5	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Mercury	7439-97-6	SW846 7470A	0.001	U	mg/l	0.01	0.2	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Selenium (e)	7782-49-2	SW846 6010B	0.042	B	mg/l	0.1		1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Silver	7440-22-4	SW846 6010B	0.0009	U	mg/l	0.01		5	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	2-Methylphenol	95-48-7	SW846 8270C	ND		mg/l	0.05	200	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	3&4-Methylphenol		SW846 8270C	ND		mg/l	0.05	200	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Pentachlorophenol	87-86-5	SW846 8270C	ND		mg/l	0.25	100	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	2,4,5-Trichlorophenol	95-95-4	SW846 8270C	ND		mg/l	0.05	400	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	2,4,6-Trichlorophenol	88-06-2	SW846 8270C	ND		mg/l	0.05	2	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	1,4-Dichlorobenzene	106-46-7	SW846 8270C	ND		mg/l	0.05	7.5	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	2,4-Dinitrotoluene	121-14-2	SW846 8270C	ND		mg/l	0.05	0.13	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Hexachlorobenzene	118-74-1	SW846 8270C	ND		mg/l	0.05	0.13	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Hexachlorobutadiene	87-68-3	SW846 8270C	ND		mg/l	0.05	0.5	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Hexachloroethane	67-72-1	SW846 8270C	ND		mg/l	0.05	3	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Nitrobenzene	98-95-3	SW846 8270C	ND		mg/l	0.05	2	1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Pyridine	110-86-1	SW846 8270C	ND		mg/l	0.1		5	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	2-Fluorophenol	367-12-4	SW846 8270C	25		%			1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Phenol-d5	4165-62-2	SW846 8270C	15		%			1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	2,4,6-Tribromophenol	118-79-6	SW846 8270C	83		%			1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Nitrobenzene-d5	4165-60-0	SW846 8270C	76		%			1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	2-Fluorobiphenyl	321-60-8	SW846 8270C	75		%			1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Terphenyl-d14	1718-51-0	SW846 8270C	91		%			1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Benzene	71-43-2	SW846 8260B	ND		mg/l	0.01	0.5	10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Chlorobenzene	108-90-7	SW846 8260B	ND		mg/l	0.02	100	10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Chloroform	67-66-3	SW846 8260B	ND		mg/l	0.02	6	10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Carbon tetrachloride	56-23-5	SW846 8260B	ND		mg/l	0.02	0.5	10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	1,1-Dichloroethylene	75-35-4	SW846 8260B	ND		mg/l	0.02	0.7	10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	1,2-Dichloroethane	107-06-2	SW846 8260B	ND		mg/l	0.02	0.5	10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	p-Dichlorobenzene	106-46-7	SW846 8260B	ND		mg/l	0.02	7.5	10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Methyl ethyl ketone	78-93-3	SW846 8260B	ND		mg/l	0.1	200	10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Tetrachloroethylene	127-18-4	SW846 8260B	ND		mg/l	0.02	0.7	10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Trichloroethylene	79-01-6	SW846 8260B	ND		mg/l	0.02	0.5	10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Vinyl chloride	75-01-4	SW846 8260B	ND		mg/l	0.01	0.2	10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Dibromofluoromethane	1868-53-7	SW846 8260B	109		%			10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	Toluene-D8	2037-26-5	SW846 8260B	101		%			10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	4-Bromofluorobenzene	460-00-4	SW846 8260B	104		%			10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1A	1,2-Dichloroethane-D4	17060-07-0	SW846 8260B	110		%			10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	TPH (C10-C28)		SW846 8015 M	216		mg/kg	53		5	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	Aroclor 1016	12674-11-2	SW846 8082	ND		ug/kg	210		10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	Aroclor 1221	11104-28-2	SW846 8082	ND		ug/kg	210		10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	Aroclor 1232	11141-16-5	SW846 8082	ND		ug/kg	210		10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	Aroclor 1242	53469-21-9	SW846 8082	ND		ug/kg	210		10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	Aroclor 1248	12672-29-6	SW846 8082	ND		ug/kg	210		10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	Aroclor 1254	11097-69-1	SW846 8082	ND		ug/kg	210		10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	Aroclor 1260	11096-82-5	SW846 8082	ND		ug/kg	210		10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	Aroclor 1268	11100-14-4	SW846 8082	730		ug/kg	210		10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	Total PCBs		SW846 8082	730		ug/kg	430		10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	o-Terphenyl	84-15-1	SW846 8015 M	85		%	110		5	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	Tetrachloro-m-xylene	877-09-8	SW846 8082	86		%			10	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	Decachlorobiphenyl (a)	2051-24-3	SW846 8082	308	*	%			10	PC-TP-116539-GRID007	18-Jul-06	7:00

LabLink Analytical Data Report  
Paradise Creek 116539

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261.6/96)\*

Sample	Parameter	Gas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F42307-1	TPH-GRO (C6-C10)		SW846 8015	ND		mg/kg	8		1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	4-Bromofluorobenzene	460-00-4	SW846 8015	93		%			1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	aaa-Trifluorotoluene	98-08-8	SW846 8015	87		%			1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	Ignitability (Flashpoint) (b)		SW846 1010	>200	>	Deg. F			1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	Sulfide Reactivity		SW846 CHAP7	<50	<	mg/kg	50		1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	Cyanide Reactivity		SW846 CHAP7	<2.2	<	mg/kg	2.2		1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	Corrosivity as pH		SW846 CHAP7	7.3					1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-1	Solids, Percent		EPA 160.3 M	76		%			1	PC-TP-116539-GRID007	18-Jul-06	7:00
F42307-3A	2,4-D	94-75-7	SW846 8151	ND		mg/l	0.015	10	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	2,4,5-TP (Silvex)	93-72-1	SW846 8151	ND		mg/l	0.002	1	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	gamma-BHC (Lindane)	58-89-9	SW846 8018A	ND		mg/l	0.0005	0.4	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Chlordane	12789-03-6	SW846 8081A	ND		mg/l	0.005	0.03	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Endrin	72-20-8	SW846 8081A	ND		mg/l	0.001	0.02	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Heptachlor	76-44-8	SW846 8081A	ND		mg/l	0.0005	0.008	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Heptachlor epoxide	1024-57-3	SW846 8081A	ND		mg/l	0.0005	0.008	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Methoxychlor	72-43-5	SW846 8081A	ND		mg/l	0.001	10	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Toxaphene	8001-35-2	SW846 8081A	ND		mg/l	0.025	0.5	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Tetrachloro-m-xylene	877-09-8	SW846 8081A	84		%			1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	2,4-DCAA	19719-28-9	SW846 8151	99		%			1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Decachlorobiphenyl	2051-24-3	SW846 8081A	77		%			1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Arsenic (e)	7440-38-2	SW846 6010B	0.02		mg/l	0.02	5	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Barium	7440-39-3	SW846 6010B	0.99	B	mg/l	1	100	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Cadmium	7440-43-9	SW846 6010B	0.063		mg/l	0.005	1	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Chromium	7440-47-3	SW846 6010B	0.0064	B	mg/l	0.01	5	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Lead	7439-92-1	SW846 6010B	0.45		mg/l	0.05	5	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Mercury	7439-97-6	SW846 7470A	0.0012	B	mg/l	0.01	0.2	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Selenium (e)	7782-49-2	SW846 6010B	0.045	B	mg/l	0.1	1	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Silver	7440-22-4	SW846 6010B	0.0012	B	mg/l	0.01	5	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	2-Methylphenol	95-48-7	SW846 8270C	ND		mg/l	0.05	200	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	3&4-Methylphenol		SW846 8270C	ND		mg/l	0.05	200	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Pentachlorophenol	87-86-5	SW846 8270C	ND		mg/l	0.25	100	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	2,4,5-Trichlorophenol	95-95-4	SW846 8270C	ND		mg/l	0.05	400	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	2,4,6-Trichlorophenol	88-06-2	SW846 8270C	ND		mg/l	0.05	2	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	1,4-Dichlorobenzene	106-46-7	SW846 8270C	ND		mg/l	0.05	7.5	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	2,4-Dinitrotoluene	121-14-2	SW846 8270C	ND		mg/l	0.05	0.13	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Hexachlorobenzene	118-74-1	SW846 8270C	ND		mg/l	0.05	0.13	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Hexachlorobutadiene	87-68-3	SW846 8270C	ND		mg/l	0.05	0.5	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Hexachloroethane	67-72-1	SW846 8270C	ND		mg/l	0.05	3	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Nitrobenzene	98-95-3	SW846 8270C	ND		mg/l	0.05	2	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Pyridine	110-86-1	SW846 8270C	ND		mg/l	0.1	5	1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	2-Fluorophenol	367-12-4	SW846 8270C	22		%			1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Phenol-d5	4165-62-2	SW846 8270C	12		%			1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	2,4,6-Tribromophenol	118-79-6	SW846 8270C	74		%			1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Nitrobenzene-d5	4165-60-0	SW846 8270C	72		%			1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	2-Fluorobiphenyl	321-60-8	SW846 8270C	70		%			1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Terphenyl-d14	1718-51-0	SW846 8270C	82		%			1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Benzene	71-43-2	SW846 8260B	ND		mg/l	0.01	0.5	10	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Chlorobenzene	108-90-7	SW846 8260B	ND		mg/l	0.02	100	10	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Chloroform	67-66-3	SW846 8260B	ND		mg/l	0.02	6	10	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Carbon tetrachloride	56-23-5	SW846 8260B	ND		mg/l	0.02	0.5	10	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	1,1-Dichloroethylene	75-35-4	SW846 8260B	ND		mg/l	0.02	0.7	10	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	1,2-Dichloroethane	107-06-2	SW846 8260B	ND		mg/l	0.02	0.5	10	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	p-Dichlorobenzene	106-46-7	SW846 8260B	ND		mg/l	0.02	7.5	10	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Methyl ethyl ketone	78-93-3	SW846 8260B	ND		mg/l	0.1	200	10	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Tetrachloroethylene	127-18-4	SW846 8260B	ND		mg/l	0.02	0.7	10	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Trichloroethylene	79-01-6	SW846 8260B	ND		mg/l	0.02	0.5	10	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Vinyl chloride	75-01-4	SW846 8260B	ND		mg/l	0.01	0.2	10	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Dibromofluoromethane	1868-53-7	SW846 8260B	110		%			10	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	Toluene-D8	2037-26-5	SW846 8260B	102		%			10	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	4-Bromofluorobenzene	460-00-4	SW846 8260B	102		%			10	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3A	1,2-Dichloroethane-D4	17060-07-0	SW846 8260B	113		%			10	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	TPH (C10-C28)		SW846 8015 M	111		mg/kg	39		4	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	Aroclor 1016	12674-11-2	SW846 8082	ND		ug/kg	400		20	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	Aroclor 1221	11104-28-2	SW846 8082	ND		ug/kg	400		20	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	Aroclor 1232	11141-16-5	SW846 8082	ND		ug/kg	400		20	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	Aroclor 1242	53469-21-9	SW846 8082	ND		ug/kg	400		20	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	Aroclor 1248	12672-29-6	SW846 8082	ND		ug/kg	400		20	PC-TP-116539-GRID009	18-Jul-06	9:00

**LabLink Analytical Data Report**  
**Paradise Creek 116539**

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261.6/96)\*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F42307-3	Aroclor 1254	11097-69-1	SW846 8082	ND		ug/kg	400		20	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	Aroclor 1260 (c)	11096-82-5	SW846 8082	1110	J	ug/kg	400		20	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	Aroclor 1268 (c)	11100-14-4	SW846 8082	832	J	ug/kg	400		20	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	Total PCBs		SW846 8082	1940		ug/kg	810		20	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	Tetrachloro-m-xylene (a)	877-09-8	SW846 8082	IND	*	%			20	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	o-Terphenyl	84-15-1	SW846 8015 M	79		%	77		4	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	Decachlorobiphenyl (a)	2051-24-3	SW846 8082	IND	*	%			20	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	TPH-GRO (C6-C10)		SW846 8015	ND		mg/kg	7.4		1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	4-Bromofluorobenzene	460-00-4	SW846 8015	85		%			1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	aaa-Trifluorotoluene	98-08-8	SW846 8015	86		%			1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	Ignitability (Flashpoint) (b)		SW846 1010	>200	>	Deg. F			1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	Corrosivity as pH		SW846 CHAP7	7.7					1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	Cyanide Reactivity		SW846 CHAP7	<2.3	<	mg/kg	2.3		1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	Sulfide Reactivity		SW846 CHAP7	<50	<	mg/kg	50		1	PC-TP-116539-GRID009	18-Jul-06	9:00
F42307-3	Solids, Percent		EPA 160.3 M	82.1		%			1	PC-TP-116539-GRID009	18-Jul-06	9:00

(a) Outside control limits due to dilution.

(b) Not ignitable

(c) Estimated value due to the presence of multiple overlapping Aroclor patterns.

(d) Elevated reporting limits due to matrix interference.

(e) Elevated RL/MDL due to positive bias of Method Blank.

*Found 1 results exceeding regulatory limits.*

\*\* Indicates result outside regulatory limits.

\* Regulatory limits listed in this document have been obtained from the latest version of the regulations cited and are used for advisory purposes only.

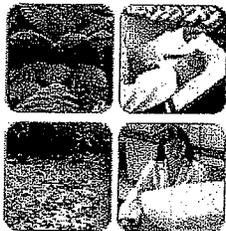
Accutest assumes no responsibility for errors in regulatory documents or changes to criteria detailed in later versions of the referenced regulation.

It is the responsibility of the user to verify these limits before using or reporting any data.



IT'S ALL IN THE CHEMISTRY

09/06/06



## Technical Report for

Field Support Service Inc

TO-17, MOD6: Paradise Creek

Accutest Job Number: F42948

Sampling Date: 08/14/06

Report to:

Field Support Service Inc

Ralph.buckles@fssi.asrcfederal.com

ATTN: Ralph Buckles

Total number of pages in report: 143



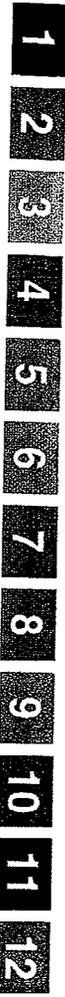
Test results contained within this data package meet the requirements of the National Environmental Laboratory Accreditation Conference and/or state specific certification programs as applicable.

  
Harry Behzadi, Ph.D.  
Laboratory Director

Certifications: FL (DOH E83510), NC (573), NJ (FL002), MA (FL946), IA (366), LA (03051), KS (E-10327), SC, AK  
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### Sample Summary

Field Support Service Inc

Job No: F42948

TO-17, MOD6: Paradise Creek

Sample Number	Collected		Received	Matrix		Client Sample ID
	Date	Time By		Code	Type	
F42948-1	08/14/06	09:10 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 009 A
F42948-1A	08/14/06	09:10 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 009 A
F42948-2	08/14/06	09:00 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 009 B
F42948-2A	08/14/06	09:00 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 009 B
F42948-3	08/14/06	08:50 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 009 C
F42948-3A	08/14/06	08:50 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 009 C
F42948-4	08/14/06	14:25 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 007 A
F42948-4A	08/14/06	14:25 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 007 A
F42948-5	08/14/06	14:10 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 007 B
F42948-5A	08/14/06	14:10 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 007 B
F42948-6	08/14/06	14:00 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 007 C
F42948-6A	08/14/06	14:00 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 007 C
F42948-7	08/14/06	10:35 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 001 A

Soil samples reported on a dry weight basis unless otherwise indicated on result page.

### Sample Summary

(continued)

Field Support Service Inc

Job No: F42948

TO-17, MOD6: Paradise Creek

Sample Number	Collected		Received	Matrix		Client Sample ID
	Date	Time By		Code	Type	
F42948-7A	08/14/06	10:35 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 001 A
F42948-8	08/14/06	10:25 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 001 B
F42948-8A	08/14/06	10:25 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 001 B
F42948-9	08/14/06	10:15 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 001 C
F42948-9A	08/14/06	10:15 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 001 C
F42948-10	08/14/06	09:50 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 002 A
F42948-10A	08/14/06	09:50 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 002 A
F42948-11	08/14/06	09:40 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 002 B
F42948-11A	08/14/06	09:40 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 002 B
F42948-12	08/14/06	09:30 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 002 C
F42948-12A	08/14/06	09:30 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 002 C
F42948-13	08/14/06	13:20 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 003 A
F42948-13A	08/14/06	13:20 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 003 A

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Soil samples reported on a dry weight basis unless otherwise indicated on result page.

Accutest Laboratories

1

**Sample Summary**  
(continued)

Field Support Service Inc

Job No: F42948

TO-17, MOD6: Paradise Creek

Sample Number	Collected Date	Time By	Received	Matrix Code	Type	Client Sample ID
F42948-14	08/14/06	13:35 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 003 B
F42948-14A	08/14/06	13:35 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 003 B
F42948-15	08/14/06	13:45 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 003 C
F42948-15A	08/14/06	13:45 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 003 C
F42948-16	08/14/06	13:35 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 003
F42948-16A	08/14/06	13:35 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 003
F42948-17	08/14/06	09:40 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 002
F42948-17A	08/14/06	09:40 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 002
F42948-18	08/14/06	10:25 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 001
F42948-18A	08/14/06	10:25 RB	08/16/06	SO	Soil	PC-TP 116539 GRID 001

Soil samples reported on a dry weight basis unless otherwise indicated on result page.



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## Sample Results

---

## Report of Analysis

---

**Report of Analysis**

2.1  
2

<b>Client Sample ID:</b>	PC-TP 116539 GRID 009 A	<b>Date Sampled:</b>	08/14/06
<b>Lab Sample ID:</b>	F42948-1	<b>Date Received:</b>	08/16/06
<b>Matrix:</b>	SO - Soil	<b>Percent Solids:</b>	74.3
<b>Method:</b>	SW846 8015 M SW846 3550B		
<b>Project:</b>	TO-17, MOD6: Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL12106.D	4	08/21/06	AA	08/18/06	OP17587	GLL451
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.2 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	172	45	27	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	82%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 009 A	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-1	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 74.3
<b>Project:</b> TO-17, MOD6: Paradise Creek	

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	74.3		%	1	08/17/06	JB	EPA 160.3 M
pH	8.1		su	1	08/21/06	LE	SW846 9045

RL = Reporting Limit

### Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 009 A	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-1A	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 74.3
<b>Project:</b> TO-17, MOD6: Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Lead	0.77	D008	5.0	0.050	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>1</sup>	SW846 3010A <sup>2</sup>

(1) Instrument QC Batch: MA5186

(2) Prep QC Batch: MP10163

---

RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

Report of Analysis

2.3  
2

Client Sample ID:	PC-TP 116539 GRID 009 B	Date Sampled:	08/14/06
Lab Sample ID:	F42948-2	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	73.3
Method:	SW846 8015 M SW846 3550B		
Project:	TO-17, MOD6: Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL12107.D	1	08/21/06	AA	08/18/06	OP17587	GLL451
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.7 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	35.9	11	6.7	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	76%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

2.3  
2

<b>Client Sample ID:</b> PC-TP 116539 GRID 009 B	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-2	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 73.3
<b>Project:</b> TO-17, MOD6: Paradise Creek	

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	73.3		%	1	08/17/06	JB	EPA 160.3 M
pH	8.1		su	1	08/21/06	LE	SW846 9045

RL = Reporting Limit

### Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 009 B	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-2A	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 73.3
<b>Project:</b> TO-17, MOD6: Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Lead	0.22	D008	5.0	0.050	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>1</sup>	SW846 3010A <sup>2</sup>

(1) Instrument QC Batch: MA5186  
(2) Prep QC Batch: MP10163

---

RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

**Report of Analysis**

<b>Client Sample ID:</b> PC-TP 116539 GRID 009 C	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-3	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 71.8
<b>Method:</b> SW846 8015 M SW846 3550B	
<b>Project:</b> TO-17, MOD6: Paradise Creek	

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL12076.D	1	08/18/06	VS	08/18/06	OP17587	GLL450
Run #2							

	Initial Weight	Final Volume
Run #1	30.4 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	63.8	11	6.9	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	67%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

2.5  
2

<b>Client Sample ID:</b> PC-TP 116539 GRID 009 C	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-3	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 71.8
<b>Project:</b> TO-17, MOD6: Paradise Creek	

**General Chemistry**

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	71.8		%	1	08/17/06	JB	EPA 160.3 M
pH	8.0		su	1	08/21/06	LE	SW846 9045

RL = Reporting Limit

### Report of Analysis

2.6  
2

<b>Client Sample ID:</b> PC-TP 116539 GRID 009 C	
<b>Lab Sample ID:</b> F42948-3A	<b>Date Sampled:</b> 08/14/06
<b>Matrix:</b> SO - Soil	<b>Date Received:</b> 08/16/06
	<b>Percent Solids:</b> 71.8
<b>Project:</b> TO-17, MOD6: Paradise Creek	

Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Lead	0.19	D008	5.0	0.050	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>1</sup>	SW846 3010A <sup>2</sup>

(1) Instrument QC Batch: MA5186

(2) Prep QC Batch: MP10163

---

RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

**Report of Analysis**

2.7  
2

<b>Client Sample ID:</b> PC-TP 116539 GRID 007 A	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-4	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 79.7
<b>Method:</b> SW846 8015 M SW846 3550B	
<b>Project:</b> TO-17, MOD6: Paradise Creek	

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL12079.D	20	08/18/06	VS	08/18/06	OP17587	GLL450
Run #2							

	Initial Weight	Final Volume
Run #1	30.8 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	1070	200	120	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	0% <sup>b</sup>		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.  
 (b) Outside control limits due to dilution.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

2.7  
2

Client Sample ID:	PC-TP 116539 GRID 007 A	Date Sampled:	08/14/06
Lab Sample ID:	F42948-4	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	79.7
Project:	TO-17, MOD6: Paradise Creek		

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	79.7		%	1	08/17/06	JB	EPA 160.3 M
pH	7.8		su	1	08/21/06	LE	SW846 9045

RL = Reporting Limit

### Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 007 A	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-4A	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 79.7
<b>Project:</b> TO-17, MOD6: Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Lead	0.41	D008	5.0	0.050	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>1</sup>	SW846 3010A <sup>2</sup>

(1) Instrument QC Batch: MA5186

(2) Prep QC Batch: MP10163

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RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

Report of Analysis

2.9  
2

Client Sample ID:	PC-TP 116539 GRID 007 B	Date Sampled:	08/14/06
Lab Sample ID:	F42948-5	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	67.6
Method:	SW846 8015 M SW846 3550B		
Project:	TO-17, MOD6: Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL12108.D	20	08/21/06	AA	08/18/06	OP17587	GLL451
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.1 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	938	250	150	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	0% <sup>b</sup>		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.  
 (b) Outside control limits due to dilution.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

2.9  
2

<b>Client Sample ID:</b> PC-TP 116539 GRID 007 B	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-5	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 67.6
<b>Project:</b> TO-17, MOD6: Paradise Creek	

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	67.6		%	1	08/17/06	JB	EPA 160.3 M
pH	7.7		su	1	08/21/06	LE	SW846 9045

RL = Reporting Limit

### Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 007 B	
<b>Lab Sample ID:</b> F42948-5A	<b>Date Sampled:</b> 08/14/06
<b>Matrix:</b> SO - Soil	<b>Date Received:</b> 08/16/06
	<b>Percent Solids:</b> 67.6
<b>Project:</b> TO-17, MOD6: Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Lead	4.8	D008	5.0	0.10	mg/l	2	08/22/06	08/23/06 RS	SW846 6010B <sup>1</sup>	SW846 3010A <sup>2</sup>

(1) Instrument QC Batch: MA5188

(2) Prep QC Batch: MP10163

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RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

**Report of Analysis**

2.11  
2

<b>Client Sample ID:</b> PC-TP 116539 GRID 007 C	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-6	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 74.8
<b>Method:</b> SW846 8015 M SW846 3550B	
<b>Project:</b> TO-17, MOD6: Paradise Creek	

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL12118.D	10	08/21/06	AA	08/19/06	OP17597	GLL451
Run #2							

	Initial Weight	Final Volume
Run #1	30.2 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	416	110	66	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	61%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

2.11  
2

<b>Client Sample ID:</b> PC-TP 116539 GRID 007 C	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-6	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 74.8
<b>Project:</b> TO-17, MOD6: Paradise Creek	

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	74.8		%	1	08/17/06	JB	EPA 160.3 M
pH	8.0		su	1	08/21/06	LE	SW846 9045

RL = Reporting Limit

### Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 007 C	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-6A	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 74.8
<b>Project:</b> TO-17, MOD6: Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Lead	0.40	D008	5.0	0.050	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>1</sup>	SW846 3010A <sup>2</sup>

(1) Instrument QC Batch: MA5186

(2) Prep QC Batch: MP10163

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RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

Report of Analysis

2.13  
2

Client Sample ID:	PC-TP 116539 GRID 001 A	Date Sampled:	08/14/06
Lab Sample ID:	F42948-7	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	76.0
Method:	SW846 8015 M SW846 3550B		
Project:	TO-17, MOD6: Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL12109.D	40	08/21/06	AA	08/18/06	OP17587	GLL451
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.6 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	1610	430	260	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	0% <sup>b</sup>		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.  
 (b) Outside control limits due to dilution.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Report of Analysis

2.13  
2

Client Sample ID:	PC-TP 116539 GRID 001 A	Date Sampled:	08/14/06
Lab Sample ID:	F42948-7	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	76.0
Project:	TO-17, MOD6: Paradise Creek		

### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	76		%	1	08/17/06	JB	EPA 160.3 M
pH	7.2		su	1	08/21/06	LE	SW846 9045

RL = Reporting Limit

### Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 001 A	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-7A	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 76.0
<b>Project:</b> TO-17, MOD6: Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Lead <sup>a</sup>	1.2	D008	5.0	0.50	mg/l	1	08/29/06	08/29/06 ATX	SW846 6010B <sup>1</sup>	SW846 3010A <sup>2</sup>

(1) Instrument QC Batch: T:MA2545

(2) Prep QC Batch: T:MP5162

(a) Analysis performed at Accutest Laboratories, Houston, TX.

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RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

**Report of Analysis**

<b>Client Sample ID:</b> PC-TP 116539 GRID 001 B	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-8	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 71.7
<b>Method:</b> SW846 8015 M SW846 3550B	
<b>Project:</b> TO-17, MOD6: Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL12110.D	4	08/21/06	AA	08/18/06	OP17587	GLL451
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.2 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	214	46	28	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	79%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 001 B	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-8	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 71.7
<b>Project:</b> TO-17, MOD6: Paradise Creek	

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	71.7		%	1	08/17/06	JB	EPA 160.3 M
pH	7.8		su	1	08/21/06	LE	SW846 9045

RL = Reporting Limit

**Report of Analysis**

<b>Client Sample ID:</b> PC-TP 116539 GRID 001 B	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-8A	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 71.7
<b>Project:</b> TO-17, MOD6: Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Lead <sup>a</sup>	<0.50	D008	5.0	0.50	mg/l	1	08/29/06	08/29/06 ATX	SW846 6010B <sup>1</sup>	SW846 3010A <sup>2</sup>

(1) Instrument QC Batch: T:MA2545

(2) Prep QC Batch: T:MP5162

(a) Analysis performed at Accutest Laboratories, Houston, TX.

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RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

**Report of Analysis**

<b>Client Sample ID:</b> PC-TP 116539 GRID 001 C	
<b>Lab Sample ID:</b> F42948-9	<b>Date Sampled:</b> 08/14/06
<b>Matrix:</b> SO - Soil	<b>Date Received:</b> 08/16/06
<b>Method:</b> SW846 8015 M SW846 3550B	<b>Percent Solids:</b> 84.5
<b>Project:</b> TO-17, MOD6: Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL12111.D	1	08/21/06	AA	08/18/06	OP17587	GLL451
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.4 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	28.2	9.7	5.8	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	80%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

2.17  
2

Client Sample ID:	PC-TP 116539 GRID 001 C	Date Sampled:	08/14/06
Lab Sample ID:	F42948-9	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	84.5
Project:	TO-17, MOD6: Paradise Creek		

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	84.5		%	1	08/17/06	JB	EPA 160.3 M
pH	7.9		su	1	08/21/06	LE	SW846 9045

RL = Reporting Limit

### Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 001 C	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-9A	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 84.5
<b>Project:</b> TO-17, MOD6: Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Lead <sup>a</sup>	<0.50	D008	5.0	0.50	mg/l	1	08/29/06	08/29/06 ATX	SW846 6010B <sup>1</sup>	SW846 3010A <sup>2</sup>

(1) Instrument QC Batch: T:MA2545

(2) Prep QC Batch: T:MP5162

(a) Analysis performed at Accutest Laboratories, Houston, TX.

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RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 002 A	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-10	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 70.3
<b>Method:</b> SW846 8015 M SW846 3550B	
<b>Project:</b> TO-17, MOD6: Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL12084.D	1	08/19/06	VS	08/18/06	OP17587	GLL450
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.7 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	54.3	12	7.0	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	74%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected    MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 002 A	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-10	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 70.3
<b>Project:</b> TO-17, MOD6: Paradise Creek	

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	70.3		%	1	08/17/06	JB	EPA 160.3 M
pH	7.8		su	1	08/21/06	LE	SW846 9045

RL = Reporting Limit

### Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 002 A	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-10A	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 70.3
<b>Project:</b> TO-17, MOD6: Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Lead <sup>a</sup>	<0.50	D008	5.0	0.50	mg/l	1	08/29/06	08/29/06 ATX	SW846 6010B <sup>1</sup>	SW846 3010A <sup>2</sup>

(1) Instrument QC Batch: T:MA2545

(2) Prep QC Batch: T:MP5162

(a) Analysis performed at Accutest Laboratories, Houston, TX.

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RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

**Report of Analysis**

<b>Client Sample ID:</b>	PC-TP 116539 GRID 002 B	<b>Date Sampled:</b>	08/14/06
<b>Lab Sample ID:</b>	F42948-11	<b>Date Received:</b>	08/16/06
<b>Matrix:</b>	SO - Soil	<b>Percent Solids:</b>	72.6
<b>Method:</b>	SW846 8015 M SW846 3550B		
<b>Project:</b>	TO-17, MOD6: Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL12085.D	10	08/19/06	VS	08/18/06	OP17587	GLL450
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.4 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	241	110	68	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	82%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 002 B	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-11	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 72.6
<b>Project:</b> TO-17, MOD6: Paradise Creek	

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	72.6		%	1	08/17/06	JB	EPA 160.3 M
pH	7.5		su	1	08/21/06	LE	SW846 9045

RL = Reporting Limit

### Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 002 B	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-11A	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 72.6
<b>Project:</b> TO-17, MOD6: Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Lead <sup>a</sup>	<0.50	D008	5.0	0.50	mg/l	1	08/29/06	08/29/06 ATX	SW846 6010B <sup>1</sup>	SW846 3010A <sup>2</sup>

(1) Instrument QC Batch: T:MA2545

(2) Prep QC Batch: T:MP5162

(a) Analysis performed at Accutest Laboratories, Houston, TX.

RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

### Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 002 C	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-12	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 85.7
<b>Method:</b> SW846 8015 M SW846 3550B	
<b>Project:</b> TO-17, MOD6: Paradise Creek	

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 a	LL12112.D	4	08/21/06	AA	08/18/06	OP17587	GLL451
Run #2							

	Initial Weight	Final Volume
Run #1	30.4 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	101	38	23	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	69%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 002 C	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-12	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 85.7
<b>Project:</b> TO-17, MOD6: Paradise Creek	

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	85.7		%	1	08/17/06	JB	EPA 160.3 M
pH	7.8		su	1	08/21/06	LE	SW846 9045

RL = Reporting Limit

### Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 002 C	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-12A	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 85.7
<b>Project:</b> TO-17, MOD6: Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Lead <sup>a</sup>	<0.50	D008	5.0	0.50	mg/l	1	08/29/06	08/29/06 ATX	SW846 6010B <sup>1</sup>	SW846 3010A <sup>2</sup>

(1) Instrument QC Batch: T:MA2545

(2) Prep QC Batch: T:MP5162

(a) Analysis performed at Accutest Laboratories, Houston, TX.

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RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

Report of Analysis

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Client Sample ID:	PC-TP 116539 GRID 003 A	Date Sampled:	08/14/06
Lab Sample ID:	F42948-13	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	87.8
Method:	SW846 8015 M SW846 3550B		
Project:	TO-17, MOD6: Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL12089.D	1	08/19/06	VS	08/18/06	OP17587	GLL450
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.2 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	50.1	9.4	5.7	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	78%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 003 A	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-13	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 87.8
<b>Project:</b> TO-17, MOD6: Paradise Creek	

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	87.8		%	1	08/17/06	JB	EPA 160.3 M
pH	7.7		su	1	08/21/06	LE	SW846 9045

RL = Reporting Limit

Accutest Laboratories

## Report of Analysis

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2

Client Sample ID:	PC-TP 116539 GRID 003 A	Date Sampled:	08/14/06
Lab Sample ID:	F42948-13A	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	87.8
Project:	TO-17, MOD6: Paradise Creek		

### Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Lead <sup>a</sup>	< 0.50	D008	5.0	0.50	mg/l	1	08/29/06	08/29/06 ATX	SW846 6010B <sup>1</sup>	SW846 3010A <sup>2</sup>

(1) Instrument QC Batch: T:MA2545

(2) Prep QC Batch: T:MP5162

(a) Analysis performed at Accutest Laboratories, Houston, TX.

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RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

**Report of Analysis**

<b>Client Sample ID:</b> PC-TP 116539 GRID 003 B	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-14	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 87.1
<b>Method:</b> SW846 8015 M SW846 3550B	
<b>Project:</b> TO-17, MOD6: Paradise Creek	

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL12090.D	4	08/19/06	VS	08/18/06	OP17587	GLL450
Run #2							

	Initial Weight	Final Volume
Run #1	30.7 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	97.0	37	22	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	80%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

2.27  
2

<b>Client Sample ID:</b> PC-TP 116539 GRID 003 B	
<b>Lab Sample ID:</b> F42948-14	<b>Date Sampled:</b> 08/14/06
<b>Matrix:</b> SO - Soil	<b>Date Received:</b> 08/16/06
	<b>Percent Solids:</b> 87.1
<b>Project:</b> TO-17, MOD6: Paradise Creek	

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	87.1		%	1	08/17/06	JB	EPA 160.3 M
pH	7.4		su	1	09/05/06	SJL	SW846 9045

RL = Reporting Limit

### Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 003 B	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-14A	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 87.1
<b>Project:</b> TO-17, MOD6: Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Lead <sup>a</sup>	<0.50	D008	5.0	0.50	mg/l	1	08/29/06	08/29/06 ATX	SW846 6010B <sup>1</sup>	SW846 3010A <sup>2</sup>

(1) Instrument QC Batch: T:MA2545

(2) Prep QC Batch: T:MP5162

(a) Analysis performed at Accutest Laboratories, Houston, TX.

RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

**Report of Analysis**

<b>Client Sample ID:</b> PC-TP 116539 GRID 003 C	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-15	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 88.9
<b>Method:</b> SW846 8015 M SW846 3550B	
<b>Project:</b> TO-17, MOD6: Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL12091.D	1	08/19/06	VS	08/18/06	OP17587	GLL450
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.5 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	29.7	9.2	5.5	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	78%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 003 C	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-15	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 88.9
<b>Project:</b> TO-17, MOD6: Paradise Creek	

### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	88.9		%	1	08/17/06	JB	EPA 160.3 M
pH	8.2		su	1	08/21/06	LE	SW846 9045

RL = Reporting Limit

### Report of Analysis

<b>Client Sample ID:</b> PC-TP 116539 GRID 003 C	<b>Date Sampled:</b> 08/14/06
<b>Lab Sample ID:</b> F42948-15A	<b>Date Received:</b> 08/16/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 88.9
<b>Project:</b> TO-17, MOD6: Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Lead <sup>a</sup>	<0.50	D008	5.0	0.50	mg/l	1	08/29/06	08/29/06 ATX	SW846 6010B <sup>1</sup>	SW846 3010A <sup>2</sup>

(1) Instrument QC Batch: T:MA2545

(2) Prep QC Batch: T:MP5162

(a) Analysis performed at Accutest Laboratories, Houston, TX.

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RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

Report of Analysis

Client Sample ID:	PC-TP 116539 GRID 003	Date Sampled:	08/14/06
Lab Sample ID:	F42948-16	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	89.6
Method:	SW846 8015 SW846 5030A		
Project:	TO-17, MOD6: Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	UV023487.D	1	08/21/06	MM	08/17/06 09:30	n/a	GUV1358
Run #2							

Run #	Initial Weight	Final Volume	Methanol Aliquot
Run #1	5.93 g	5.0 ml	100 ul
Run #2			

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	5.3	2.6	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
460-00-4	4-Bromofluorobenzene	101%		62-135%
98-08-8	aaa-Trifluorotoluene	104%		65-118%

(a) Sample was received in a bulk container but was not preserved within 48 hours of sampling.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Report of Analysis

Client Sample ID:	PC-TP 116539 GRID 003	Date Sampled:	08/14/06
Lab Sample ID:	F42948-16	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	89.6
Method:	SW846 8082 SW846 3550B		
Project:	TO-17, MOD6: Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	ST50795.D	1	08/21/06	NAF	08/18/06	OP17584	GST1460
Run #2							

Run #	Initial Weight	Final Volume
Run #1	32.1 g	10.0 ml
Run #2		

## PCB List

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	8.7	ug/kg	
11104-28-2	Aroclor 1221	ND	17	14	ug/kg	
11141-16-5	Aroclor 1232	ND	17	14	ug/kg	
53469-21-9	Aroclor 1242	ND	17	8.7	ug/kg	
12672-29-6	Aroclor 1248	ND	17	8.7	ug/kg	
11097-69-1	Aroclor 1254	ND	17	8.7	ug/kg	
11096-82-5	Aroclor 1260 <sup>b</sup>	25.0	17	8.7	ug/kg	J
11100-14-4	Aroclor 1268 <sup>b</sup>	16.8	17	8.7	ug/kg	J

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	66%		52-136%
2051-24-3	Decachlorobiphenyl	79%		49-148%

(a) All hits confirmed by dual column analysis.

(b) Estimated value due to the presence of multiple overlapping Aroclor patterns.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

2.31  
2

Client Sample ID:	PC-TP 116539 GRID 003	Date Sampled:	08/14/06
Lab Sample ID:	F42948-16	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	89.6
Method:	SW846 8015 M SW846 3550B		
Project:	TO-17, MOD6: Paradise Creek		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL12094.D	1	08/19/06	VS	08/18/06	OP17587	GLL450
Run #2							

	Initial Weight	Final Volume
Run #1	30.9 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	41.1	9.0	5.4	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	62%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

2.32  
2

Client Sample ID:	PC-TP 116539 GRID 003	Date Sampled:	08/14/06
Lab Sample ID:	F42948-16A	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	89.6
Method:	SW846 8260B SW846 1311		
Project:	TO-17, MOD6: Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	M0014605.D	10	08/22/06	CS	08/21/06	OP17610	VM605
Run #2							

Run #	Purge Volume
Run #1	5.0 ml
Run #2	

VOA TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
71-43-2	Benzene	ND	D018	0.50	0.010	0.0050	mg/l	
108-90-7	Chlorobenzene	ND	D021	100	0.020	0.0050	mg/l	
67-66-3	Chloroform	ND	D022	6.0	0.020	0.0050	mg/l	
56-23-5	Carbon tetrachloride	ND	D019	0.50	0.020	0.0050	mg/l	
75-35-4	1,1-Dichloroethylene	ND	D029	0.70	0.020	0.0050	mg/l	
107-06-2	1,2-Dichloroethane	ND	D028	0.50	0.020	0.0050	mg/l	
106-46-7	p-Dichlorobenzene	ND	D027	7.5	0.020	0.0050	mg/l	
78-93-3	Methyl ethyl ketone	ND	D035	200	0.10	0.025	mg/l	
127-18-4	Tetrachloroethylene	ND	D039	0.70	0.020	0.0050	mg/l	
79-01-6	Trichloroethylene	ND	D040	0.50	0.020	0.0050	mg/l	
75-01-4	Vinyl chloride	ND	D043	0.20	0.010	0.0050	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	107%		86-115%
2037-26-5	Toluene-D8	97%		86-112%
460-00-4	4-Bromofluorobenzene	100%		83-119%
17060-07-0	1,2-Dichloroethane-D4	110%		73-126%

ND = Not detected      MDL - Method Detection Limit      J = Indicates an estimated value  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates analyte found in associated method blank  
E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

Report of Analysis

Client Sample ID:	PC-TP 116539 GRID 003	Date Sampled:	08/14/06
Lab Sample ID:	F42948-16A	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	89.6
Method:	SW846 8270C SW846 3510C		
Project:	TO-17, MOD6: Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	R04542.D	1	08/22/06	NJ	08/21/06	OP17599	SR215
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	1.0 ml
Run #2		

ABN TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	D023	200	0.050	0.020	mg/l	
	3&4-Methylphenol	ND	D024	200	0.050	0.020	mg/l	
87-86-5	Pentachlorophenol	ND	D037	100	0.25	0.10	mg/l	
95-95-4	2,4,5-Trichlorophenol	ND	D041	400	0.050	0.020	mg/l	
88-06-2	2,4,6-Trichlorophenol	ND	D042	2.0	0.050	0.020	mg/l	
106-46-7	1,4-Dichlorobenzene	ND	D027	7.5	0.050	0.010	mg/l	
121-14-2	2,4-Dinitrotoluene	ND	D030	0.13	0.050	0.020	mg/l	
118-74-1	Hexachlorobenzene	ND	D032	0.13	0.050	0.010	mg/l	
87-68-3	Hexachlorobutadiene	ND	D033	0.50	0.050	0.020	mg/l	
67-72-1	Hexachloroethane	ND	D034	3.0	0.050	0.020	mg/l	
98-95-3	Nitrobenzene	ND	D036	2.0	0.050	0.010	mg/l	
110-86-1	Pyridine	ND	D038	5.0	0.10	0.030	mg/l	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits				
367-12-4	2-Fluorophenol	42%		19-90%				
4165-62-2	Phenol-d5	25%		10-68%				
118-79-6	2,4,6-Tribromophenol	80%		36-137%				
4165-60-0	Nitrobenzene-d5	77%		49-119%				
321-60-8	2-Fluorobiphenyl	74%		45-118%				
1718-51-0	Terphenyl-d14	78%		46-135%				

ND = Not detected      MDL - Method Detection Limit      J = Indicates an estimated value  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

**Report of Analysis**

Client Sample ID:	PC-TP 116539 GRID 003	Date Sampled:	08/14/06
Lab Sample ID:	F42948-16A	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	89.6
Method:	SW846 8081A SW846 3510C		
Project:	TO-17, MOD6: Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	KK14085.D	1	08/21/06	AA	08/21/06	OP17600	GKK534
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

**Pesticide TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	D013	0.40	0.00050	0.00020	mg/l	
12789-03-6	Chlordane	ND	D020	0.030	0.0050	0.0025	mg/l	
72-20-8	Endrin	ND	D012	0.020	0.0010	0.00040	mg/l	
76-44-8	Heptachlor	ND	D031	0.0080	0.00050	0.00020	mg/l	
1024-57-3	Heptachlor epoxide	ND	D031	0.0080	0.00050	0.00020	mg/l	
72-43-5	Methoxychlor	ND	D014	10	0.0010	0.00040	mg/l	
8001-35-2	Toxaphene	ND	D015	0.50	0.025	0.015	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	105%		60-138%
2051-24-3	Decachlorobiphenyl	106%		31-148%

ND = Not detected      MDL - Method Detection Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)  
E = Indicates value exceeds calibration range

J = Indicates an estimated value  
B = Indicates analyte found in associated method blank  
N = Indicates presumptive evidence of a compound

Report of Analysis

2.32  
2

Client Sample ID:	PC-TP 116539 GRID 003	Date Sampled:	08/14/06
Lab Sample ID:	F42948-16A	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	89.6
Method:	SW846 8151 SW846 3510C		
Project:	TO-17, MOD6: Paradise Creek		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	DD57971.D	1	08/23/06	ATX	08/22/06	T:OP6273	T:GDD1099
Run #2							

	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

Herbicide TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
94-75-7	2,4-D	ND	D016	10	0.015	0.011	mg/l	
93-72-1	2,4,5-TP (Silvex)	ND	D017	1.0	0.0020	0.00060	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
19719-28-9	2,4-DCAA	124%		23-171%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

ND = Not detected  
MCL = Maximum Contamination Level (40 CFR 261 6/96)  
E = Indicates value exceeds calibration range

MDL - Method Detection Limit  
J = Indicates an estimated value  
B = Indicates analyte found in associated method blank  
N = Indicates presumptive evidence of a compound

Report of Analysis

2.32  
2

Client Sample ID:	PC-TP 116539 GRID 003	Date Sampled:	08/14/06
Lab Sample ID:	F42948-16A	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	89.6
Project:	TO-17, MOD6: Paradise Creek		

Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Arsenic	0.055	D004	5.0	0.010	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>
Barium	<1.0	D005	100	1.0	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>
Cadmium	0.13	D006	1.0	0.0050	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>
Chromium	0.035	D007	5.0	0.010	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>
Lead	1.8	D008	5.0	0.050	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>
Mercury	<0.010	D009	0.20	0.010	mg/l	1	08/22/06	08/22/06 MS	SW846 7470A <sup>1</sup>	SW846 7470A <sup>3</sup>
Selenium	<0.050	D010	1.0	0.050	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>
Silver	<0.010	D011	5.0	0.010	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>

- (1) Instrument QC Batch: MA5185
- (2) Instrument QC Batch: MA5186
- (3) Prep QC Batch: MP10162
- (4) Prep QC Batch: MP10163

RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

## Report of Analysis

Client Sample ID:	PC-TP 116539 GRID 003	Date Sampled:	08/14/06
Lab Sample ID:	F42948-16A	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	89.6
Project:	TO-17, MOD6: Paradise Creek		

### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Corrosivity as pH	7.2			1	08/18/06	CP	SW846 CHAP7
Cyanide Reactivity	< 1.7	1.7	mg/kg	1	08/23/06	SJL	SW846 CHAP7
Ignitability (Flashpoint) <sup>a</sup>	> 200		Deg. F	1	08/18/06	CP	SW846 1010
Sulfide Reactivity	< 50	50	mg/kg	1	08/18/06	LE	SW846 CHAP7

(a) Not ignitable

RL = Reporting Limit

**Report of Analysis**

2.33  
2

Client Sample ID:	PC-TP 116539 GRID 002	Date Sampled:	08/14/06
Lab Sample ID:	F42948-17	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	86.4
Method:	SW846 8015 SW846 5030A		
Project:	TO-17, MOD6: Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	UV023488.D	1	08/21/06	MM	08/17/06 09:40	n/a	GUV1358
Run #2							

Run #	Initial Weight	Final Volume	Methanol Aliquot
Run #1	5.97 g	5.0 ml	100 ul
Run #2			

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	5.6	2.8	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
460-00-4	4-Bromofluorobenzene	108%		62-135%
98-08-8	aaa-Trifluorotoluene	106%		65-118%

(a) Sample was received in a bulk container but was not preserved within 48 hours of sampling.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

Client Sample ID:	PC-TP 116539 GRID 002	Date Sampled:	08/14/06
Lab Sample ID:	F42948-17	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	86.4
Method:	SW846 8082 SW846 3550B		
Project:	TO-17, MOD6: Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	ST50796.D	10	08/21/06	NAF	08/18/06	OP17584	GST1460
Run #2							

Run #	Initial Weight	Final Volume
Run #1	31.8 g	10.0 ml
Run #2		

PCB List

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	180	91	ug/kg	
11104-28-2	Aroclor 1221	ND	180	150	ug/kg	
11141-16-5	Aroclor 1232	ND	180	150	ug/kg	
53469-21-9	Aroclor 1242	ND	180	91	ug/kg	
12672-29-6	Aroclor 1248	ND	180	91	ug/kg	
11097-69-1	Aroclor 1254	ND	180	91	ug/kg	
11096-82-5	Aroclor 1260 <sup>b</sup>	188	180	91	ug/kg	J
11100-14-4	Aroclor 1268 <sup>b</sup>	119	180	91	ug/kg	J

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	75%		52-136%
2051-24-3	Decachlorobiphenyl	198% <sup>c</sup>		49-148%

- (a) All hits confirmed by dual column analysis. Dilution required due to matrix interference.
- (b) Estimated value due to the presence of multiple overlapping Aroclor patterns.
- (c) Outside control limits due to matrix interference.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

2.33  
2

Client Sample ID:	PC-TP 116539 GRID 002	Date Sampled:	08/14/06
Lab Sample ID:	F42948-17	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	86.4
Method:	SW846 8015 M SW846 3550B		
Project:	TO-17, MOD6: Paradise Creek		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL12095.D	1	08/19/06	VS	08/18/06	OP17587	GLL450
Run #2							

	Initial Weight	Final Volume
Run #1	30.2 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	20.3	9.6	5.7	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	76%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Report of Analysis

Client Sample ID:	PC-TP 116539 GRID 002		
Lab Sample ID:	F42948-17A	Date Sampled:	08/14/06
Matrix:	SO - Soil	Date Received:	08/16/06
Method:	SW846 8260B SW846 1311	Percent Solids:	86.4
Project:	TO-17, MOD6: Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	M0014604.D	10	08/22/06	CS	08/21/06	OP17610	VM605
Run #2							

Run #	Purge Volume
Run #1	5.0 ml
Run #2	

## VOA TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
71-43-2	Benzene	ND	D018	0.50	0.010	0.0050	mg/l	
108-90-7	Chlorobenzene	ND	D021	100	0.020	0.0050	mg/l	
67-66-3	Chloroform	ND	D022	6.0	0.020	0.0050	mg/l	
56-23-5	Carbon tetrachloride	ND	D019	0.50	0.020	0.0050	mg/l	
75-35-4	1,1-Dichloroethylene	ND	D029	0.70	0.020	0.0050	mg/l	
107-06-2	1,2-Dichloroethane	ND	D028	0.50	0.020	0.0050	mg/l	
106-46-7	p-Dichlorobenzene	ND	D027	7.5	0.020	0.0050	mg/l	
78-93-3	Methyl ethyl ketone	ND	D035	200	0.10	0.025	mg/l	
127-18-4	Tetrachloroethylene	ND	D039	0.70	0.020	0.0050	mg/l	
79-01-6	Trichloroethylene	ND	D040	0.50	0.020	0.0050	mg/l	
75-01-4	Vinyl chloride	ND	D043	0.20	0.010	0.0050	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	107%		86-115%
2037-26-5	Toluene-D8	96%		86-112%
460-00-4	4-Bromofluorobenzene	102%		83-119%
17060-07-0	1,2-Dichloroethane-D4	109%		73-126%

ND = Not detected    MDL - Method Detection Limit  
MCL = Maximum Contamination Level (40 CFR 261.6/96)  
E = Indicates value exceeds calibration range

J = Indicates an estimated value  
B = Indicates analyte found in associated method blank  
N = Indicates presumptive evidence of a compound

### Report of Analysis

Client Sample ID:	PC-TP 116539 GRID 002	Date Sampled:	08/14/06
Lab Sample ID:	F42948-17A	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	86.4
Method:	SW846 8270C SW846 3510C		
Project:	TO-17, MOD6: Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	R04544.D	1	08/22/06	NJ	08/21/06	OP17599	SR215
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	1.0 ml
Run #2		

**ABN TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	D023	200	0.050	0.020	mg/l	
	3&4-Methylphenol	ND	D024	200	0.050	0.020	mg/l	
87-86-5	Pentachlorophenol	ND	D037	100	0.25	0.10	mg/l	
95-95-4	2,4,5-Trichlorophenol	ND	D041	400	0.050	0.020	mg/l	
88-06-2	2,4,6-Trichlorophenol	ND	D042	2.0	0.050	0.020	mg/l	
106-46-7	1,4-Dichlorobenzene	ND	D027	7.5	0.050	0.010	mg/l	
121-14-2	2,4-Dinitrotoluene	ND	D030	0.13	0.050	0.020	mg/l	
118-74-1	Hexachlorobenzene	ND	D032	0.13	0.050	0.010	mg/l	
87-68-3	Hexachlorobutadiene	ND	D033	0.50	0.050	0.020	mg/l	
67-72-1	Hexachloroethane	ND	D034	3.0	0.050	0.020	mg/l	
98-95-3	Nitrobenzene	ND	D036	2.0	0.050	0.010	mg/l	
110-86-1	Pyridine	ND	D038	5.0	0.10	0.030	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
367-12-4	2-Fluorophenol	33%		19-90%
4165-62-2	Phenol-d5	19%		10-68%
118-79-6	2,4,6-Tribromophenol	75%		36-137%
4165-60-0	Nitrobenzene-d5	72%		49-119%
321-60-8	2-Fluorobiphenyl	71%		45-118%
1718-51-0	Terphenyl-d14	73%		46-135%

ND = Not detected  
MCL = Maximum Contamination Level (40 CFR 261 6/96)  
E = Indicates value exceeds calibration range

MDL - Method Detection Limit  
J = Indicates an estimated value  
B = Indicates analyte found in associated method blank  
N = Indicates presumptive evidence of a compound

Report of Analysis

2.34  
2

Client Sample ID:	PC-TP 116539 GRID 002	Date Sampled:	08/14/06
Lab Sample ID:	F42948-17A	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	86.4
Method:	SW846 8081A SW846 3510C		
Project:	TO-17, MOD6: Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	KK14087.D	1	08/21/06	AA	08/21/06	OP17600	GKK534
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

Pesticide TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	D013	0.40	0.00050	0.00020	mg/l	
12789-03-6	Chlordane	ND	D020	0.030	0.0050	0.0025	mg/l	
72-20-8	Endrin	ND	D012	0.020	0.0010	0.00040	mg/l	
76-44-8	Heptachlor	ND	D031	0.0080	0.00050	0.00020	mg/l	
1024-57-3	Heptachlor epoxide	ND	D031	0.0080	0.00050	0.00020	mg/l	
72-43-5	Methoxychlor	ND	D014	10	0.0010	0.00040	mg/l	
8001-35-2	Toxaphene	ND	D015	0.50	0.025	0.015	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	109%		60-138%
2051-24-3	Decachlorobiphenyl	106%		31-148%

ND = Not detected      MDL - Method Detection Limit      J = Indicates an estimated value  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates analyte found in associated method blank  
E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

Report of Analysis

2.34  
2

Client Sample ID:	PC-TP 116539 GRID 002	Date Sampled:	08/14/06
Lab Sample ID:	F42948-17A	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	86.4
Method:	SW846 8151 SW846 3510C		
Project:	TO-17, MOD6: Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	DD57972.D	1	08/23/06	ATX	08/22/06	T:OP6273	T:GDD1099
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

Herbicide TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
94-75-7	2,4-D	ND	D016	10	0.015	0.011	mg/l	
93-72-1	2,4,5-TP (Silvex)	ND	D017	1.0	0.0020	0.00060	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
19719-28-9	2,4-DCAA	122%		23-171%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

ND = Not detected      MDL - Method Detection Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)  
E = Indicates value exceeds calibration range

J = Indicates an estimated value  
B = Indicates analyte found in associated method blank  
N = Indicates presumptive evidence of a compound

Report of Analysis

2.34  
2

Client Sample ID:	PC-TP 116539 GRID 002	Date Sampled:	08/14/06
Lab Sample ID:	F42948-17A	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	86.4
Project:	TO-17, MOD6: Paradise Creek		

Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Arsenic	<0.010	D004	5.0	0.010	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>
Barium	<1.0	D005	100	1.0	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>
Cadmium	0.028	D006	1.0	0.0050	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>
Chromium	<0.010	D007	5.0	0.010	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>
Lead	0.30	D008	5.0	0.050	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>
Mercury	<0.010	D009	0.20	0.010	mg/l	1	08/22/06	08/22/06 MS	SW846 7470A <sup>1</sup>	SW846 7470A <sup>3</sup>
Selenium	<0.050	D010	1.0	0.050	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>
Silver	<0.010	D011	5.0	0.010	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>

- (1) Instrument QC Batch: MA5185
- (2) Instrument QC Batch: MA5186
- (3) Prep QC Batch: MP10162
- (4) Prep QC Batch: MP10163

RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

### Report of Analysis

Client Sample ID:	PC-TP 116539 GRID 002	Date Sampled:	08/14/06
Lab Sample ID:	F42948-17A	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	86.4
Project:	TO-17, MOD6: Paradise Creek		

**General Chemistry**

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Corrosivity as pH	7.7			1	08/18/06	CP	SW846 CHAP7
Cyanide Reactivity	<1.7	1.7	mg/kg	1	08/23/06	SJL	SW846 CHAP7
Ignitability (Flashpoint) <sup>a</sup>	>200		Deg. F	1	08/18/06	CP	SW846 1010
Sulfide Reactivity	<50	50	mg/kg	1	08/18/06	LE	SW846 CHAP7

(a) Not ignitable

RL = Reporting Limit

### Report of Analysis

<b>Client Sample ID:</b>	PC-TP 116539 GRID 001	<b>Date Sampled:</b>	08/14/06
<b>Lab Sample ID:</b>	F42948-18	<b>Date Received:</b>	08/16/06
<b>Matrix:</b>	SO - Soil	<b>Percent Solids:</b>	78.1
<b>Method:</b>	SW846 8015 SW846 5030A		
<b>Project:</b>	TO-17, MOD6: Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	UV023489.D	1	08/21/06	MM	08/17/06 09:40	n/a	GUV1358
Run #2							

Run #	Initial Weight	Final Volume	Methanol Aliquot
Run #1	5.16 g	5.0 ml	100 ul
Run #2			

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	3.97	7.6	3.8	mg/kg	J

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
460-00-4	4-Bromofluorobenzene	110%		62-135%
98-08-8	aaa-Trifluorotoluene	97%		65-118%

(a) Sample was received in a bulk container but was not preserved within 48 hours of sampling.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Report of Analysis

Client Sample ID:	PC-TP 116539 GRID 001	
Lab Sample ID:	F42948-18	Date Sampled: 08/14/06
Matrix:	SO - Soil	Date Received: 08/16/06
Method:	SW846 8082 SW846 3550B	Percent Solids: 78.1
Project:	TO-17, MOD6: Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	ST50797.D	10	08/21/06	NAF	08/18/06	OP17584	GST1460
Run #2							

Run #	Initial Weight	Final Volume
Run #1	31.9 g	10.0 ml
Run #2		

## PCB List

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	200	100	ug/kg	
11104-28-2	Aroclor 1221	ND	200	160	ug/kg	
11141-16-5	Aroclor 1232	ND	200	160	ug/kg	
53469-21-9	Aroclor 1242	ND	200	100	ug/kg	
12672-29-6	Aroclor 1248	ND	200	100	ug/kg	
11097-69-1	Aroclor 1254	ND	200	100	ug/kg	
11096-82-5	Aroclor 1260 <sup>b</sup>	366	200	100	ug/kg	J
11100-14-4	Aroclor 1268 <sup>b</sup>	169	200	100	ug/kg	J

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	82%		52-136%
2051-24-3	Decachlorobiphenyl	173% <sup>c</sup>		49-148%

- (a) All hits confirmed by dual column analysis. Dilution required due to matrix interference.  
 (b) Estimated value due to the presence of multiple overlapping Aroclor patterns.  
 (c) Outside control limits due to matrix interference.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

2.35  
2

Client Sample ID:	PC-TP 116539 GRID 001	
Lab Sample ID:	F42948-18	Date Sampled: 08/14/06
Matrix:	SO - Soil	Date Received: 08/16/06
Method:	SW846 8015 M SW846 3550B	Percent Solids: 78.1
Project:	TO-17, MOD6: Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL12134.D	4	08/21/06	AA	08/18/06	OP17587	GLL451
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.3 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	152	42	25	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	65%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

2.36  
2

Client Sample ID: PC-TP 116539 GRID 001	Date Sampled: 08/14/06
Lab Sample ID: F42948-18A	Date Received: 08/16/06
Matrix: SO - Soil	Percent Solids: 78.1
Method: SW846 8260B SW846 1311	
Project: TO-17, MOD6: Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	M0014606.D	10	08/22/06	CS	08/21/06	OP17610	VM605
Run #2							

Run #	Purge Volume
Run #1	5.0 ml
Run #2	

VOA TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
71-43-2	Benzene	ND	D018	0.50	0.010	0.0050	mg/l	
108-90-7	Chlorobenzene	ND	D021	100	0.020	0.0050	mg/l	
67-66-3	Chloroform	ND	D022	6.0	0.020	0.0050	mg/l	
56-23-5	Carbon tetrachloride	ND	D019	0.50	0.020	0.0050	mg/l	
75-35-4	1,1-Dichloroethylene	ND	D029	0.70	0.020	0.0050	mg/l	
107-06-2	1,2-Dichloroethane	ND	D028	0.50	0.020	0.0050	mg/l	
106-46-7	p-Dichlorobenzene	ND	D027	7.5	0.020	0.0050	mg/l	
78-93-3	Methyl ethyl ketone	ND	D035	200	0.10	0.025	mg/l	
127-18-4	Tetrachloroethylene	ND	D039	0.70	0.020	0.0050	mg/l	
79-01-6	Trichloroethylene	ND	D040	0.50	0.020	0.0050	mg/l	
75-01-4	Vinyl chloride	ND	D043	0.20	0.010	0.0050	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	107%		86-115%
2037-26-5	Toluene-D8	96%		86-112%
460-00-4	4-Bromofluorobenzene	101%		83-119%
17060-07-0	1,2-Dichloroethane-D4	109%		73-126%

ND = Not detected  
MCL = Maximum Contamination Level (40 CFR 261 6/96)  
E = Indicates value exceeds calibration range

MDL - Method Detection Limit  
J = Indicates an estimated value  
B = Indicates analyte found in associated method blank  
N = Indicates presumptive evidence of a compound

Report of Analysis

Client Sample ID:	PC-TP 116539 GRID 001	Date Sampled:	08/14/06
Lab Sample ID:	F42948-18A	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	78.1
Method:	SW846 8270C SW846 3510C		
Project:	TO-17, MOD6: Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	R04545.D	1	08/22/06	NJ	08/21/06	OP17599	SR215
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	1.0 ml
Run #2		

ABN TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	D023	200	0.050	0.020	mg/l	
	3&4-Methylphenol	ND	D024	200	0.050	0.020	mg/l	
87-86-5	Pentachlorophenol	ND	D037	100	0.25	0.10	mg/l	
95-95-4	2,4,5-Trichlorophenol	ND	D041	400	0.050	0.020	mg/l	
88-06-2	2,4,6-Trichlorophenol	ND	D042	2.0	0.050	0.020	mg/l	
106-46-7	1,4-Dichlorobenzene	ND	D027	7.5	0.050	0.010	mg/l	
121-14-2	2,4-Dinitrotoluene	ND	D030	0.13	0.050	0.020	mg/l	
118-74-1	Hexachlorobenzene	ND	D032	0.13	0.050	0.010	mg/l	
87-68-3	Hexachlorobutadiene	ND	D033	0.50	0.050	0.020	mg/l	
67-72-1	Hexachloroethane	ND	D034	3.0	0.050	0.020	mg/l	
98-95-3	Nitrobenzene	ND	D036	2.0	0.050	0.010	mg/l	
110-86-1	Pyridine	ND	D038	5.0	0.10	0.030	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
367-12-4	2-Fluorophenol	41%		19-90%
4165-62-2	Phenol-d5	25%		10-68%
118-79-6	2,4,6-Tribromophenol	85%		36-137%
4165-60-0	Nitrobenzene-d5	79%		49-119%
321-60-8	2-Fluorobiphenyl	80%		45-118%
1718-51-0	Terphenyl-d14	81%		46-135%

ND = Not detected MDL - Method Detection Limit  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

Client Sample ID:	PC-TP 116539 GRID 001		Date Sampled:	08/14/06
Lab Sample ID:	F42948-18A		Date Received:	08/16/06
Matrix:	SO - Soil		Percent Solids:	78.1
Method:	SW846 8081A SW846 3510C			
Project:	TO-17, MOD6: Paradise Creek			

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	KK14090.D	1	08/21/06	AA	08/21/06	OP17600	GKK534
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

Pesticide TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	D013	0.40	0.00050	0.00020	mg/l	
12789-03-6	Chlordane	ND	D020	0.030	0.0050	0.0025	mg/l	
72-20-8	Endrin	ND	D012	0.020	0.0010	0.00040	mg/l	
76-44-8	Heptachlor	ND	D031	0.0080	0.00050	0.00020	mg/l	
1024-57-3	Heptachlor epoxide	ND	D031	0.0080	0.00050	0.00020	mg/l	
72-43-5	Methoxychlor	ND	D014	10	0.0010	0.00040	mg/l	
8001-35-2	Toxaphene	ND	D015	0.50	0.025	0.015	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	99%		60-138%
2051-24-3	Decachlorobiphenyl	71%		31-148%

ND = Not detected MDL - Method Detection Limit  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

2.36  
2

Client Sample ID:	PC-TP 116539 GRID 001	
Lab Sample ID:	F42948-18A	Date Sampled: 08/14/06
Matrix:	SO - Soil	Date Received: 08/16/06
Method:	SW846 8151 SW846 3510C	Percent Solids: 78.1
Project:	TO-17, MOD6: Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	DD57973.D	1	08/23/06	ATX	08/22/06	T:OP6273	T:GDD1099
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

Herbicide TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
94-75-7	2,4-D	ND	D016	10	0.015	0.011	mg/l	
93-72-1	2,4,5-TP (Silvex)	ND	D017	1.0	0.0020	0.00060	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
19719-28-9	2,4-DCAA	130%		23-171%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

ND = Not detected      MDL - Method Detection Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)  
E = Indicates value exceeds calibration range

J = Indicates an estimated value  
B = Indicates analyte found in associated method blank  
N = Indicates presumptive evidence of a compound

Report of Analysis

2.36  
2

Client Sample ID: PC-TP 116539 GRID 001	Date Sampled: 08/14/06
Lab Sample ID: F42948-18A	Date Received: 08/16/06
Matrix: SO - Soil	Percent Solids: 78.1
Project: TO-17, MOD6: Paradise Creek	

Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Arsenic	<0.010	D004	5.0	0.010	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>
Barium	<1.0	D005	100	1.0	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>
Cadmium	0.035	D006	1.0	0.0050	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>
Chromium	<0.010	D007	5.0	0.010	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>
Lead	0.54	D008	5.0	0.050	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>
Mercury	<0.010	D009	0.20	0.010	mg/l	1	08/22/06	08/22/06 MS	SW846 7470A <sup>1</sup>	SW846 7470A <sup>3</sup>
Selenium	<0.050	D010	1.0	0.050	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>
Silver	<0.010	D011	5.0	0.010	mg/l	1	08/22/06	08/22/06 RS	SW846 6010B <sup>2</sup>	SW846 3010A <sup>4</sup>

- (1) Instrument QC Batch: MA5185
- (2) Instrument QC Batch: MA5186
- (3) Prep QC Batch: MP10162
- (4) Prep QC Batch: MP10163

RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

### Report of Analysis

Client Sample ID:	PC-TP 116539 GRID 001	Date Sampled:	08/14/06
Lab Sample ID:	F42948-18A	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	78.1
Project:	TO-17, MOD6: Paradise Creek		

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Corrosivity as pH	7.6			1	08/18/06	CP	SW846 CHAP7
Cyanide Reactivity	< 1.9	1.9	mg/kg	1	08/23/06	SJL	SW846 CHAP7
Ignitability (Flashpoint) <sup>a</sup>	> 200		Deg. F	1	08/18/06	CP	SW846 1010
Sulfide Reactivity	< 50	50	mg/kg	1	08/18/06	LE	SW846 CHAP7

(a) Not ignitable

RL = Reporting Limit



## Misc. Forms

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## Custody Documents and Other Forms

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Includes the following where applicable:

- Chain of Custody





**ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION**

ACCUTEST'S JOB NUMBER: F42948 CLIENT: RSI PROJECT: Paradise Creek  
 DATE/TIME RECEIVED: 8/16/06 9:00 # OF COOLERS RECEIVED: 2 COOLER TEMPS: 3.4 / 1.8  
 METHOD OF DELIVERY:  FEDEX  UPS ACCUTEST COURIER: 8574 8740 GREYHOUND DELIVERY 1777 OTHER  
 AIRBILL NUMBERS: \_\_\_\_\_

- COOLER INFORMATION**
- CUSTODY SEAL NOT PRESENT OR NOT INTACT
  - CHAIN OF CUSTODY NOT RECEIVED (COC)
  - ANALYSIS REQUESTED IS UNCLEAR OR MISSING
  - SAMPLE DATES OR TIMES UNCLEAR OR MISSING
  - TEMPERATURE CRITERIA NOT MET

- TRIP BLANK INFORMATION**
- TRIP BLANK NOT PROVIDED
  - TRIP BLANK NOT ON COC
  - TRIP BLANK INTACT
  - TRIP BLANK NOT INTACT
  - RECEIVED WATER TRIP BLANK
  - RECEIVED SOIL TRIP BLANK

**MISC. INFORMATION**

NUMBER OF ENCORES ? 4

NUMBER OF 5035 FIELD KITS ? 2

NUMBER OR LAB FILTERED METALS ? 2

- SAMPLE INFORMATION**
- SAMPLE LABELS PRESENT ON ALL BOTTLES
  - CORRECT NUMBER OF CONTAINERS USED
  - SAMPLE RECEIVED IMPROPERLY PRESERVED
  - INSUFFICIENT VOLUME FOR ANALYSIS
  - TIMES ON COC DON'T MATCH LABEL
  - ID'S ON COC DON'T MATCH LABEL
  - VOC VIALS HAVE HEADSPACE (MACRO BUBBLES)
  - BOTTLES RECEIVED BUT ANALYSIS NOT REQUESTED
  - NO BOTTLES RECEIVED FOR ANALYSIS REQUESTED
  - UNCLEAR FILTERING INSTRUCTIONS
  - UNCLEAR COMPOSITING INSTRUCTIONS
  - SAMPLE CONTAINER(S) RECEIVED BROKEN
  - % SOLIDS JAR NOT RECEIVED
  - 5035 FIELD KIT FROZEN WITHIN 48 HOUR'S

SUMMARY OF COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

TECHNICIAN SIGNATURE/DATE [Signature] 8/16/06 TECHNICIAN SIGNATURE/DATE \_\_\_\_\_ ASBD03/27/06



## GC/MS Volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

**Leachate Blank Summary**

Job Number: F42948  
 Account: FSSIMDEC Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17610-LB	M0014603.D	10	08/22/06	CS	08/21/06	OP17610	VM605

4.1  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F42948-16A, F42948-17A, F42948-18A

CAS No.	Compound	Result	RL	MDL	Units	Q
71-43-2	Benzene	ND	10	5.0	ug/l	
108-90-7	Chlorobenzene	ND	20	5.0	ug/l	
67-66-3	Chloroform	ND	20	5.0	ug/l	
56-23-5	Carbon tetrachloride	ND	20	5.0	ug/l	
75-35-4	1,1-Dichloroethylene	ND	20	5.0	ug/l	
107-06-2	1,2-Dichloroethane	ND	20	5.0	ug/l	
106-46-7	p-Dichlorobenzene	ND	20	5.0	ug/l	
78-93-3	Methyl ethyl ketone	ND	100	25	ug/l	
127-18-4	Tetrachloroethylene	ND	20	5.0	ug/l	
79-01-6	Trichloroethylene	ND	20	5.0	ug/l	
75-01-4	Vinyl chloride	ND	10	5.0	ug/l	

CAS No.	Surrrogate Recoveries		Limits
1868-53-7	Dibromofluoromethane	106%	86-115%
17060-07-0	1,2-Dichloroethane-D4	108%	73-126%
2037-26-5	Toluene-D8	95%	86-112%
460-00-4	4-Bromofluorobenzene	99%	83-119%

# Blank Spike Summary

Job Number: F42948  
Account: FSSIMDEC Field Support Service Inc  
Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VM605-BS	M0014602.D 1		08/22/06	CS	n/a	n/a	VM605

4.2  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F42948-16A, F42948-17A, F42948-18A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
71-43-2	Benzene	25	27.3	109	80-120
108-90-7	Chlorobenzene	25	26.1	104	82-112
67-66-3	Chloroform	25	27.7	111	78-118
56-23-5	Carbon tetrachloride	25	26.9	108	69-137
75-35-4	1,1-Dichloroethylene	25	25.1	100	67-134
107-06-2	1,2-Dichloroethane	25	26.4	106	68-121
106-46-7	p-Dichlorobenzene	25	24.8	99	77-113
78-93-3	Methyl ethyl ketone	125	168	134*	58-127
127-18-4	Tetrachloroethylene	25	28.0	112	75-126
79-01-6	Trichloroethylene	25	28.5	114	80-115
75-01-4	Vinyl chloride	25	30.0	120	70-151

CAS No.	Surrogate Recoveries	BSP	Limits
1868-53-7	Dibromofluoromethane	101%	86-115%
17060-07-0	1,2-Dichloroethane-D4	102%	73-126%
2037-26-5	Toluene-D8	96%	86-112%
460-00-4	4-Bromofluorobenzene	97%	83-119%

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42948  
 Account: FSSIMDEC Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F42948-17AMS	M0014609.D	10	08/22/06	CS	n/a	n/a	VM605
F42948-17AMSIM	M0014610.D	10	08/22/06	CS	n/a	n/a	VM605
F42948-17A	M0014604.D	10	08/22/06	CS	08/21/06	OP17610	VM605

4.3  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F42948-16A, F42948-17A, F42948-18A

CAS No.	Compound	F42948-17A ug/l	Spike Q	ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
71-43-2	Benzene	ND	250	279	112	265	106	5	72-125/7	
108-90-7	Chlorobenzene	ND	250	253	101	244	98	4	79-113/7	
67-66-3	Chloroform	ND	250	287	115	270	108	6	75-120/8	
56-23-5	Carbon tetrachloride	ND	250	272	109	248	99	9	56-145/12	
75-35-4	1,1-Dichloroethylene	ND	250	262	105	236	94	10	61-137/15	
107-06-2	1,2-Dichloroethane	ND	250	272	109	262	105	4	64-124/7	
106-46-7	p-Dichlorobenzene	ND	250	241	96	231	92	4	74-112/7	
78-93-3	Methyl ethyl ketone	ND	1250	1510	121	1540	123	2	51-128/10	
127-18-4	Tetrachloroethylene	ND	250	257	103	251	100	2	70-126/9	
79-01-6	Trichloroethylene	ND	250	282	113	270	108	4	73-117/10	
75-01-4	Vinyl chloride	ND	250	289	116	272	109	6	63-161/18	

CAS No.	Surrogate Recoveries	MS	MSD	F42948-17A Limits	
1868-53-7	Dibromofluoromethane	105%	104%	107%	86-115%
17060-07-0	1,2-Dichloroethane-D4	106%	105%	109%	73-126%
2037-26-5	Toluene-D8	96%	95%	96%	86-112%
460-00-4	4-Bromofluorobenzene	99%	99%	102%	83-119%

## Duplicate Summary

Job Number: F42948  
 Account: FSSIMDEC Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F42948-16ADUM0014614.D	10		08/22/06	CS	n/a	n/a	VM605
F42948-16A	M0014605.D	10	08/22/06	CS	08/21/06	OP17610	VM605

4.4  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F42948-16A, F42948-17A, F42948-18A

CAS No.	Compound	F42948-16A DUP		Q	RPD	Limits
		ug/l	ug/l			
71-43-2	Benzene	ND	ND		nc	
108-90-7	Chlorobenzene	ND	ND		nc	
67-66-3	Chloroform	ND	ND		nc	
56-23-5	Carbon tetrachloride	ND	ND		nc	
75-35-4	1,1-Dichloroethylene	ND	ND		nc	
107-06-2	1,2-Dichloroethane	ND	ND		nc	
106-46-7	p-Dichlorobenzene	ND	ND		nc	
78-93-3	Methyl ethyl ketone	ND	ND		nc	
127-18-4	Tetrachloroethylene	ND	ND		nc	
79-01-6	Trichloroethylene	ND	ND		nc	
75-01-4	Vinyl chloride	ND	ND		nc	

CAS No.	Surrogate Recoveries	DUP	F42948-16A	Limits
1868-53-7	Dibromofluoromethane	107%	107%	86-115%
17060-07-0	1,2-Dichloroethane-D4	112%	110%	73-126%
2037-26-5	Toluene-D8	96%	97%	86-112%
460-00-4	4-Bromofluorobenzene	102%	100%	83-119%



## GC/MS Semi-volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Leachate Blank Summary

Job Number: F42948  
 Account: FSSIMDEC Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17599-LB	R04541.D	1	08/22/06	NJ	08/21/06	OP17599	SR215

The QC reported here applies to the following samples:

Method: SW846 8270C

F42948-16A, F42948-17A, F42948-18A

CAS No.	Compound	Result	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	50	20	ug/l	
	3&4-Methylphenol	ND	50	20	ug/l	
87-86-5	Pentachlorophenol	ND	250	100	ug/l	
95-95-4	2,4,5-Trichlorophenol	ND	50	20	ug/l	
88-06-2	2,4,6-Trichlorophenol	ND	50	20	ug/l	
106-46-7	1,4-Dichlorobenzene	ND	50	10	ug/l	
121-14-2	2,4-Dinitrotoluene	ND	50	20	ug/l	
118-74-1	Hexachlorobenzene	ND	50	10	ug/l	
87-68-3	Hexachlorobutadiene	ND	50	20	ug/l	
67-72-1	Hexachloroethane	ND	50	20	ug/l	
98-95-3	Nitrobenzene	ND	50	10	ug/l	
110-86-1	Pyridine	ND	100	30	ug/l	

CAS No.	Surrogate Recoveries		Limits
367-12-4	2-Fluorophenol	52%	19-90%
4165-62-2	Phenol-d5	34%	10-68%
118-79-6	2,4,6-Tribromophenol	78%	36-137%
4165-60-0	Nitrobenzene-d5	75%	49-119%
321-60-8	2-Fluorobiphenyl	74%	45-118%
1718-51-0	Terphenyl-d14	73%	46-135%

5.1  
5

# Blank Spike Summary

Job Number: F42948  
 Account: FSSIMDEC Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17599-LBS	R04540.D	1	08/22/06	NJ	08/21/06	OP17599	SR215

The QC reported here applies to the following samples:

Method: SW846 8270C

F42948-16A, F42948-17A, F42948-18A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
95-48-7	2-Methylphenol	500	328	66	48-90
	3&4-Methylphenol	1000	620	62	43-94
87-86-5	Pentachlorophenol	1000	888	89	62-120
95-95-4	2,4,5-Trichlorophenol	500	421	84	67-103
88-06-2	2,4,6-Trichlorophenol	500	408	82	68-104
106-46-7	1,4-Dichlorobenzene	500	315	63	46-96
121-14-2	2,4-Dinitrotoluene	500	441	88	64-107
118-74-1	Hexachlorobenzene	500	443	89	69-103
87-68-3	Hexachlorobutadiene	500	329	66	48-100
67-72-1	Hexachloroethane	500	283	57	41-98
98-95-3	Nitrobenzene	500	410	82	60-102
110-86-1	Pyridine	500	235	47	17-65

CAS No.	Surrogate Recoveries	BSP	Limits
367-12-4	2-Fluorophenol	54%	19-90%
4165-62-2	Phenol-d5	34%	10-68%
118-79-6	2,4,6-Tribromophenol	90%	36-137%
4165-60-0	Nitrobenzene-d5	84%	49-119%
321-60-8	2-Fluorobiphenyl	80%	45-118%
1718-51-0	Terphenyl-d14	82%	46-135%

5.2  
5

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42948  
 Account: FSSIMDEC Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17599-MS	R04546.D	1	08/22/06	NJ	08/21/06	OP17599	SR215
OP17599-MSD	R04547.D	1	08/22/06	NJ	08/21/06	OP17599	SR215
F42948-18A	R04545.D	1	08/22/06	NJ	08/21/06	OP17599	SR215

The QC reported here applies to the following samples:

Method: SW846 8270C

F42948-16A, F42948-17A, F42948-18A

CAS No.	Compound	F42948-18A ug/l	Spike Q ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
95-48-7	2-Methylphenol	ND	500	321	64	322	64	0	40-102/25
	3&4-Methylphenol	ND	1000	600	60	598	60	0	39-97/24
87-86-5	Pentachlorophenol	ND	1000	885	89	919	92	4	53-128/22
95-95-4	2,4,5-Trichlorophenol	ND	500	427	85	442	88	3	56-110/19
88-06-2	2,4,6-Trichlorophenol	ND	500	409	82	429	86	5	55-112/19
106-46-7	1,4-Dichlorobenzene	ND	500	347	69	352	70	1	43-102/24
121-14-2	2,4-Dinitrotoluene	ND	500	434	87	446	89	3	60-108/18
118-74-1	Hexachlorobenzene	ND	500	446	89	451	90	1	66-106/16
87-68-3	Hexachlorobutadiene	ND	500	385	77	379	76	2	46-107/26
67-72-1	Hexachloroethane	ND	500	341	68	337	67	1	39-105/25
98-95-3	Nitrobenzene	ND	500	393	79	413	83	5	50-107/25
110-86-1	Pyridine	ND	500	228	46	244	49	7	19-77/41

CAS No.	Surrogate Recoveries	MS	MSD	F42948-18A Limits	
367-12-4	2-Fluorophenol	51%	51%	41%	19-90%
4165-62-2	Phenol-d5	33%	31%	25%	10-68%
118-79-6	2,4,6-Tribromophenol	88%	88%	85%	36-137%
4165-60-0	Nitrobenzene-d5	78%	83%	79%	49-119%
321-60-8	2-Fluorobiphenyl	80%	82%	80%	45-118%
1718-51-0	Terphenyl-d14	82%	83%	81%	46-135%

5.3  
5

# Duplicate Summary

Job Number: F42948  
 Account: FSSIMDEC Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17599-DUP	R04543.D	1	08/22/06	NJ	08/21/06	OP17599	SR215
F42948-16A	R04542.D	1	08/22/06	NJ	08/21/06	OP17599	SR215

The QC reported here applies to the following samples:

Method: SW846 8270C

F42948-16A, F42948-17A, F42948-18A

CAS No.	Compound	F42948-16A DUP		Q	RPD	Limits
		ug/l	ug/l			
95-48-7	2-Methylphenol	ND	ND	nc		
	3&4-Methylphenol	ND	ND	nc		
87-86-5	Pentachlorophenol	ND	ND	nc		
95-95-4	2,4,5-Trichlorophenol	ND	ND	nc		
88-06-2	2,4,6-Trichlorophenol	ND	ND	nc		
106-46-7	1,4-Dichlorobenzene	ND	ND	nc		
121-14-2	2,4-Dinitrotoluene	ND	ND	nc		
118-74-1	Hexachlorobenzene	ND	ND	nc		
87-68-3	Hexachlorobutadiene	ND	ND	nc		
67-72-1	Hexachloroethane	ND	ND	nc		
98-95-3	Nitrobenzene	ND	ND	nc		
110-86-1	Pyridine	ND	ND	nc		

CAS No.	Surrogate Recoveries	DUP	F42948-16A	Limits
367-12-4	2-Fluorophenol	35%	42%	19-90%
4165-62-2	Phenol-d5	21%	25%	10-68%
118-79-6	2,4,6-Tribromophenol	67%	80%	36-137%
4165-60-0	Nitrobenzene-d5	60%	77%	49-119%
321-60-8	2-Fluorobiphenyl	58%	74%	45-118%
1718-51-0	Terphenyl-d14	73%	78%	46-135%

5.4



## GC Volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries



## Method Blank Summary

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Job Number: F42948  
Account: FSSIMDEC Field Support Service Inc  
Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GUV1358-MB	UV023485.D1		08/21/06	MM	n/a	n/a	GUV1358

The QC reported here applies to the following samples:

Method: SW846 8015

F42948-16, F42948-17, F42948-18

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	5.0	2.5	mg/kg	

CAS No.	Surrogate Recoveries	Limits	
460-00-4	4-Bromofluorobenzene	98%	62-135%
98-08-8	aaa-Trifluorotoluene	101%	65-118%

6.1



# Blank Spike Summary

Job Number: F42948  
Account: FSSIMDEC Field Support Service Inc  
Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GUV1358-BS	UV023486.D1		08/21/06	MM	n/a	n/a	GUV1358

The QC reported here applies to the following samples:

Method: SW846 8015

F42948-16, F42948-17, F42948-18

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH-GRO (C6-C10)	20	21.9	110	66-122

CAS No.	Surrogate Recoveries	BSP	Limits
460-00-4	4-Bromofluorobenzene	113%	62-135%
98-08-8	aaa-Trifluorotoluene	116%	65-118%

62

6

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42948  
 Account: FSSIMDEC Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F42948-16MS	UV023503.D1		08/21/06	MM	n/a	n/a	GUV1358
F42948-16MSD	UV023504.D1		08/21/06	MM	n/a	n/a	GUV1358
F42948-16 <sup>a</sup>	UV023487.D1		08/21/06	MM	n/a	n/a	GUV1358

The QC reported here applies to the following samples:

Method: SW846 8015

F42948-16, F42948-17, F42948-18

CAS No.	Compound	F42948-16 mg/kg	Spike Q mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH-GRO (C6-C10)	ND	21.1	20.7	98	21.1	100	2	37-142/17

CAS No.	Surrogate Recoveries	MS	MSD	F42948-16	Limits
460-00-4	4-Bromofluorobenzene	101%	101%	101%	62-135%
98-08-8	aaa-Trifluorotoluene	105%	100%	104%	65-118%

(a) Sample was received in a bulk container but was not preserved within 48 hours of sampling.





## GC Semi-volatiles

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## QC Data Summaries

7

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Method Blank Summary

Job Number: F42948  
Account: FSSIMDEC Field Support Service Inc  
Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17584-MB	TT01484.D	1	08/18/06	VS	08/18/06	OP17584	GTT58

The QC reported here applies to the following samples:

Method: SW846 8082

F42948-16, F42948-17, F42948-18

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	8.3	ug/kg	
11104-28-2	Aroclor 1221	ND	17	13	ug/kg	
11141-16-5	Aroclor 1232	ND	17	13	ug/kg	
53469-21-9	Aroclor 1242	ND	17	8.3	ug/kg	
12672-29-6	Aroclor 1248	ND	17	8.3	ug/kg	
11097-69-1	Aroclor 1254	ND	17	8.3	ug/kg	
11096-82-5	Aroclor 1260	ND	17	8.3	ug/kg	
11100-14-4	Aroclor 1268	ND	17	8.3	ug/kg	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	104%	52-136%
2051-24-3	Decachlorobiphenyl	106%	49-148%

71  
7

## Method Blank Summary

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Job Number: F42948  
Account: FSSIMDEC Field Support Service Inc  
Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17584-MB	ST50788.D	1	08/21/06	NAF	08/18/06	OP17584	GST1460

The QC reported here applies to the following samples:

Method: SW846 8082

F42948-16, F42948-17, F42948-18

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	8.3	ug/kg	
11104-28-2	Aroclor 1221	ND	17	13	ug/kg	
11141-16-5	Aroclor 1232	ND	17	13	ug/kg	
53469-21-9	Aroclor 1242	ND	17	8.3	ug/kg	
12672-29-6	Aroclor 1248	ND	17	8.3	ug/kg	
11097-69-1	Aroclor 1254	ND	17	8.3	ug/kg	
11096-82-5	Aroclor 1260	ND	17	8.3	ug/kg	
11100-14-4	Aroclor 1268	ND	17	8.3	ug/kg	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	94%	52-136%
2051-24-3	Decachlorobiphenyl	101%	49-148%

7.1  
7

## Method Blank Summary

Page 1 of 1

Job Number: F42948  
Account: FSSIMDEC Field Support Service Inc  
Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17587-MB	LL12070.D	1	08/18/06	VS	08/18/06	OP17587	GLL450

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42948-1, F42948-2, F42948-3, F42948-4, F42948-5, F42948-7, F42948-8, F42948-9, F42948-10, F42948-11, F42948-12, F42948-13, F42948-14, F42948-15, F42948-16, F42948-17, F42948-18

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries	Limits
84-15-1	o-Terphenyl	59% 57-115%

7.1  
7

## Method Blank Summary

Page 1 of 1

Job Number: F42948  
Account: FSSIMDEC Field Support Service Inc  
Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17587-MB	LL12102.D	1	08/21/06	AA	08/18/06	OP17587	GLL451

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42948-1, F42948-2, F42948-3, F42948-4, F42948-5, F42948-7, F42948-8, F42948-9, F42948-10, F42948-11, F42948-12, F42948-13, F42948-14, F42948-15, F42948-16, F42948-17, F42948-18

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries	Limits
84-15-1	o-Terphenyl	57% 57-115%

7.1

7

## Method Blank Summary

Page 1 of 1

Job Number: F42948  
Account: FSSIMDEC Field Support Service Inc  
Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17597-MB	LL12117.D	1	08/21/06	AA	08/19/06	OP17597	GLL451

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42948-6

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries		Limits
84-15-1	o-Terphenyl	72%	57-115%

7.1

7

# Leachate Blank Summary

Job Number: F42948  
 Account: FSSIMDEC Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17600-LB	KK14084.D	1	08/21/06	AA	08/21/06	OP17600	GKK534

The QC reported here applies to the following samples:

Method: SW846 8081A

F42948-16A, F42948-17A, F42948-18A

CAS No.	Compound	Result	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	0.50	0.20	ug/l	
12789-03-6	Chlordane	ND	5.0	2.5	ug/l	
72-20-8	Endrin	ND	1.0	0.40	ug/l	
76-44-8	Heptachlor	ND	0.50	0.20	ug/l	
1024-57-3	Heptachlor epoxide	ND	0.50	0.20	ug/l	
72-43-5	Methoxychlor	ND	1.0	0.40	ug/l	
8001-35-2	Toxaphene	ND	25	15	ug/l	

CAS No.	Surrogate Recoveries	Result	Limits
877-09-8	Tetrachloro-m-xylene	93%	60-138%
2051-24-3	Decachlorobiphenyl	108%	31-148%

7.2  
7

# Blank Spike Summary

Job Number: F42948  
Account: FSSIMDEC Field Support Service Inc  
Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17600-LBS	KK14083.D	1	08/21/06	AA	08/21/06	OP17600	GKK534

The QC reported here applies to the following samples:

Method: SW846 8081A

F42948-16A, F42948-17A, F42948-18A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
58-89-9	gamma-BHC (Lindane)	5	6.0	120	69-137
72-20-8	Endrin	5	5.5	110	78-134
76-44-8	Heptachlor	5	5.2	104	62-137
1024-57-3	Heptachlor epoxide	5	5.8	116	74-130
72-43-5	Methoxychlor	5	5.1	102	77-131

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	108%	60-138%
2051-24-3	Decachlorobiphenyl	102%	31-148%

7.3  
7

# Blank Spike Summary

Job Number: F42948  
Account: FSSIMDEC Field Support Service Inc  
Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17584-BS	TT01483.D	1	08/18/06	VS	08/18/06	OP17584	GTT58

The QC reported here applies to the following samples:

Method: SW846 8082

F42948-16, F42948-17, F42948-18

CAS No.	Compound	Spike ug/kg	BSP ug/kg	BSP %	Limits
12674-11-2	Aroclor 1016	133	126	95	75-123
11096-82-5	Aroclor 1260	133	123	92	72-124

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	86%	52-136%
2051-24-3	Decachlorobiphenyl	79%	49-148%

7.3  
7

# Blank Spike Summary

Job Number: F42948  
Account: FSSIMDEC Field Support Service Inc  
Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17587-BS	LL12069.D	1	08/18/06	VS	08/18/06	OP17587	GLL450

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42948-1, F42948-2, F42948-3, F42948-4, F42948-5, F42948-7, F42948-8, F42948-9, F42948-10, F42948-11, F42948-12, F42948-13, F42948-14, F42948-15, F42948-16, F42948-17, F42948-18

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH (C10-C28)	33.3	22.2	67	62-114

CAS No.	Surr ogate Recoveries	BSP	Limits
84-15-1	o-Terphenyl	71%	57-115%

7.3  
7

# Blank Spike Summary

Job Number: F42948  
Account: FSSIMDEC Field Support Service Inc  
Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17597-BS	LL12116.D	1	08/21/06	AA	08/19/06	OP17597	GLL451

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42948-6

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH (C10-C28)	33.3	24.3	73	62-114

CAS No.	Surrogate Recoveries	BSP	Limits
84-15-1	o-Terphenyl	77%	57-115%

73  
7

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42948  
 Account: FSSIMDEC Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17600-MS	KK14088.D	1	08/21/06	AA	08/21/06	OP17600	GKK534
OP17600-MSD	KK14089.D	1	08/21/06	AA	08/21/06	OP17600	GKK534
F42948-17A	KK14087.D	1	08/21/06	AA	08/21/06	OP17600	GKK534

The QC reported here applies to the following samples:

Method: SW846 8081A

F42948-16A, F42948-17A, F42948-18A

CAS No.	Compound	F42948-17A Spike		MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
		ug/l	Q						
58-89-9	gamma-BHC (Lindane)	ND	5	5.7	114	5.6	112	2	75-140/21
72-20-8	Endrin	ND	5	5.5	110	5.6	112	2	72-149/21
76-44-8	Heptachlor	ND	5	4.9	98	4.9	98	0	74-136/25
1024-57-3	Heptachlor epoxide	ND	5	5.6	112	5.6	112	0	75-138/21
72-43-5	Methoxychlor	ND	5	5.4	108	5.5	110	2	69-145/27

CAS No.	Surrogate Recoveries	MS	MSD	F42948-17A Limits	
877-09-8	Tetrachloro-m-xylene	103%	92%	109%	60-138%
2051-24-3	Decachlorobiphenyl	97%	96%	106%	31-148%

7.4



# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42948  
 Account: FSSIMDEC Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17584-MS	TT01501.D	5	08/18/06	VS	08/18/06	OP17584	GTT58
OP17584-MSD	TT01502.D	5	08/18/06	VS	08/18/06	OP17584	GTT58
F42943-7 <sup>a</sup>	TT01500.D	5	08/18/06	VS	08/18/06	OP17584	GTT58

The QC reported here applies to the following samples:

Method: SW846 8082

F42948-16, F42948-17, F42948-18

CAS No.	Compound	F42943-7 ug/kg	Spike Q	MS ug/kg	MS %	MSD ug/kg	MSD %	RPD	Limits Rec/RPD
12674-11-2	Aroclor 1016	ND	141	132	94	149	100	12	54-138/22
11096-82-5	Aroclor 1260	ND	141	191	135	200	134	5	46-138/21

CAS No.	Surrogate Recoveries	MS	MSD	F42943-7	Limits
877-09-8	Tetrachloro-m-xylene	64%	77%	78%	52-136%
2051-24-3	Decachlorobiphenyl	256%* <sup>b</sup>	262%* <sup>b</sup>	238%* <sup>b</sup>	49-148%

- (a) All hits confirmed by dual column analysis. Dilution required due to matrix interference.
- (b) Outside control limits due to matrix interference.

7.4  
7

**Matrix Spike/Matrix Spike Duplicate Summary**

Job Number: F42948  
 Account: FSSIMDEC Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17587-MS	LL12092.D	1	08/19/06	VS	08/18/06	OP17587	GLL450
OP17587-MSD	LL12093.D	1	08/19/06	VS	08/18/06	OP17587	GLL450
F42948-15 <sup>a</sup>	LL12091.D	1	08/19/06	VS	08/18/06	OP17587	GLL450

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42948-1, F42948-2, F42948-3, F42948-4, F42948-5, F42948-7, F42948-8, F42948-9, F42948-10, F42948-11, F42948-12, F42948-13, F42948-14, F42948-15, F42948-16, F42948-17, F42948-18

CAS No.	Compound	F42948-15 mg/kg	Spike Q	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH (C10-C28)	29.7	37.2	56.8	73	52.6	62	8	31-136/36

CAS No.	Surrogate Recoveries	MS	MSD	F42948-15	Limits
84-15-1	o-Terphenyl	74%	67%	78%	57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

7.4  
7

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42948  
 Account: FSSIMDEC Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17597-MS <sup>a</sup>	LL12119.D	10	08/21/06	AA	08/19/06	OP17597	GLL451
OP17597-MSD <sup>a</sup>	LL12120.D	10	08/21/06	AA	08/19/06	OP17597	GLL451
F42948-6 <sup>b</sup>	LL12118.D	10	08/21/06	AA	08/19/06	OP17597	GLL451

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42948-6

CAS No.	Compound	F42948-6 mg/kg	Spike mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH (C10-C28)	416	44	165	-571* <sup>c</sup>	160	-582* <sup>c</sup>	3	31-136/36

CAS No.	Surrogate Recoveries	MS	MSD	F42948-6	Limits
84-15-1	o-Terphenyl	61%	60%	61%	57-115%

- (a) Spike recovery indicates sample nonhomogeneity.
- (b) Petroleum hydrocarbon pattern extends beyond C28.
- (c) Outside control limits due to high level in sample relative to spike amount.

7.4

## Duplicate Summary

Job Number: F42948  
 Account: FSSIMDEC Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17600-DUP	KK14086.D	1	08/21/06	AA	08/21/06	OP17600	GKK534
F42948-16A	KK14085.D	1	08/21/06	AA	08/21/06	OP17600	GKK534

The QC reported here applies to the following samples:

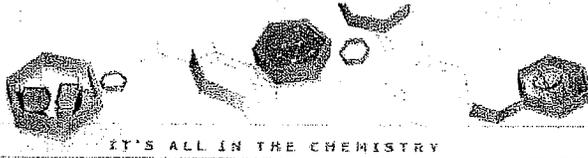
Method: SW846 8081A

F42948-16A, F42948-17A, F42948-18A

CAS No.	Compound	F42948-16A DUP			RPD	Limits
		ug/l	Q	ug/l		
58-89-9	gamma-BHC (Lindane)	ND	ND	nc		
72-20-8	Endrin	ND	ND	nc		
76-44-8	Heptachlor	ND	ND	nc		
1024-57-3	Heptachlor epoxide	ND	ND	nc		
72-43-5	Methoxychlor	ND	ND	nc		

CAS No.	Surr ogate Recoveries	DUP	F42948-16A Limits	
877-09-8	Tetrachloro-m-xylene	96%	105%	60-138%
2051-24-3	Decachlorobiphenyl	98%	106%	31-148%

75  
7



## Metals Analysis

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Matrix Spike and Duplicate Summaries
- Blank Spike and Lab Control Sample Summaries
- Serial Dilution Summaries



BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F42948  
Account: FSSIMDEC - Field Support Service Inc  
Project: TO-17, MOD6: Paradise Creek

QC Batch ID: MP10162  
Matrix Type: LEACHATE

Methods: SW846 7470A  
Units: mg/l

Prep Date: 08/22/06 08/22/06 08/22/06

Metal	RL	IDL	MB raw	final	MB raw	final	MB raw	final
Mercury	0.0010	.00008	0.000024	<0.0010	0.00046	<0.010	-0.00016	<0.010

Associated samples MP10162: F42948-16A, F42948-17A, F42948-18A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anz) Analyte not requested

8.1.1

8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42948  
 Account: FSSIMDEC - Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

QC Batch ID: MP10162  
 Matrix Type: LEACHATE

Methods: SW846 7470A  
 Units: mg/l

Prep Date: 08/22/06 08/22/06

Metal	F42948-16A Original DUP	RPD	QC Limits	F42948-16A Original MS	Spikelot HGFLWS1	% Rec	QC Limits	
Mercury	0.0	0.0	NC	0.0	0.029	0.030	96.7	80-120

Associated samples MP10162: F42948-16A, F42948-17A, F42948-18A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested

8.1.2  
**8**

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F42948  
 Account: FSSIMDEC - Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

QC Batch ID: MP10162  
 Matrix Type: LEACHATE

Methods: SW846 7470A  
 Units: mg/l

Prep Date: 08/22/06 08/22/06

Metal	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.0028	0.0030	93.3	80-120	0.028	0.030	93.3	80-120

Associated samples MP10162: F42948-16A, F42948-17A, F42948-18A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

8.1.3

8

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F42948  
Account: FSSIMDEC - Field Support Service Inc  
Project: TO-17, MOD6: Paradise Creek

QC Batch ID: MP10162  
Matrix Type: LEACHATE

Methods: SW846 7470A  
Units: mg/l

Prep Date: 08/22/06

Metal	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.029	0.030	96.7	80-120

Associated samples MP10162: F42948-16A, F42948-17A, F42948-18A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

8.1.3  
8

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F42948  
Account: FSSIMDEC - Field Support Service Inc  
Project: TO-17, MOD6: Paradise Creek

QC Batch ID: MP10163  
Matrix Type: LEACHATE

Methods: SW846 6010B  
Units: mg/l

Prep Date: 08/22/06 08/22/06

Metal	RL	IDL	MB raw	final	MB raw	final
Aluminum	0.20	.018				
Antimony	0.0060	.0034				
Arsenic	0.010	.0028	-0.0061	<0.010	-0.00051	<0.010
Barium	1.0	.0004	0.000070	<1.0	0.0016	<1.0
Beryllium	0.0050	.0004				
Cadmium	0.0050	.0002	0.00031	<0.0050	0.00030	<0.0050
Calcium	5.0	.042				
Chromium	0.010	.0006	-0.00022	<0.010	0.0015	<0.010
Cobalt	0.050	.0006				
Copper	0.025	.0009				
Iron	0.30	.012				
Lead	0.050	.0017	-0.000010	<0.050	0.0035	<0.050
Magnesium	5.0	.0043				
Manganese	0.015	.0006				
Molybdenum	0.050	.0013				
Nickel	0.040	.0008				
Potassium	10	.01				
Selenium	0.050	.002	0.00063	<0.050	0.025	<0.050
Silver	0.010	.0009	0.00021	<0.010	0.00050	<0.010
Sodium	10	.5				
Thallium	0.010	.0023				
Tin	0.050	.0031				
Vanadium	0.050	.0006				
Zinc	0.10	.0013				

Associated samples MP10163: F42948-1A, F42948-2A, F42948-3A, F42948-4A, F42948-5A, F42948-6A, F42948-16A, F42948-17A, F42948-18A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

8.2.1  
8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42948  
 Account: FSSIMDEC - Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

QC Batch ID: MP10163  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 08/22/06 08/22/06

Metal	F42948-1A Original	DUP	RPD	QC Limits	F42948-1A Original	MS	Spike lot	MPFLICPl % Rec	QC Limits
Aluminum									
Antimony									
Arsenic	0.012	0.0077	43.7 (a)	0-20	0.012	2.3	2.0	114.4	80-120
Barium	1.1	1.2	8.7	0-20	1.1	3.1	2.0	100.0	80-120
Beryllium									
Cadmium	0.052	0.052	0.0	0-20	0.052	0.099	0.050	94.0	80-120
Calcium									
Chromium	0.0024	0.0021	13.3	0-20	0.0024	0.19	0.20	93.8	80-120
Cobalt									
Copper									
Iron									
Lead	0.77	0.78	1.3	0-20	0.77	1.3	0.50	106.0	80-120
Magnesium									
Manganese									
Molybdenum									
Nickel									
Potassium									
Selenium	0.034	0.037	8.5	0-20	0.034	2.2	2.0	108.3	80-120
Silver	0.0	0.0	NC	0-20	0.0	0.054	0.050	108.0	80-120
Sodium									
Thallium									
Tin									
Vanadium									
Zinc									

Associated samples MP10163: F42948-1A, F42948-2A, F42948-3A, F42948-4A, F42948-5A, F42948-6A, F42948-16A, F42948-17A, F42948-18A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested  
 (a) RPD acceptable due to low duplicate and sample concentrations.

8.2.2  
 8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42948  
 Account: FSSIMDEC - Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

QC Batch ID: MP10163  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 08/22/06

Metal	F42948-1A Original MSD		Spikelot MPFLICPI % Rec		MSD RPD	QC Limit
Aluminum						
Antimony						
Arsenic	0.012	2.4	2.0	119.4	4.3	20
Barium	1.1	3.2	2.0	105.0	3.2	20
Beryllium						
Cadmium	0.052	0.10	0.050	96.0	1.0	20
Calcium						
Chromium	0.0024	0.20	0.20	98.8	5.1	20
Cobalt						
Copper						
Iron						
Lead	0.77	1.3	0.50	106.0	0.0	20
Magnesium						
Manganese						
Molybdenum						
Nickel						
Potassium						
Selenium	0.034	2.3	2.0	113.3	4.4	20
Silver	0.0	0.057	0.050	114.0	5.4	20
Sodium						
Thallium						
Tin						
Vanadium						
Zinc						

Associated samples MP10163: F42948-1A, F42948-2A, F42948-3A, F42948-4A, F42948-5A, F42948-6A, F42948-16A, F42948-17A, F42948-18A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anz) Analyte not requested

8.2.2  
**8**

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F42948  
 Account: FSSIMDEC - Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

QC Batch ID: MP10163  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 08/22/06 08/22/06

Metal	BSP Result	Spikelot MPFLICPl % Rec	QC Limits	BSP Result	Spikelot MPFLICPl % Rec	QC Limits
Aluminum						
Antimony						
Arsenic	2.3	2.0 115.0	80-120	2.4	2.0 120.0	80-120
Barium	2.1	2.0 105.0	80-120	2.1	2.0 105.0	80-120
Beryllium						
Cadmium	0.052	0.050 104.0	80-120	0.052	0.050 104.0	80-120
Calcium						
Chromium	0.22	0.20 110.0	80-120	0.21	0.20 105.0	80-120
Cobalt						
Copper						
Iron						
Lead	0.52	0.50 104.0	80-120	0.53	0.50 106.0	80-120
Magnesium						
Manganese						
Molybdenum						
Nickel						
Potassium						
Selenium	2.0	2.0 100.0	80-120	2.3	2.0 115.0	80-120
Silver	0.052	0.050 104.0	80-120	0.056	0.050 112.0	80-120
Sodium						
Thallium						
Tin						
Vanadium						
Zinc						

Associated samples MP10163: F42948-1A, F42948-2A, F42948-3A, F42948-4A, F42948-5A, F42948-6A, F42948-16A, F42948-17A, F42948-18A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

8.2.3  
**8**

SERIAL DILUTION RESULTS SUMMARY

Login Number: F42948  
 Account: FSSIMDEC - Field Support Service Inc  
 Project: TO-17, MOD6: Paradise Creek

QC Batch ID: MP10163  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: ug/l

Prep Date: 08/22/06

Metal	F42948-1A Original	SDL 1:5	RPD	QC Limits
-------	-----------------------	---------	-----	--------------

Aluminum				
Antimony				
Arsenic	12.5	0.00	100.0(a)	0-10
Barium	1140	1220	7.0	0-10
Beryllium				
Cadmium	51.6	55.0	6.6	0-10
Calcium				
Chromium	2.44	0.00	100.0(a)	0-10
Cobalt				
Copper				
Iron				
Lead	771	805	4.4	0-10
Magnesium				
Manganese				
Molybdenum				
Nickel				
Potassium				
Selenium	34.1	40.9	20.0 (a)	0-10
Silver	0.00	0.00	NC	0-10
Sodium				
Thallium				
Tin				
Vanadium				
Zinc				

Associated samples MP10163: F42948-1A, F42948-2A, F42948-3A, F42948-4A, F42948-5A, F42948-6A, F42948-16A, F42948-17A, F42948-18A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested  
 (a) Percent difference acceptable due to low initial sample concentration (< 50 times IDL).

8.2.4

8



## General Chemistry

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### QC Data Summaries

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Includes the following where applicable:

- Method Blank and Blank Spike Summaries
- Duplicate Summaries
- Matrix Spike Summaries

METHOD BLANK AND SPIKE RESULTS SUMMARY  
GENERAL CHEMISTRY

Login Number: F42948  
Account: FSSIMDEC - Field Support Service Inc  
Project: TO-17, MOD6: Paradise Creek

Analyte	Batch ID	RL	MB Result	Units	Spike Amount	BSP Result	BSP %Recov	QC Limits
Cyanide Reactivity	GP8278/GN21907	1.5	<1.5	mg/kg	5.0	61.3	1230.0*(a)	0-100%
Sulfide Reactivity	GP8279/GN21909	50	<50	mg/kg	53.7	0.0	0.0	0-100%

Associated Samples:

Batch GP8278: F42948-16A, F42948-17A, F42948-18A

Batch GP8279: F42948-16A, F42948-17A, F42948-18A

(a) High spike recovery.

9.1



DUPLICATE RESULTS SUMMARY  
GENERAL CHEMISTRY

Login Number: F42948  
Account: FSSIMDEC - Field Support Service Inc  
Project: TO-17, MOD6: Paradise Creek

Analyte	Batch ID	QC Sample	Units	Original Result	DUP Result	RPD	QC Limits
Corrosivity as pH	GN21830	F42948-16A		7.2	7.2		0-%
Ignitability (Flashpoint)	GN21835	F42948-16A	Deg. F	>200	>200	0.0	0-38%
Solids, Percent	GN21807	F42941-1	%	88.2	89.2	1.1	0-30%
Solids, Percent	GN21809	F42945-1	%	79.8	79.5	0.4	0-30%

Associated Samples:

Batch GN21807: F42948-1, F42948-2, F42948-3, F42948-4, F42948-5, F42948-6, F42948-7, F42948-8, F42948-9  
Batch GN21809: F42948-10, F42948-11, F42948-12, F42948-13, F42948-14, F42948-15, F42948-16, F42948-17, F42948-18  
Batch GN21830: F42948-16A, F42948-17A, F42948-18A  
Batch GN21835: F42948-16A, F42948-17A, F42948-18A

9.2  
9



IT'S ALL IN THE CHEMISTRY

**Misc. Forms**

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**Custody Documents and Other Forms**

(Accutest Laboratories Gulf Coast, Inc.)

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**Includes the following where applicable:**

- Chain of Custody



# CHAIN OF CUSTODY

4405 VINELAND ROAD • SUITE C-15  
ORLANDO, FL 32811  
TEL: 407-425-6700 • FAX: 407-425-0707

ACCUTEST JOB #: F42948

ACCUTEST QUOTE #:

CLIENT INFORMATION			FACILITY INFORMATION				ANALYTICAL INFORMATION										MATRIX CODES
NAME			PROJECT NAME														DW - DRINKING WATER GW - GROUND WATER WW - WASTE WATER SO - SOIL SL - SLUDGE OL - OIL LIQ - LIQUID SOL - OTHER SOLID
ADDRESS			LOCATION														
CITY, STATE ZIP			PROJECT NO.														
SEND REPORT TO: PHONE #			FAX #														
ACCUTEST SAMPLE #	FIELD ID / POINT OF COLLECTION	COLLECTION			PRESERVATION							LAB USE ONLY					
		DATE	TIME	SAMPLED BY:	MATRIX	# OF BOTTLES	IC	NI03	HI03	HS03	INDI						
	F42948-16A				SO	1					X	X					
	-17A				SO	1					X	X					
	-18A				SO	1					X	X					
DATA TURNAROUND INFORMATION			DATA DELIVERABLE INFORMATION				COMMENTS/REMARKS										
<input type="checkbox"/> STANDARD <input type="checkbox"/> 48 HOUR RUSH <input type="checkbox"/> 24 HOUR EMERGENCY <input checked="" type="checkbox"/> OTHER 7 Day EMERGENCY OR RUSH IS FAX DATA UNLESS PREVIOUSLY APPROVED			APPROVED BY: _____ <input type="checkbox"/> STANDARD <input checked="" type="checkbox"/> COMMERCIAL "B" <input type="checkbox"/> DISK DELIVERABLE <input type="checkbox"/> STATE FORMS <input type="checkbox"/> OTHER (SPECIFY) _____				AVG Lab # 190827										
SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION, INCLUDING COURIER DELIVERY																	
RELINQUISHED BY SAMPLER:		DATE TIME:		RECEIVED BY:		RELINQUISHED BY:		DATE TIME:		RECEIVED BY:		RELINQUISHED BY:		DATE TIME:		RECEIVED BY:	
1. [Signature]		8/17/06		1. [Signature]		2. [Signature]				2. [Signature]		3. [Signature]				3. [Signature]	
3. [Signature]				3. [Signature]		4. [Signature]				4. [Signature]		5. [Signature]				5. [Signature]	
5. [Signature]		8/18/06		A. Rodley		SEAL #		PRESERVE WHERE APPLICABLE		ON ICE		TEMPERATURE				38 C	

10.1 10

F42948: Chain of Custody  
Page 1 of 6  
Accutest Laboratories Gulf Coast, Inc.



**ACCUTEST.**

VARIANCE MEMO  
SAMPLE LOG-IN

SAMPLE(S) PROJECT FILED BY: ALL DATE: 8/18/00  
N/A LAB NO. F42948  
AR

**VARIANCE - Check applicable items(s):**

- Insufficient sample sent for proper analysis; \_\_\_\_\_ received approx. \_\_\_\_\_
- Sample bottle received broken and/or cap not intact. \_\_\_\_\_
- Samples received without paperwork; paperwork received without samples. \_\_\_\_\_
- Samples received without proper refrigeration, when it has been deemed necessary. Temperature at receipt: \_\_\_\_\_
- Illegible sample number or label missing from bottle. \_\_\_\_\_
- Numbers on sample not the same as numbers on paper work. \_\_\_\_\_
- Incomplete instructions received with sample(s) i.e., no request for analysis, no chain of custody, incomplete billing instructions, no due date, etc. Temperature at receipt: \_\_\_\_\_
- Samples received in improper container or lacking proper preservation. \_\_\_\_\_
- Physical characteristics different than those on sampling sheets; \_\_\_\_\_

Describe: \_\_\_\_\_  
Rush samples on hold because of incomplete paperwork. \_\_\_\_\_  
Other (specify): NO. ST. DATE EX TIME ON THE  
WOC OF CONTAINERS.

**CORRECTIVE ACTION TAKEN**

- Person Contacted \_\_\_\_\_ By phone. \_\_\_\_\_
- Client informed verbally. \_\_\_\_\_ Samples processed for information only and noted on report.
- Client informed by memo/letter. \_\_\_\_\_ Samples processed with higher detection limits accepted.
- Samples processed as is. \_\_\_\_\_ Samples rejected.
- Samples preserved by lab. \_\_\_\_\_
- Client will resample and resubmit. \_\_\_\_\_

Notes: \_\_\_\_\_

**ROUTING**

TITLE	DATE	INITIALS	CORRECTED?
Sample Manager:			
Login:			
Project Manager:			
Comments:			

Form SMO26

F42948: Chain of Custody  
Page 2 of 6



From: Origin ID: (407)425-6700  
Randy Shields  
Accutest Labs Southeast  
4406 Vineland Rd  
Suite C-7  
Orlando, FL 32811



Ship Date: 17AUG06  
ActWgt: 10 LB  
System#: 8226978/NET2500  
Account#: S \*\*\*\*\*

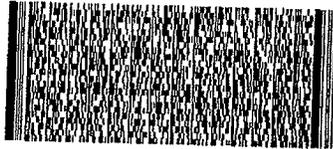
REF:



Delivery Address Bar Code

SHIP TO: (713)696-6327 BILL RECIPIENT

**Sample Management**  
Accutest Laboratories Gulf Coast  
10165 Harwin Drive  
Suite 150  
Houston, TX 77036



STANDARD OVERNIGHT

FRI

TRK# 7928 2619 0827

FORM 0201

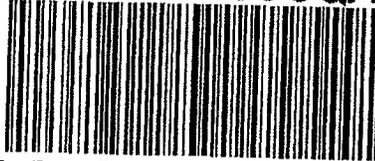
Deliver By:  
18AUG06

IAH

A2

77036 -TX-US

**XH JGQA**



10.1  
10







## GC Semi-volatiles

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## QC Data Summaries

(Accutest Laboratories Gulf Coast, Inc.)

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

## Method Blank Summary

Page 1 of 1

Job Number: F42948  
Account: ALSE Accutest Laboratories Southeast, Inc.  
Project: FSSIMDEC: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6273-MB	DD57968.D	1	08/23/06	RC	08/22/06	OP6273	GDD1099

The QC reported here applies to the following samples:

Method: SW846 8151

F42948-16A, F42948-17A, F42948-18A

CAS No.	Compound	Result	RL	MDL	Units	Q
94-75-7	2,4-D	ND	10	5.0	ug/l	
93-72-1	2,4,5-TP (Silvex)	ND	2.0	1.5	ug/l	

CAS No.	Surrogate Recoveries	Result	Limits
19719-28-9	2,4-DCAA	122%	23-171%

11.1  
11

## Blank Spike Summary

Page 1 of 1

Job Number: F42948  
Account: ALSE Accutest Laboratories Southeast, Inc.  
Project: FSSIMDEC: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6273-BS	DD57969.D	1	08/23/06	RC	08/22/06	OP6273	GDD1099

The QC reported here applies to the following samples:

Method: SW846 8151

F42948-16A, F42948-17A, F42948-18A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
94-75-7	2,4-D	20	25.5	128	44-152
93-72-1	2,4,5-TP (Silvex)	4	5.6	140	41-142

CAS No.	Surrogate Recoveries	BSP	Limits
19719-28-9	2,4-DCAA	144%	23-171%

11.2

11

**Matrix Spike/Matrix Spike Duplicate Summary**

Job Number: F42948  
 Account: ALSE Accutest Laboratories Southeast, Inc.  
 Project: FSSIMDEC: TO-17, MOD6: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6273-MS	DD57981.D	1	08/23/06	RC	08/22/06	OP6273	GDD1099
OP6273-MSD	DD57982.D	1	08/23/06	RC	08/22/06	OP6273	GDD1099
F42948-16A	DD57971.D	1	08/23/06	RC	08/22/06	OP6273	GDD1099

The QC reported here applies to the following samples:

Method: SW846 8151

F42948-16A, F42948-17A, F42948-18A

CAS No.	Compound	F42948-16A Spike ug/l	Q	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
94-75-7	2,4-D	ND	20	24.2	121	23.8	119	2	28-144/25
93-72-1	2,4,5-TP (Silvex)	ND	4	4.0	100	5.9	148*	38*	25-137/24

CAS No.	Surrogate Recoveries	MS	MSD	F42948-16A Limits	
19719-28-9	2,4-DCAA	141%	121%	124%	23-171%

11.3

11



## Metals Analysis

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### QC Data Summaries

(Accutest Laboratories Gulf Coast, Inc.)

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Includes the following where applicable:

- Method Blank Summaries
- Matrix Spike and Duplicate Summaries
- Blank Spike and Lab Control Sample Summaries
- Serial Dilution Summaries

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F42948  
Account: ALSE - Accutest Laboratories Southeast, Inc.  
Project: FSSIMDEC: TO-17, MOD6: Paradise Creek

QC Batch ID: MP5162  
Matrix Type: LEACHATE

Methods: SW846 6010B  
Units: mg/l

Prep Date: 08/29/06

Metal	RL	IDL	MB raw	final
Aluminum	0.20	.0042		
Antimony	0.20	.0026		
Arsenic	0.50	.0018	anr	
Barium	1.0	.0003	anr	
Beryllium	0.0050	.0001		
Boron	0.10	.0009		
Cadmium	0.0050	.0002	anr	
Calcium	5.0	.024		
Chromium	0.010	.0008	anr	
Cobalt	0.050	.0004		
Copper	0.025	.0027		
Iron	0.10	.012		
Lead	0.50	.0014	0.0033	<0.50
Magnesium	5.0	.003		
Manganese	0.015	.0012		
Molybdenum	0.0050	.0008		
Nickel	0.040	.0006		
Potassium	5.0			
Selenium	0.50	.0015	anr	
Silver	0.010	.0004	anr	
Sodium	5.0	.14		
Strontium	0.010			
Thallium	0.20	.0033		
Tin	0.010			
Titanium	0.010	.0038		
Vanadium	0.050	.0005		
Zinc	0.10	.0021		

Associated samples MP5162: F42948-7A, F42948-8A, F42948-9A, F42948-10A, F42948-11A, F42948-12A, F42948-13A, F42948-14A, F42948-15A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

12.1.1  
12

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42948  
 Account: ALSE - Accutest Laboratories Southeast, Inc.  
 Project: FSSIMDEC: TO-17, MOD6: Paradise Creek

QC Batch ID: MP5162  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 08/29/06 08/29/06

Metal	T14509-1 Original DUP	RPD	QC Limits	T14509-1 Original MS	Spikelot MPITCLP1 % Rec	QC Limits
-------	--------------------------	-----	--------------	-------------------------	----------------------------	--------------

Aluminum						
Antimony						
Arsenic	anr					
Barium	anr					
Beryllium						
Boron						
Cadmium	anr					
Calcium						
Chromium	anr					
Cobalt						
Copper						
Iron						
Lead	0.0046	0.0040	14.0	0-20	0.0046 2.1 2.0	104.8 75-125
Magnesium						
Manganese						
Molybdenum						
Nickel						
Potassium						
Selenium	anr					
Silver	anr					
Sodium						
Strontium						
Thallium						
Tin						
Titanium						
Vanadium						
Zinc						

Associated samples MP5162: F42948-7A, F42948-8A, F42948-9A, F42948-10A, F42948-11A, F42948-12A, F42948-13A, F42948-14A, F42948-15A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested

12.12 12

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42948  
 Account: ALSE - Accutest Laboratories Southeast, Inc.  
 Project: FSSIMDEC: TO-17, MOD6: Paradise Creek

QC Batch ID: MP5162  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 08/29/06

Metal	T14509-1 Original MSD	Spikelot MPITCLP1 % Rec	MSD RPD	QC Limit
-------	--------------------------	----------------------------	------------	-------------

Aluminum				
Antimony				
Arsenic	anr			
Barium	anr			
Beryllium				
Boron				
Cadmium	anr			
Calcium				
Chromium	anr			
Cobalt				
Copper				
Iron				
Lead	0.0046	2.0	2.0	99.8 4.9
Magnesium				
Manganese				
Molybdenum				
Nickel				
Potassium				
Selenium	anr			
Silver	anr			
Sodium				
Strontium				
Thallium				
Tin				
Titanium				
Vanadium				
Zinc				

Associated samples MP5162: F42948-7A, F42948-8A, F42948-9A, F42948-10A, F42948-11A, F42948-12A, F42948-13A, F42948-14A, F42948-15A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested

12.1.2  
 12

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F42948  
 Account: ALSE - Accutest Laboratories Southeast, Inc.  
 Project: FSSIMDEC: TO-17, MOD6: Paradise Creek

QC Batch ID: MP5162  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 08/29/06

Metal	BSP Result	Spikelot MPITCLP1 % Rec	QC Limits
-------	------------	-------------------------	-----------

Aluminum				
Antimony				
Arsenic	anr			
Barium	anr			
Beryllium				
Boron				
Cadmium	anr			
Calcium				
Chromium	anr			
Cobalt				
Copper				
Iron				
Lead	2.0	2.0	100.0	80-120
Magnesium				
Manganese				
Molybdenum				
Nickel				
Potassium				
Selenium	anr			
Silver	anr			
Sodium				
Strontium				
Thallium				
Tin				
Titanium				
Vanadium				
Zinc				

Associated samples MP5162: F42948-7A, F42948-8A, F42948-9A, F42948-10A, F42948-11A, F42948-12A, F42948-13A, F42948-14A, F42948-15A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

12.1.3  
 12

SERIAL DILUTION RESULTS SUMMARY

Login Number: F42948  
 Account: ALSE - Accutest Laboratories Southeast, Inc.  
 Project: FSSIMDEC: TO-17, MOD6: Paradise Creek

QC Batch ID: MP5162  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: ug/l

Prep Date: 08/29/06

Metal	T14509-1	QC
	Original SDL 1:5 RPD	Limits

Aluminum  
 Antimony  
 Arsenic anr  
 Barium anr  
 Beryllium  
 Boron  
 Cadmium anr  
 Calcium  
 Chromium anr  
 Cobalt  
 Copper  
 Iron  
 Lead 4.60 0.00 100.0 (a) 0-10  
 Magnesium  
 Manganese  
 Molybdenum  
 Nickel  
 Potassium  
 Selenium anr  
 Silver anr  
 Sodium  
 Strontium  
 Thallium  
 Tin  
 Titanium  
 Vanadium  
 Zinc

Associated samples MP5162: F42948-7A, F42948-8A, F42948-9A, F42948-10A, F42948-11A, F42948-12A, F42948-13A, F42948-14A, F42948-15A

Results < IDL are shown as zero for calculation purposes

(\*) Outside of QC limits

(anr) Analyte not requested

(a) Percent difference acceptable due to low initial sample concentration (< 50 times IDL).

12.1.4  
 12

# **GRID 10**

## **WASTE PACKAGE:**

### **INCLUDES:**

- **WM application**
- **SPSW form application**
- **Map**
- **Full TCLP results, grid 10 only**
- **Grid 10 TCLP results summary**
- **Additional Grid 10 sample results, TPH, Ph and TCLP – Pb only**

**WASTE  
MANAGEMENT  
APPLICATION.**

**SIGNATURE  
REQUIRED**



GENERATOR'S WASTE PROFILE SHEET
PLEASE PRINT IN INK OR TYPE

Service Agreement on File? [X] YES [ ] NO
[ ] Hazardous [X] Non-Hazardous [ ] TSCA

Profile Number: WMI
Renewal Date: / /

A. Waste Generator Information

1. Generator Name: Commander, Navy Region Mid-Atlantic (CNRMA)
2. SIC Code:
3. Facility Street Address: 1510 Gilbert St,
4. Phone: (757) 445-6703
5. Facility City: Norfolk
6. State/Province: VA
7. Zip/Postal Code: 23511-2737
8. Generator USEPA/Federal ID #: NOT APPLICABLE
9. County:
10. State/Province ID #: NOT APPLICABLE
11. Customer Name: Capital Environmental
12. Customer Phone: (804) 239-0968
13. Customer Contact: Matt Gemmel
14. Customer Fax: 804-798-3326
15. Billing Address [ ] Same as above

B. Waste Stream Information

1. Description
a. Name of Waste: Soil contaminated with Wood Debris
b. Process Generating Waste: Excavation

Table with 5 columns: c. Color (gray to black), d. Strong odor (describe): none, e. Physical state @ 70°F (Solid, Gas, Other), f. Layers (Single Layer, Multi-layer), g. Free liquid range (n/a to %), h. pH: Range (7.4 to 7.8)

i. Liquid Flash Point: [ ] <73°F [ ] 73-99°F [ ] 100-139°F [ ] 140-199°F [X] ≥ 200°F [ ] Not applicable
j. Chemical Composition (List all constituents [including halogenated organics, debris, and UHC's] present in any concentration and submit representative analysis):

Table with 4 columns: Constituents, Concentration Range, Constituents, Concentration Range. Row 1: See attached analytical

TOTAL COMPOSITION MUST EQUAL OR EXCEED 100%

Check all that apply:

k. [ ] Oxidizer [ ] Pyrophoric [ ] Explosive [ ] Radioactive
[ ] Carcinogen [ ] Infectious [ ] Shock Sensitive [ ] Water Reactive

l. Does the waste represented by this profile contain any of the carcinogens which require OSHA notification? (list in Section B.1.j) [ ] YES [X] NO
m. Does the waste represented by this profile contain dioxins? (list in Section B.1.j) [ ] YES [X] NO
n. Does the waste represented by this profile contain asbestos? [ ] YES [X] NO
If yes, [ ] friable [ ] non-friable
o. Does the waste represented by this profile contain benzene? [ ] YES [X] NO
If yes, concentration \_\_\_\_\_ ppm
Is the waste subject to the benzene waste operations NESHAP? [ ] YES [X] NO
p. Is the waste subject to RCRA Subpart CC controls? [ ] YES [X] NO
If yes, volatile organic concentration \_\_\_\_\_ ppmw
q. Does the waste contain any Class I or Class II ozone-depleting substances? [ ] YES [X] NO
r. Does the waste contain debris? (list in Section B.1.j) [X] YES [ ] NO

2. Quantity of Waste
Estimated Annual Volume ~1500 cy [ ] Tons [X] Yards [ ] Drums [ ] Other (specify)

3. Shipping Information
a. Packaging: [X] Bulk Solid; Type/Size: dump trucks [ ] Bulk Liquid; Type/Size:
[ ] Drum; Type; Size: [ ] Other:
b. Shipping Frequency: Units truck loads Per: [ ] Month [ ] Quarter [ ] Year [X] One time [ ] Other
c. Is this a U.S. Department of Transportation (USDOT) Hazardous Material? (If no, skip d, e, and f) [ ] YES [X] NO



GENERATOR'S WASTE PROFILE SHEET Profile Number: WMI  
PLEASE PRINT IN INK OR TYPE

d. Reportable Quantity (lbs.; kgs.): \_\_\_\_\_ e. Hazard Class/ID #: \_\_\_\_\_  
f. USDOT Shipping Name: \_\_\_\_\_  
g. Personal Protective Equipment Requirements: \_\_\_\_\_  
h. Transporter/Transfer Station: \_\_\_\_\_

**C. Generator's Certification** (Please check appropriate responses, sign and date below)

- 1. Is this a USEPA hazardous waste (40 CFR Part 261)? If the answer is no, skip to 2.  YES  NO
  - a. If yes, identify ALL USEPA listed and characteristic waste code numbers (D, F, K, P, U) \_\_\_\_\_
  - b. If a characteristic hazardous waste, do underlying hazardous constituents (UHCs) apply? (if yes, list in Section B.1.)  YES  NO
  - c. Does this waste contain dabs? (if yes, list size and type in Chemical Composition - B.1.)  YES  NO
- 2. Is this a state hazardous waste? Identify ALL state hazardous waste codes \_\_\_\_\_  YES  NO
- 3. Is the waste from a CERCLA (40 CFR 300, Appendix B) or state mandated clean-up? If yes, attach Record of Decision (ROD), 104/108 or 122 order or court order that governs site clean-up activity. For state mandated clean-up, provide relevant documentation.  YES  NO
- 4. Does the waste represented by this waste profile sheet contain radioactive material, or is disposal regulated by the Nuclear Regulatory Commission?  YES  NO
- 5. Does the waste represented by this waste profile sheet contain concentrations of Polychlorinated Biphenyls (PCBs) regulated by 40 CFR 761? (if yes, list in Chemical Composition - B.1.)  YES  NO
  - a. If yes, were the PCBs imported into the U.S.?  YES  NO
- 6. Do the waste profile sheet and all attachments contain true and accurate descriptions of the waste material, and has all relevant information within the possession of the Generator regarding known or suspected hazards pertaining to the waste been disclosed to the Contractor?  YES  NO
- 7. Will all changes which occur in the character of the waste be identified by the Generator and disclosed to the Contractor prior to providing the waste to the Contractor?  YES  NO

Check here if a Certificate of Destruction or Disposal is required.

Any sample submitted is representative as defined in 40 CFR 261 - Appendix I or by using an equivalent method. I authorize WMI to obtain a sample from any waste shipment for purposes of recertification. If this certification is made by a broker, the undersigned signs as authorized agent of the generator and has confirmed the information contained in this Profile Sheet from information provided by the generator and additional information as it has determined to be reasonably necessary. If approved for management, Contractor has all the necessary permits and licenses for the waste that has been characterized and identified by this approved profile.

Certification Signature: Robert A. Schuman Title: PR Product Line Coordinator  
Name (Type or Print): Robert A. Schuman Company Name: NAVY Date: 8/1/06  
 Check if additional information is attached. Indicate the number of attached pages \_\_\_\_\_

**D. WMI Management's Decision** FOR WMI USE ONLY

1. Management Method  Landfill  Non-hazardous Solidification  Bioremediation  Incineration  
 Hazardous Stabilization  Other (Specify) \_\_\_\_\_

2. Proposed Ultimate Management Facility: \_\_\_\_\_

3. Precautions, Special Handling Procedures, or Limitation on Approval: \_\_\_\_\_

---

Special Waste Decision: \_\_\_\_\_  Approved  Disapproved  
Salesperson's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Division Approval Signature (Optional): \_\_\_\_\_ Date: \_\_\_\_\_  
Special Waste Approvals Person Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# GENERATOR'S WASTE PROFILE SHEET

PLEASE PRINT IN INK OR TYPE

## Instructions

Information on this form is used to determine if the waste may be transported, treated, stored or disposed in a legal, safe, and environmentally sound manner. This information will be maintained in strict confidence. Answers must be provided for sections A, B, and C and must be printed in ink or typed. A response of "NONE" or "NA" (not applicable) can be made if appropriate. If additional space is needed, indicate on the form that additional information is attached, and attach the information to Generator's Waste Profile Sheet. If you have questions concerning this form, please contact the Contractor's sales representative.

### A. Waste Generator Information

1. **Generator Name** - Enter the name of the facility where the waste is generated.
2. **SIC Code** - Enter the four digit Standard Industrial Classification Code for the facility where the waste is generated.
3. **Facility Street Address** - Enter the street address (not P.O. Box) of the facility where the waste is generated.
4. **Phone** - Enter Generator's area code and phone number.
5. **Facility City** - Enter the city where the waste is generated.
6. **State/Province** - Enter the state or province where the waste is generated.
7. **Zip/Postal Code** - Enter the generating facility's zip or postal code.
8. **Generator USEPA/Federal ID #** - Enter the identification number issued by the USEPA, Canadian, or Mexican Federal Agency to the facility generating the waste (if applicable).
9. **County** - Enter the county where the waste is generated.
10. **State/Province ID #** - Enter the identification number issued by the state or province to the facility generating the waste (if applicable).
11. **Customer Name** - Entity that the Contractor is directly working with regarding the represented waste stream. If the same as the Generator, mark "Same as Above".
12. **Customer Phone** - Enter technical contact's area code and telephone number.
13. **Customer Contact** - Enter the name of the person who can answer technical questions about the waste.
14. **Customer Fax** - Area code and facsimile number for the customer.
15. **Billing Address** - Address where bill for services should be sent.

### B. Waste Stream Information

- 1.a. **Name of Waste** - Enter a name generally descriptive of this waste (e.g., paint sludge, fluorescent bulbs).
- 1.b. **Process Generating Waste** - Describe the process generating the waste in detail. List the specific process/operation or source that generates the waste (e.g., incineration of municipal refuse, asbestos removal, wastewater treatment, building maintenance).  
At a minimum, the Generator should answer the following questions in determining the process generating the waste.
  - What chemicals are stored and/or used at the facility?
  - Is the waste generated from the production/manufacturing of any of the following industries: wood preservation; inorganic pigments; organic pigments; pesticides; explosives; petroleum refining; iron and steel, copper, lead or zinc production?
  - Is the waste a result from degreasing, solvent parts cleaning, recovery/reclaiming of solvents (bottoms), wastewater treatment (sludges), or electroplating?
- 1.c. **Color** - Describe the color of the waste (e.g., blue, transparent, varies).
- 1.d. **Strong odor** - DO NOT SMELL THE WASTE! If the waste has a known odor, then describe (e.g., acrid, pungent, solvent, sweet).
- 1.e. **Physical state @ 70°F** - If the four boxes provided do not apply, a descriptive phrase may be entered after "Other" (e.g., multi-phase).
- 1.f. **Layers** - Single Layer means the waste is homogenous. Multi-layer means the waste is comprised of two or more layers (e.g., oil/water/sludge).
- 1.g. **Free liquid range** - Range (in percent by volume) of free liquids in the waste.
- 1.h. **pH Range** - Indicate the pH range.
- 1.i. **Liquid Flash Point** - Indicate the flash point obtained using the appropriate test method.
- 1.j. **Chemical Composition** - List all organic and/or inorganic components of the waste using chemical names. If trade names are used, attach Material Safety Data Sheets or other documents that adequately describe the composition of the waste. For each component, estimate the range (in percent) in which the component is present.
- 1.k. Check all that apply.
  - 1.l. Identify any element, chemical compound, or mixture in concentration of 0.1 percent or greater that is considered a carcinogen or potential carcinogen pursuant to OSHA.
  - 1.m. Indicate if the waste contains any dioxins (list in Section B.1.j).
  - 1.n. Indicate if the waste contains asbestos. Indicate if the asbestos is friable.
  - 1.o. Indicate if the waste contains benzene, the level in ppm, and whether it is subject to the benzene NESHAP.
  - 1.p. Indicate if the waste is subject to RCRA Subpart CC control. In addition, indicate the volatile organic concentration, if known, in parts per million weight.
  - 1.q. Indicate if the waste contains any Class I or Class II ozone-depleting controlled substances.
  - 1.r. Indicate if the waste contains debris (list size and type in B.1.j).
2. **Quantity of Waste** - Approximate volume in tons, yards, or other (e.g., drums, gallons) that will be received by the ultimate management facility. This volume amount is not intended for use in complying with state and/or permit restrictions.
- 3.a. **Packaging** - Choose the appropriate option or "other" along with a description.
- 3.b. **Shipping Frequency** - Choose the appropriate option or "other" along with a description.
- 3.c. **Is this a U.S. Department of Transportation (USDOT) hazardous material?** - Choose the appropriate response: yes or no.
- 3.d. **Reportable Quantity (lbs.; kgs.)** - If the answer to 3.c. is yes, enter the Reportable Quantity (RQ) established by 40 CFR 302.4 or equivalent Canadian or Mexican regulation for this waste. Indicate the appropriate units for the RQ.
- 3.e. **Hazard Class/ID #** - If the answer to 3.c. is yes, indicate the proper USDOT hazard class and identification number.
- 3.f. **USDOT Shipping Name** - IF the answer to 3.c. is yes, enter the proper USDOT shipping name for the waste.
- 3.g. **Personal Protective Equipment Requirements** - All personal protective equipment necessary to safely manage the waste stream.
- 3.h. **Transporter/Transfer Station** - Transporter and/or transfer station name.



**GENERATOR'S WASTE PROFILE SHEET**  
PLEASE PRINT IN INK OR TYPE

**C. Generator's Certification** (Please check appropriate responses, sign, and date below.)

Indicate the appropriate response to questions/statements 1, 2, 3, 4, 5, 6, and 7. By signing this Generator's Waste Profile Sheet, the Generator certifies the responses are true and accurate with respect to the waste stream(s) listed.

**Certification Signature** - Signature of an authorized employee of the Generator or representative of the generator if authorized in writing by the generator.

**Title** - Enter Employee's title.

**Name** - Type or Print Employee's name.

**Company Name** - Company employing the person certifying the Generator's Waste Profile Sheet.

**Date** - Enter the date this Generator's Waste Profile Sheet is signed.

**D. WMI Management's Decision**

**FOR WMI USE ONLY**

To be completed by WMI.

SPSW

Form .

SIGNATURE  
REQUIRED

**Form SPSW-2**  
**SPECIAL WASTE DISPOSAL REQUEST**  
**GENERATOR INFORMATION**

Section I. Generator Identification:

a. Generator Name: Commander, Navy Region Mid-Atlantic

b. Generator Address: 1510 Gilbert St, Norfolk VA, 23511-2737

-----  
-----

c. Generator Phone: (757)445-6703 Tim Reisch (757) 444-6890

Section II. General Waste Profile:

Note: It is the duty of all persons to dispose of their solid waste in a legal manner (Va.Code ' 10.1-1418.1.A). In addition, any person who generates a solid waste shall determine if that waste is a hazardous waste (' 6.1 of the Virginia Hazardous Waste Management Regulations (VR 672-10-1) ("VHWMR")).

a. General description of waste, including its state (e.g., solid liquid, semi-solid, gas):

Solid material that includes Soil and debris (concrete and wood) consistent with construction debris. -----

-----

b. Amount of materials proposed for disposal:

Volume or Weight approximately 1,500

Units cubic yards

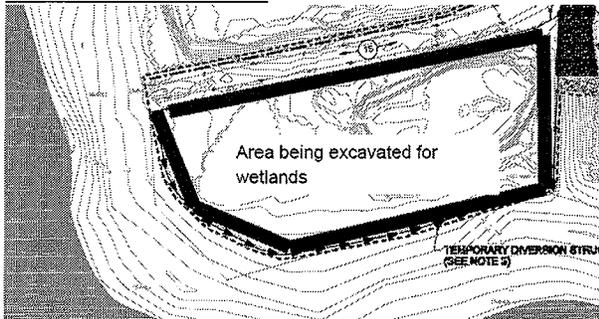
- c. Activities or processes from which the waste was generated, including process flow diagrams specifically addressing the waste stream(s), a description of the source of the waste, and a statement of whether the waste was formerly managed as a hazardous waste.

This waste material is being generated as a result of the excavation for construction of an engineered wetlands. The material was deposited originally as fill material adjacent to the toe of a former landfill operated by Norfolk Naval Shipyard (NNSY). On top of the fill a calcium hydroxide berm impoundment was built. That impoundment has been removed. The remaining fill material dimensional lumber, (wood debris) and soil mix needs to be removed to accommodate the construction of an engineered landfill.

NOTE: Attach a flow diagram and indicate any deletions due to proprietary or trade secret information. The Department cannot protect proprietary information or trade secrets.

- d. Location of generation:

The removal site is located between Paradise Creek on the southern boundary, and the northern boundary is the NNSY former Eastern Area Landfill and the Western Area Landfill. The area being excavated is on a bend in Paradise Creek : Attached map shows GRID 10 AREA SPECIFICALLY



- e. Method of transportation:

Describe the manner in which the material is being transported for disposal (e.g., bulk containers):

Bulk shipment via Dump Trucks

## f. Testing results

PARAMETER	ANALYZED (METHOD)	NOT ANALYZED (REASON)	RESULTS INCLUDED
Corrosivity	SW 846, Chapter 7	N/a	See attached analysis
Ignitability	SW 846 1010	N/a	See attached analysis
TCLP (a - e) only			
a. Metals	See attached table	N/a	See attached analysis
b. Volatile Organics	See attached table	N/a	See attached analysis
c. Semi-Volatile Organics	See attached table	N/a	See attached analysis
d. Pesticides	See attached table	N/a	See attached analysis
e. Herbicides	See attached table	N/a	See attached analysis
Total Metals		TCLP	N
Volatile Organics		TCLP	N
Semi-Volatile Organics		TCLP	N
Pesticides		TCLP	N
Herbicides		TCLP	N
PCB's	SW846 8082	N/a	See attached analysis
Paint Filter Test		To be performed during removal action	N
Radioactive Waste		Previous investigation, site history	N
Asbestos		Previous investigation, site history	N
Percent Solids	EPA 160.3		w/ TCLP results
TOX		Previous investigation, site history	N
TPH <sup>1</sup>	SW 846 8015M	N/a	See attached analysis

g. Sample location map included: Yes (xx) No ( )

1

TPH DRO samples are to be taken during removal prior to disposal for meeting disposal facility criteria at the frequency of 1 per 500 cubic yards material.

Form SPSW-2  
Page 4 of 4

Section III. Generator Certification:

I hereby certify, based upon my diligent inquiry into the activities, materials, and processes generating the materials described on this form:

1. That these materials are not classified as listed or characteristic hazardous waste governed by the Commonwealth of Virginia or the state of origin of this waste;
2. That the materials are not regulated medical waste governed by the Virginia Regulated Medical Waste Management Regulations (VR 672-40-01);
3. That the materials do not contain 50.0 parts per million or more of polychlorinated biphenyls (PCB's);
4. That the materials do not contain more than 1.0 part per billion of dioxins;  
*THERE IS NO REASON TO EXPECT PRESENCE OF DIOXINS*
5. That the material is not a radioactive waste or possess the property of radioactivity;
6. That the materials are not prohibited or restricted from disposal in a Virginia solid waste management facility; and
7. That the analytical results, completed application and attached documentation submitted in support of this special waste disposal request are a representative, true, and accurate description of these materials.

Print Name: KHOA NGUYEN

Title: WASTE PROGRAM MANAGER

Signature: *Khoa Nguyen* Date: 1 Aug 2006

Notary Statement  
Given under my hand this 15<sup>th</sup> day of AUGUST, 2006.  
City/County of Virginia Norfolk  
Commonwealth of Virginia

Grace M. Paul My commission expires: November 30, 2007  
Notary Public *(I was commissioned a notary as Grace M. Quintana) jms.*



MAP -

GRID 10 LOCATION



Full

TCLP

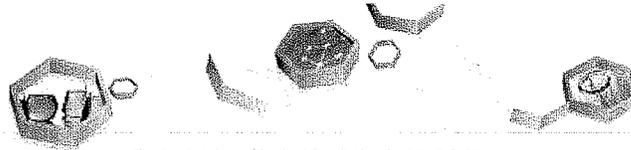
RESULTS

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GRID 10

ONLY

---



IT'S ALL IN THE CHEMISTRY

06/30/06

**Technical Report for**

ANALYSIS WITHIN THIS REPORT FOR THIS WASTE APPLICATION, SAMPLES FROM GRID 10 ONLY APPLY.

**Shaw E & I, Inc.**

Paradise Creek

116539

Accutest Job Number: F41620

Sampling Date: 06/20/06



Report to:

Shaw E & I, Inc.

natasha.sullivan@shawgrp.com

ATTN: Natasha Sullivan

Total number of pages in report: 112



Test results contained within this data package meet the requirements of the National Environmental Laboratory Accreditation Conference and/or state specific certification programs as applicable.

*Harry Behzadi*  
Harry Behzadi, Ph.D.  
Laboratory Director

Certifications: FL (DOH E83510), NC (573), NJ (FL002), MA (FL946), IA (366), LA (03051), KS (E-10327), SC, AK  
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## Sample Summary

Shaw E & I, Inc.

Job No: F41620

Paradise Creek  
Project No: 116539

Sample Number	Collected Date	Time By	Received	Matrix Code	Type	Client Sample ID
F41620-1	06/20/06	10:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID04
F41620-1A	06/20/06	10:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID04
F41620-2	06/20/06	15:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID05
F41620-2A	06/20/06	15:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID05
F41620-3	06/20/06	16:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID06
F41620-3A	06/20/06	16:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID06
F41620-4	06/20/06	11:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID10
F41620-4A	06/20/06	11:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID10
F41620-5	06/20/06	13:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID11
F41620-5A	06/20/06	13:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID11
F41620-6	06/20/06	14:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID12
F41620-6A	06/20/06	14:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID12

---

Soil samples reported on a dry weight basis unless otherwise indicated on result page.



IT'S ALL IN THE CHEMISTRY

## Sample Results

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## Report of Analysis

---

## Report of Analysis

2.7  
2

Client Sample ID: PC-TP-116539-GRID10	Date Sampled: 06/20/06
Lab Sample ID: F41620-4	Date Received: 06/22/06
Matrix: SO - Soil	Percent Solids: 69.3
Method: SW846 8015	
Project: Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	UV022704.D	1	06/23/06	MM	n/a	n/a	GUV1317
Run #2							

Run #	Initial Weight	Final Volume	Methanol Aliquot
Run #1	5.84 g	5.0 ml	100 ul
Run #2			

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	12.1	8.4	4.2	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
460-00-4	4-Bromofluorobenzene	118% <sup>b</sup>		62-135%
460-00-4	4-Bromofluorobenzene	151% <sup>c</sup>		62-135%
98-08-8	aaa-Trifluorotoluene	91%		65-118%

- (a) Sample was received in a bulk container but was not preserved within 48 hours of sampling.
- (b) Result reported from PID.
- (c) Outside control limits due to matrix interference.

---

ND = Not detected	MDL - Method Detection Limit	J = Indicates an estimated value
RL = Reporting Limit		B = Indicates analyte found in associated method blank
E = Indicates value exceeds calibration range		N = Indicates presumptive evidence of a compound

Report of Analysis

2.7  
2

Client Sample ID: PC-TP-116539-GRID10	Date Sampled: 06/20/06
Lab Sample ID: F41620-4	Date Received: 06/22/06
Matrix: SO - Soil	Percent Solids: 69.3
Method: SW846 8082 SW846 3550B	
Project: Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	ST48647.D	10	06/28/06	ME	06/26/06	OP17013	GST1419
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.1 g	10.0 ml
Run #2		

PCB List

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	240	120	ug/kg	
11104-28-2	Aroclor 1221	ND	240	190	ug/kg	
11141-16-5	Aroclor 1232	ND	240	190	ug/kg	
53469-21-9	Aroclor 1242	ND	240	120	ug/kg	
12672-29-6	Aroclor 1248	ND	240	120	ug/kg	
11097-69-1	Aroclor 1254	ND	240	240	ug/kg	
11096-82-5	Aroclor 1260 <sup>b</sup>	1980	240	120	ug/kg	J
11100-14-4	Aroclor 1268 <sup>b</sup>	311	240	120	ug/kg	J
	Total PCBs	2290	480		ug/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	96%		52-136%
2051-24-3	Decachlorobiphenyl	168% <sup>c</sup>		49-148%

- (a) All hits confirmed by dual column analysis.
- (b) Estimated value due to the presence of multiple overlapping Aroclor patterns.
- (c) Outside control limits due to dilution.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Report of Analysis

Client Sample ID: PC-TP-116539-GRID10	Date Sampled: 06/20/06
Lab Sample ID: F41620-4	Date Received: 06/22/06
Matrix: SO - Soil	Percent Solids: 69.3
Method: SW846 8015 M SW846 3550B	
Project: Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	LL11101.D	4	06/29/06	VS	06/27/06	OP17034	GLL410
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.3 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28) <sup>a</sup>	73.5	48	29	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	78%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Report of Analysis

2.7  
2

Client Sample ID: PC-TP-116539-GRID10  
 Lab Sample ID: F41620-4  
 Matrix: SO - Soil  
 Project: Paradise Creek

Date Sampled: 06/20/06  
 Date Received: 06/22/06  
 Percent Solids: 69.3

### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Corrosivity as pH	7.4			1	06/23/06	CP	SW846 CHAP7
Cyanide Reactivity	< 2.2	2.2	mg/kg	1	06/29/06	SJL	SW846 CHAP7
Ignitability (Flashpoint) <sup>a</sup>	> 200		Deg. F	1	06/23/06	CP	SW846 1010
Solids, Percent	69.3		%	1	06/22/06	CP	EPA 160.3 M
Sulfide Reactivity	< 50	50	mg/kg	1	06/29/06	SJL	SW846 CHAP7

(a) Not ignitable

RL = Reporting Limit

## Report of Analysis

Client Sample ID: PC-TP-116539-GRID10	Date Sampled: 06/20/06
Lab Sample ID: F41620-4A	Date Received: 06/22/06
Matrix: SO - Soil	Percent Solids: 69.3
Method: SW846 8260B SW846 1311	
Project: Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	C0041834.D	10	06/29/06	KW	06/27/06	OP17038	VC1691
Run #2							

Run #	Purge Volume
Run #1	5.0 ml
Run #2	

**VOA TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
71-43-2	Benzene	ND	D018	0.50	0.010	0.0050	mg/l	
108-90-7	Chlorobenzene	ND	D021	100	0.020	0.0050	mg/l	
67-66-3	Chloroform	ND	D022	6.0	0.020	0.0050	mg/l	
56-23-5	Carbon tetrachloride	ND	D019	0.50	0.020	0.0050	mg/l	
75-35-4	1,1-Dichloroethylene	ND	D029	0.70	0.020	0.0050	mg/l	
107-06-2	1,2-Dichloroethane	ND	D028	0.50	0.020	0.0050	mg/l	
106-46-7	p-Dichlorobenzene	ND	D027	7.5	0.020	0.0050	mg/l	
78-93-3	Methyl ethyl ketone	ND	D035	200	0.10	0.025	mg/l	
127-18-4	Tetrachloroethylene	ND	D039	0.70	0.020	0.0050	mg/l	
79-01-6	Trichloroethylene	ND	D040	0.50	0.020	0.0050	mg/l	
75-01-4	Vinyl chloride	ND	D043	0.20	0.010	0.0050	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	106%		86-115%
2037-26-5	Toluene-D8	99%		86-112%
460-00-4	4-Bromofluorobenzene	103%		83-119%
17060-07-0	1,2-Dichloroethane-D4	103%		73-126%

ND = Not detected      MDL - Method Detection Limit      J = Indicates an estimated value  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

Report of Analysis

2.8  
2

Client Sample ID:	PC-TP-116539-GRID10	
Lab Sample ID:	F41620-4A	Date Sampled: 06/20/06
Matrix:	SO - Soil	Date Received: 06/22/06
Method:	SW846 8270C SW846 3510C	Percent Solids: 69.3
Project:	Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	L032384.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	1.0 ml
Run #2		

ABN TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	D023	200	0.050	0.020	mg/l	
	3&4-Methylphenol	ND	D024	200	0.050	0.020	mg/l	
87-86-5	Pentachlorophenol	ND	D037	100	0.25	0.10	mg/l	
95-95-4	2,4,5-Trichlorophenol	ND	D041	400	0.050	0.020	mg/l	
88-06-2	2,4,6-Trichlorophenol	ND	D042	2.0	0.050	0.020	mg/l	
106-46-7	1,4-Dichlorobenzene	ND	D027	7.5	0.050	0.010	mg/l	
121-14-2	2,4-Dinitrotoluene	ND	D030	0.13	0.050	0.020	mg/l	
118-74-1	Hexachlorobenzene	ND	D032	0.13	0.050	0.010	mg/l	
87-68-3	Hexachlorobutadiene	ND	D033	0.50	0.050	0.020	mg/l	
67-72-1	Hexachloroethane	ND	D034	3.0	0.050	0.020	mg/l	
98-95-3	Nitrobenzene	ND	D036	2.0	0.050	0.010	mg/l	
110-86-1	Pyridine	ND	D038	5.0	0.10	0.030	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
367-12-4	2-Fluorophenol	41%		19-90%
4165-62-2	Phenol-d5	25%		10-68%
118-79-6	2,4,6-Tribromophenol	90%		36-137%
4165-60-0	Nitrobenzene-d5	80%		49-119%
321-60-8	2-Fluorobiphenyl	85%		45-118%
1718-51-0	Terphenyl-d14	83%		46-135%

ND = Not detected MDL - Method Detection Limit  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

Client Sample ID: PC-TP-116539-GRID10	Date Sampled: 06/20/06
Lab Sample ID: F41620-4A	Date Received: 06/22/06
Matrix: SO - Soil	Percent Solids: 69.3
Method: SW846 8081A SW846 3510C	
Project: Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	TT00801.D	1	06/29/06	AA	06/28/06	OP17053	GTT35
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

Pesticide TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	D013	0.40	0.00050	0.00020	mg/l	
12789-03-6	Chlordane	ND	D020	0.030	0.0050	0.0025	mg/l	
72-20-8	Endrin	ND	D012	0.020	0.0010	0.00040	mg/l	
76-44-8	Heptachlor	ND	D031	0.0080	0.00050	0.00020	mg/l	
1024-57-3	Heptachlor epoxide	ND	D031	0.0080	0.00050	0.00020	mg/l	
72-43-5	Methoxychlor	ND	D014	10	0.0010	0.00040	mg/l	
8001-35-2	Toxaphene	ND	D015	0.50	0.025	0.015	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	99%		60-138%
2051-24-3	Decachlorobiphenyl	97%		31-148%

ND = Not detected      MDL - Method Detection Limit      J = Indicates an estimated value  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

## Report of Analysis



Client Sample ID: PC-TP-116539-GRID10 Lab Sample ID: F41620-4A Matrix: SO - Soil Method: SW846 8151 SW846 1311 Project: Paradise Creek	Date Sampled: 06/20/06 Date Received: 06/22/06 Percent Solids: 69.3
--	---

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	DD57053.D	1	06/29/06	ATX	06/28/06	T:OP6063	T:GDD1067
Run #2							

	Initial Volume	Final Volume
Run #1	1000 ml	10.0 ml
Run #2		

**Herbicide TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
94-75-7	2,4-D	ND	D016	10	0.0015	0.0011	mg/l	
93-72-1	2,4,5-TP (Silvex)	ND	D017	1.0	0.00020	0.000060	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
19719-28-9	2,4-DCAA	136%		23-171%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

---

ND = Not detected MCL = Maximum Contamination Level (40 CFR 261 6/96) E = Indicates value exceeds calibration range	MDL - Method Detection Limit B = Indicates analyte found in associated method blank N = Indicates presumptive evidence of a compound	J = Indicates an estimated value
---	--	----------------------------------

Report of Analysis

Client Sample ID: PC-TP-116539-GRID10	Date Sampled: 06/20/06
Lab Sample ID: F41620-4A	Date Received: 06/22/06
Matrix: SO - Soil	Percent Solids: 69.3
Project: Paradise Creek	

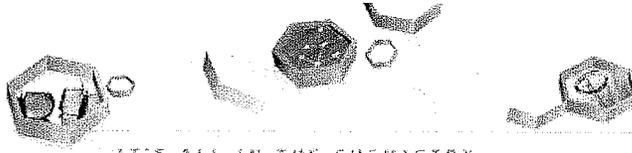
Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Arsenic <sup>a</sup>	0.0056 U	D004	5.0	0.020	0.0056	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>
Barium	1.7	D005	100	1.0	0.20	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>
Cadmium	0.028	D006	1.0	0.0050	0.00030	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>
Chromium	0.0090 B	D007	5.0	0.010	0.00060	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>
Lead	0.36	D008	5.0	0.050	0.0017	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>
Mercury	0.0010 U	D009	0.20	0.010	0.0010	mg/l	1	06/27/06	06/27/06	MS SW846 7470A <sup>1</sup>
Selenium <sup>b</sup>	0.040 U	D010	1.0	0.10	0.040	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>
Silver	0.00090 U	D011	5.0	0.010	0.00090	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>

- (1) Instrument QC Batch: MA5055
- (2) Instrument QC Batch: MA5056
- (3) Prep QC Batch: MP9826
- (4) Prep QC Batch: MP9828

- (a) Elevated RL/MDL due to negative bias of Method Blank.
- (b) Elevated RL/MDL due to positive bias of Method Blank.

RL = Reporting Limit MDL = Method Detection Limit U = Indicates a result < MDL  
 MCL = Maximum Contamination Level (40 CFR 261 6/96) B = Indicates a result > = MDL but < RL



## Misc. Forms

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## Custody Documents and Other Forms

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Includes the following where applicable:

- Chain of Custody

# F41620

**CHAIN-OF-CUSTODY RECORD**

COC Number: 116539-6.20.06  
 Purchase Order Number:

The Shaw Group Inc.

**SHAW Environmental & Infrastructure, INC. - 5700 Thurston Ave Suite 116B - Virginia Beach, VA 23455 - (757) 363-7190**

Lab Destination <b>Accutest</b>		Lab Reference No. <b>4406 Vineland Road Suite C-1, Orlando FL 32811 (407)425-8700</b>		Analysis Desired															
Project Name <b>Paradise Creek</b>		Sample Use <b>Disposal Samples</b>																	
Project Number <b>116539</b>		Project Manager <b>Natasha Kelley Sullivan</b>		Project Phone <b>(410)529-7598</b>															
Client Ref <b>Shaw</b>		Project Manager <b>Taylor Sword</b>																	
Item No.	Sample Location	Date	Time	Latitude	Longitude	Sample Description	Number of Containers	Full TCLP + RCRI SW-846	PCBs SW-846 9062	TPH DROUGRO SW-846 B015H									
①	PC-TP-116539-GRID04	06/20/06	1000			Hard Pan/Wood Debris Soil	3 x 8 ounces, 2 x 4 ounce soil jar	X	X	X									
②	PC-TP-116539-GRID05	06/20/06	1500			Hard Pan/Wood Debris Soil	3 x 8 ounces, 2 x 4 ounce soil jar	X	X	X									
③	PC-TP-116539-GRID08	06/20/06	1600			Hard Pan/Wood Debris Soil	3 x 8 ounces, 2 x 4 ounce soil jar	X	X	X									
④	PC-TP-116539-GRID10	06/20/06	1100			Hard Pan/Wood Debris Soil	3 x 8 ounces, 2 x 4 ounce soil jar	X	X	X									
⑤	PC-TP-116539-GRID11	06/20/06	1300			Hard Pan/Wood Debris Soil	3 x 8 ounces, 2 x 4 ounce soil jar	X	X	X									
⑥	PC-TP-116539-GRID12	06/20/06	1400			Hard Pan/Wood Debris Soil	3 x 8 ounces, 2 x 4 ounce soil jar	X	X	X									
7																			
8																			
9																			
10																			

Turnaround Time Required: <b>7 Day TAT</b>	Sampled By: <b>Brooke Mourain, SHAW</b>	Comments	Laboratory Report No.
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Transfer Number	Transferred By	Date	Time	Transfers Accepted By	Date	Time	Remarks
1	<i>Brooke Mourain</i>	06/21/2006	1500	<i>FX</i>			Summary Package Deliverables: EDD Excel *** FAX results to Natasha Sullivan (410) 529-7599
2	<i>FX</i>			<i>Jorge Corral</i>	6/22/06	19:00	
3							
4							

2.4

**ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION**

ACCUTEST'S JOB NUMBER: F41620

CLIENT: SHAW

PROJECT: Paradise Creek

DATE/TIME RECEIVED: 6/22/06 19:00

# OF COOLERS RECEIVED: 1 COOLER TEMPS: 2.4

METHOD OF DELIVERY: FEDEX UPS

ACCUTEST COURIER  GREYHOUND  DELIVERY  OTHER

AIRBILL NUMBERS: 857487398402

**COOLER INFORMATION**

- CUSTODY SEAL NOT PRESENT OR NOT INTACT
- CHAIN OF CUSTODY NOT RECEIVED (COC)
- ANALYSIS REQUESTED IS UNCLEAR OR MISSING
- SAMPLE DATES OR TIMES UNCLEAR OR MISSING
- TEMPERATURE CRITERIA NOT MET

**TRIP BLANK INFORMATION**

- TRIP BLANK NOT PROVIDED
- TRIP BLANK NOT ON COC
- TRIP BLANK INTACT
- TRIP BLANK NOT INTACT
- RECEIVED WATER TRIP BLANK
- RECEIVED SOIL TRIP BLANK

**MISC. INFORMATION**

- NUMBER OF ENCORES? 0
- NUMBER OF 5035 FIELD KITS? 0
- NUMBER OR LAB FILTERED METALS? 0

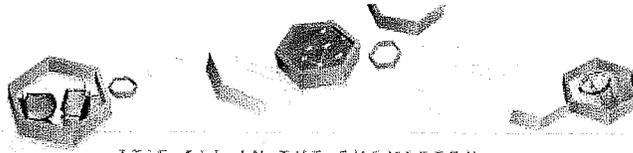
SUMMARY OF COMMENTS: No date + time on soil jars

**SAMPLE INFORMATION**

- SAMPLE LABELS PRESENT ON ALL BOTTLES
- CORRECT NUMBER OF CONTAINERS USED
- SAMPLE RECEIVED IMPROPERLY PRESERVED
- INSUFFICIENT VOLUME FOR ANALYSIS
- TIMES ON COC DON'T MATCH LABEL
- ID'S ON COC DON'T MATCH LABEL
- VOC VIALS HAVE HEADSPACE (MACRO BUBBLES)
- BOTTLES RECEIVED BUT ANALYSIS NOT REQUESTED
- NO BOTTLES RECEIVED FOR ANALYSIS REQUESTED
- UNCLEAR FILTERING INSTRUCTIONS
- UNCLEAR COMPOSITING INSTRUCTIONS
- SAMPLE CONTAINER(S) RECEIVED BROKEN
- % SOLIDS JAR NOT RECEIVED
- 5035 FIELD KIT FROZEN WITHIN 48 HOURS

F41620: Chain of Custody

Page 2 of 2



## GC/MS Volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Leachate Blank Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17038-LB	C0041830.D	10	06/29/06	KW	06/27/06	OP17038	VC1691

4.1  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Result	RL	MDL	Units	Q
71-43-2	Benzene	ND	10	5.0	ug/l	
108-90-7	Chlorobenzene	ND	20	5.0	ug/l	
67-66-3	Chloroform	ND	20	5.0	ug/l	
56-23-5	Carbon tetrachloride	ND	20	5.0	ug/l	
75-35-4	1,1-Dichloroethylene	ND	20	5.0	ug/l	
107-06-2	1,2-Dichloroethane	ND	20	5.0	ug/l	
106-46-7	p-Dichlorobenzene	ND	20	5.0	ug/l	
78-93-3	Methyl ethyl ketone	ND	100	25	ug/l	
127-18-4	Tetrachloroethylene	ND	20	5.0	ug/l	
79-01-6	Trichloroethylene	ND	20	5.0	ug/l	
75-01-4	Vinyl chloride	ND	10	5.0	ug/l	

CAS No.	Surrogate Recoveries	Limits
1868-53-7	Dibromofluoromethane	108% 86-115%
17060-07-0	1,2-Dichloroethane-D4	105% 73-126%
2037-26-5	Toluene-D8	99% 86-112%
460-00-4	4-Bromofluorobenzene	105% 83-119%

# Blank Spike Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VC1691-BS	C0041829.D	10	06/29/06	KW	n/a	n/a	VC1691

4.2  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
71-43-2	Benzene	250	279	112	80-120
108-90-7	Chlorobenzene	250	250	100	82-112
67-66-3	Chloroform	250	273	109	78-118
56-23-5	Carbon tetrachloride	250	262	105	69-137
75-35-4	1,1-Dichloroethylene	250	269	108	67-134
107-06-2	1,2-Dichloroethane	250	262	105	68-121
106-46-7	p-Dichlorobenzene	250	252	101	77-113
78-93-3	Methyl ethyl ketone	1250	1100	88	58-127
127-18-4	Tetrachloroethylene	250	273	109	75-126
79-01-6	Trichloroethylene	250	277	111	80-115
75-01-4	Vinyl chloride	250	267	107	70-151

CAS No.	Surrogate Recoveries	BSP	Limits
1868-53-7	Dibromofluoromethane	105%	86-115%
17060-07-0	1,2-Dichloroethane-D4	107%	73-126%
2037-26-5	Toluene-D8	98%	86-112%
460-00-4	4-Bromofluorobenzene	101%	83-119%

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
(a) F41620-1AMS	C0041838.D	10	06/29/06	KW	n/a	n/a	VC1691
(a) F41620-1AMSD	C0041839.D	10	06/29/06	KW	n/a	n/a	VC1691
F41620-1A	C0041831.D	10	06/29/06	KW	06/27/06	OP17038	VC1691

The QC reported here applies to the following samples:

Method: SW846 8260B

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-1A ug/l	Spike Q	ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
71-43-2	Benzene	ND	250	274	110	262	105	4	72-125/7	
108-90-7	Chlorobenzene	ND	250	241	96	236	94	2	79-113/7	
67-66-3	Chloroform	ND	250	263	105	258	103	2	75-120/8	
56-23-5	Carbon tetrachloride	ND	250	247	99	252	101	2	56-145/12	
75-35-4	1,1-Dichloroethylene	ND	250	250	100	251	100	0	61-137/15	
107-06-2	1,2-Dichloroethane	ND	250	257	103	259	104	1	64-124/7	
106-46-7	p-Dichlorobenzene	ND	250	230	92	228	91	1	74-112/7	
78-93-3	Methyl ethyl ketone	ND	1250	1200	96	1210	97	1	51-128/10	
127-18-4	Tetrachloroethylene	ND	250	243	97	247	99	2	70-126/9	
79-01-6	Trichloroethylene	ND	250	266	106	256	102	4	73-117/10	
75-01-4	Vinyl chloride	ND	250	263	105	254	102	3	63-161/18	

CAS No.	Surrogate Recoveries	MS	MSD	F41620-1A	Limits
1868-53-7	Dibromofluoromethane	104%	103%	108%	86-115%
17060-07-0	1,2-Dichloroethane-D4	109%	111%	101%	73-126%
2037-26-5	Toluene-D8	97%	96%	100%	86-112%
460-00-4	4-Bromofluorobenzene	97%	97%	104%	83-119%

(a) SAMPLE NOT YET APPROVED BY LAB. DO NOT REPORT.

4.3  
4

# Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
(a) F41620-4ADUP	C0041837.D	10	06/29/06	KW	n/a	n/a	VC1691
F41620-4A	C0041834.D	10	06/29/06	KW	06/27/06	OP17038	VC1691

The QC reported here applies to the following samples:

Method: SW846 8260B

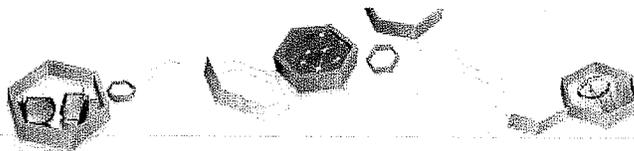
F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-4A		Q	RPD	Limits
		DUP ug/l	DUP ug/l			
71-43-2	Benzene	ND	ND		nc	
108-90-7	Chlorobenzene	ND	ND		nc	
67-66-3	Chloroform	ND	ND		nc	
56-23-5	Carbon tetrachloride	ND	ND		nc	
75-35-4	1,1-Dichloroethylene	ND	ND		nc	
107-06-2	1,2-Dichloroethane	ND	ND		nc	
106-46-7	p-Dichlorobenzene	ND	ND		nc	
78-93-3	Methyl ethyl ketone	ND	ND		nc	
127-18-4	Tetrachloroethylene	ND	ND		nc	
79-01-6	Trichloroethylene	ND	ND		nc	
75-01-4	Vinyl chloride	ND	ND		nc	

CAS No.	Surrogate Recoveries	DUP	F41620-4A	Limits
1868-53-7	Dibromofluoromethane	106%	106%	86-115%
17060-07-0	1,2-Dichloroethane-D4	105%	103%	73-126%
2037-26-5	Toluene-D8	100%	99%	86-112%
460-00-4	4-Bromofluorobenzene	101%	103%	83-119%

(a) SAMPLE NOT YET APPROVED BY LAB. DO NOT REPORT.

4.4  
4



IT'S ALL IN THE CHEMISTRY

## GC/MS Semi-volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Leachate Blank Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17054-LB	L032377.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675

The QC reported here applies to the following samples:

Method: SW846 8270C

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Result	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	50	20	ug/l	
	3&4-Methylphenol	ND	50	20	ug/l	
87-86-5	Pentachlorophenol	ND	250	100	ug/l	
95-95-4	2,4,5-Trichlorophenol	ND	50	20	ug/l	
88-06-2	2,4,6-Trichlorophenol	ND	50	20	ug/l	
106-46-7	1,4-Dichlorobenzene	ND	50	10	ug/l	
121-14-2	2,4-Dinitrotoluene	ND	50	20	ug/l	
118-74-1	Hexachlorobenzene	ND	50	10	ug/l	
87-68-3	Hexachlorobutadiene	ND	50	20	ug/l	
67-72-1	Hexachloroethane	ND	50	20	ug/l	
98-95-3	Nitrobenzene	ND	50	10	ug/l	
110-86-1	Pyridine	ND	100	30	ug/l	

CAS No.	Surrogate Recoveries	Limits
367-12-4	2-Fluorophenol	58% 19-90%
4165-62-2	Phenol-d5	39% 10-68%
118-79-6	2,4,6-Tribromophenol	81% 36-137%
4165-60-0	Nitrobenzene-d5	75% 49-119%
321-60-8	2-Fluorobiphenyl	77% 45-118%
1718-51-0	Terphenyl-d14	81% 46-135%

# Blank Spike Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17054-LBS	L032376.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675

The QC reported here applies to the following samples:

Method: SW846 8270C

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
95-48-7	2-Methylphenol	500	305	61	48-90
	3&4-Methylphenol	1000	559	56	43-94
87-86-5	Pentachlorophenol	1000	784	78	62-120
95-95-4	2,4,5-Trichlorophenol	500	424	85	67-103
88-06-2	2,4,6-Trichlorophenol	500	414	83	68-104
106-46-7	1,4-Dichlorobenzene	500	366	73	46-96
121-14-2	2,4-Dinitrotoluene	500	448	90	64-107
118-74-1	Hexachlorobenzene	500	432	86	69-103
87-68-3	Hexachlorobutadiene	500	394	79	48-100
67-72-1	Hexachloroethane	500	359	72	41-98
98-95-3	Nitrobenzene	500	400	80	60-102
110-86-1	Pyridine	500	131	26	17-65

CAS No.	Surrogate Recoveries	BSP	Limits
367-12-4	2-Fluorophenol	45%	19-90%
4165-62-2	Phenol-d5	28%	10-68%
118-79-6	2,4,6-Tribromophenol	92%	36-137%
4165-60-0	Nitrobenzene-d5	84%	49-119%
321-60-8	2-Fluorobiphenyl	85%	45-118%
1718-51-0	Terphenyl-d14	89%	46-135%

52  
5

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17054-MS	L032382.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675
OP17054-MSD	L032383.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675
F41620-3A	L032381.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675

The QC reported here applies to the following samples:

Method: SW846 8270C

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-3A ug/l	Spike Q	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
95-48-7	2-Methylphenol	ND	500	298	60	321	64	7	40-102/25
	3&4-Methylphenol	ND	1000	556	56	586	59	5	39-97/24
87-86-5	Pentachlorophenol	ND	1000	826	83	857	86	4	53-128/22
95-95-4	2,4,5-Trichlorophenol	ND	500	423	85	433	87	2	56-110/19
88-06-2	2,4,6-Trichlorophenol	ND	500	418	84	430	86	3	55-112/19
106-46-7	1,4-Dichlorobenzene	ND	500	357	71	381	76	7	43-102/24
121-14-2	2,4-Dinitrotoluene	ND	500	443	89	445	89	0	60-108/18
118-74-1	Hexachlorobenzene	ND	500	449	90	464	93	3	66-106/16
87-68-3	Hexachlorobutadiene	ND	500	370	74	402	80	8	46-107/26
67-72-1	Hexachloroethane	ND	500	331	66	369	74	11	39-105/25
98-95-3	Nitrobenzene	ND	500	404	81	426	85	5	50-107/25
110-86-1	Pyridine	ND	500	118	24	139	28	16	19-77/41

CAS No.	Surrogate Recoveries	MS	MSD	F41620-3A	Limits
367-12-4	2-Fluorophenol	43%	47%	43%	19-90%
4165-62-2	Phenol-d5	27%	29%	26%	10-68%
118-79-6	2,4,6-Tribromophenol	93%	98%	99%	36-137%
4165-60-0	Nitrobenzene-d5	81%	87%	87%	49-119%
321-60-8	2-Fluorobiphenyl	85%	88%	89%	45-118%
1718-51-0	Terphenyl-d14	84%	86%	93%	46-135%

# Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17054-DUP	L032379.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675
F41620-1A	L032378.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675

The QC reported here applies to the following samples:

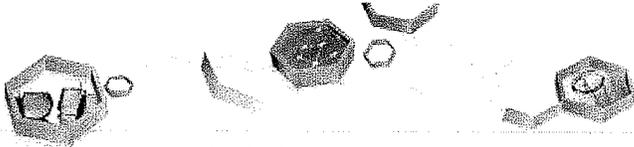
Method: SW846 8270C

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-1A DUP		RPD	Limits
		ug/l	Q		
95-48-7	2-Methylphenol	ND	ND	nc	
	3&4-Methylphenol	ND	ND	nc	
87-86-5	Pentachlorophenol	ND	ND	nc	
95-95-4	2,4,5-Trichlorophenol	ND	ND	nc	
88-06-2	2,4,6-Trichlorophenol	ND	ND	nc	
106-46-7	1,4-Dichlorobenzene	ND	ND	nc	
121-14-2	2,4-Dinitrotoluene	ND	ND	nc	
118-74-1	Hexachlorobenzene	ND	ND	nc	
87-68-3	Hexachlorobutadiene	ND	ND	nc	
67-72-1	Hexachloroethane	ND	ND	nc	
98-95-3	Nitrobenzene	ND	ND	nc	
110-86-1	Pyridine	ND	ND	nc	

CAS No.	Surrogate Recoveries	DUP	F41620-1A	Limits
367-12-4	2-Fluorophenol	44%	41%	19-90%
4165-62-2	Phenol-d5	27%	26%	10-68%
118-79-6	2,4,6-Tribromophenol	98%	91%	36-137%
4165-60-0	Nitrobenzene-d5	84%	81%	49-119%
321-60-8	2-Fluorobiphenyl	86%	83%	45-118%
1718-51-0	Terphenyl-d14	91%	86%	46-135%

5.4  
5



## GC Volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Method Blank Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GUV1317-MB	UV022700.D1		06/23/06	MM	n/a	n/a	GUV1317

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-1, F41620-2, F41620-3, F41620-4, F41620-6

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	5.0	2.5	mg/kg	

CAS No.	Surrogate Recoveries		Limits
460-00-4	4-Bromofluorobenzene	88%	62-135%
98-08-8	aaa-Trifluorotoluene	84%	65-118%

0.1  
6

# Method Blank Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GUV1318-MB	UV022731.D1		06/26/06	MM	n/a	n/a	GUV1318

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-5

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	5.0	2.5	mg/kg	

CAS No.	Surrogate Recoveries		Limits
460-00-4	4-Bromofluorobenzene	103%	62-135%
98-08-8	aaa-Trifluorotoluene	91%	65-118%



# Blank Spike Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GUV1317-BS	UV022699.D1		06/23/06	MM	n/a	n/a	GUV1317

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-1, F41620-2, F41620-3, F41620-4, F41620-6

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH-GRO (C6-C10)	20	18.0	90	66-122

CAS No.	Surrogate Recoveries	BSP	Limits
460-00-4	4-Bromofluorobenzene	105%	62-135%
98-08-8	aaa-Trifluorotoluene	101%	65-118%

62

6

# Blank Spike Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GUV1318-BS	UV022730.D1		06/26/06	MM	n/a	n/a	GUV1318

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-5

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH-GRO (C6-C10)	20	17.6	88	66-122

CAS No.	Surrogate Recoveries	BSP	Limits
460-00-4	4-Bromofluorobenzene	108%	62-135%
98-08-8	aaa-Trifluorotoluene	100%	65-118%

6.2



# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F41620-1MS	UV022724.D1		06/23/06	MM	n/a	n/a	GUV1317
F41620-1MSD	UV022725.D1		06/23/06	MM	n/a	n/a	GUV1317
F41620-1 <sup>a</sup>	UV022701.D1		06/23/06	MM	n/a	n/a	GUV1317

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-1, F41620-2, F41620-3, F41620-4, F41620-6

CAS No.	Compound	F41620-1 mg/kg	Spike Q mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH-GRO (C6-C10)	ND	43.6	26.9	62	35.1	80	26*	37-142/17

CAS No.	Surrogate Recoveries	MS	MSD	F41620-1	Limits
460-00-4	4-Bromofluorobenzene	55%*	113%	112%	62-135%
98-08-8	aaa-Trifluorotoluene	59%*	92%	99%	65-118%

(a) Sample was received in a bulk container but was not preserved within 48 hours of sampling.



# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F41623-1MS	UV022742.D1		06/26/06	MM	n/a	n/a	GUV1318
F41623-1MSD	UV022743.D1		06/26/06	MM	n/a	n/a	GUV1318
F41623-1	UV022734.D1		06/26/06	MM	n/a	n/a	GUV1318

The QC reported here applies to the following samples:

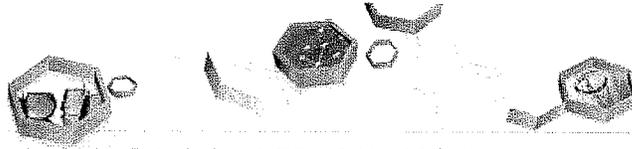
Method: SW846 8015

F41620-5

CAS No.	Compound	F41623-1 mg/kg	Spike Q mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH-GRO (C6-C10)	ND	33.6	27.6	82	26.6	79	4	37-142/17

CAS No.	Surrogate Recoveries	MS	MSD	F41623-1	Limits
460-00-4	4-Bromofluorobenzene	105%	104%	105%	62-135%
98-08-8	aaa-Trifluorotoluene	93%	84%	91%	65-118%





## GC Semi-volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Method Blank Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17013-MB	ST48602.D	1	06/27/06	ME	06/26/06	OP17013	GST1418

The QC reported here applies to the following samples:

Method: SW846 8082

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	8.3	ug/kg	
11104-28-2	Aroclor 1221	ND	17	13	ug/kg	
11141-16-5	Aroclor 1232	ND	17	13	ug/kg	
53469-21-9	Aroclor 1242	ND	17	8.3	ug/kg	
12672-29-6	Aroclor 1248	ND	17	8.3	ug/kg	
11097-69-1	Aroclor 1254	ND	17	8.3	ug/kg	
11096-82-5	Aroclor 1260	ND	17	8.3	ug/kg	
11100-14-4	Aroclor 1268	ND	17	8.3	ug/kg	
	Total PCBs	ND	33		ug/kg	

CAS No.	Surrogate Recoveries	Limits	
877-09-8	Tetrachloro-m-xylene	88%	52-136%
2051-24-3	Decachlorobiphenyl	107%	49-148%

7-1  
7

# Method Blank Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17013-MB	ST48638.D	1	06/28/06	ME	06/26/06	OP17013	GST1419

The QC reported here applies to the following samples:

Method: SW846 8082

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	8.3	ug/kg	
11104-28-2	Aroclor 1221	ND	17	13	ug/kg	
11141-16-5	Aroclor 1232	ND	17	13	ug/kg	
53469-21-9	Aroclor 1242	ND	17	8.3	ug/kg	
12672-29-6	Aroclor 1248	ND	17	8.3	ug/kg	
11097-69-1	Aroclor 1254	ND	17	8.3	ug/kg	
11096-82-5	Aroclor 1260	ND	17	8.3	ug/kg	
11100-14-4	Aroclor 1268	ND	17	8.3	ug/kg	
	Total PCBs	ND	33		ug/kg	

CAS No.	Surrogate Recoveries	Limits	
877-09-8	Tetrachloro-m-xylene	98%	52-136%
2051-24-3	Decachlorobiphenyl	96%	49-148%

7.1  
7

# Method Blank Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17034-MB	LL11094.D	1	06/29/06	VS	06/27/06	OP17034	GLL410

The QC reported here applies to the following samples:

Method: SW846 8015 M

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries	Limits
84-15-1	o-Terphenyl	107% 57-115%

7.1  
7

# Leachate Blank Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17053-LB	TT00796.D	1	06/29/06	AA	06/28/06	OP17053	GTT35

The QC reported here applies to the following samples:

Method: SW846 8081A

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Result	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	0.50	0.20	ug/l	
12789-03-6	Chlordane	ND	5.0	2.5	ug/l	
72-20-8	Endrin	ND	1.0	0.40	ug/l	
76-44-8	Heptachlor	ND	0.50	0.20	ug/l	
1024-57-3	Heptachlor epoxide	ND	0.50	0.20	ug/l	
72-43-5	Methoxychlor	ND	1.0	0.40	ug/l	
8001-35-2	Toxaphene	ND	25	15	ug/l	

CAS No.	Surrogate Recoveries	Limits
877-09-8	Tetrachloro-m-xylene	99% 60-138%
2051-24-3	Decachlorobiphenyl	93% 31-148%

7.2  
7

# Blank Spike Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17053-LBS	TT00795.D	1	06/29/06	AA	06/28/06	OP17053	GTT35

The QC reported here applies to the following samples:

Method: SW846 8081A

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
58-89-9	gamma-BHC (Lindane)	5	4.3	86	69-137
72-20-8	Endrin	5	5.3	106	78-134
76-44-8	Heptachlor	5	4.2	84	62-137
1024-57-3	Heptachlor epoxide	5	4.6	92	74-130
72-43-5	Methoxychlor	5	5.4	108	77-131

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	79%	60-138%
2051-24-3	Decachlorobiphenyl	96%	31-148%

7.3  
7

# Blank Spike Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17013-BS	ST48601.D	1	06/27/06	ME	06/26/06	OP17013	GST1418

The QC reported here applies to the following samples:

Method: SW846 8082

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Spike ug/kg	BSP ug/kg	BSP %	Limits
12674-11-2	Aroclor 1016	133	134	101	75-123
11096-82-5	Aroclor 1260	133	147	110	72-124

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	102%	52-136%
2051-24-3	Decachlorobiphenyl	120%	49-148%

7.3  
7

# Blank Spike Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17034-BS	LL11093.D	1	06/29/06	VS	06/27/06	OP17034	GLL410

The QC reported here applies to the following samples:

Method: SW846 8015 M

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH (C10-C28)	33.3	26.7	80	62-114

CAS No.	Surrogate Recoveries	BSP	Limits
84-15-1	o-Terphenyl	101%	57-115%

7.3



# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17053-MS	TT00803.D	1	06/29/06	AA	06/28/06	OP17053	GTT35
OP17053-MSD	TT00804.D	1	06/29/06	AA	06/28/06	OP17053	GTT35
F41620-5A	TT00802.D	1	06/29/06	AA	06/28/06	OP17053	GTT35

The QC reported here applies to the following samples:

Method: SW846 8081A

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-5A ug/l	Spike Q	ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
58-89-9	gamma-BHC (Lindane)	ND	5	5.7	114	5.5	110	4	75-140/21	
72-20-8	Endrin	ND	5	6.5	130	6.0	120	8	72-149/21	
76-44-8	Heptachlor	ND	5	5.5	110	5.2	104	6	74-136/25	
1024-57-3	Heptachlor epoxide	ND	5	5.6	112	5.4	108	4	75-138/21	
72-43-5	Methoxychlor	ND	5	6.1	122	5.9	118	3	69-145/27	

CAS No.	Surrogate Recoveries	MS	MSD	F41620-5A	Limits
877-09-8	Tetrachloro-m-xylene	100%	100%	99%	60-138%
2051-24-3	Decachlorobiphenyl	71%	69%	59%	31-148%

7.4  
7

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17013-MS	ST48656.D	1	06/28/06	ME	06/26/06	OP17013	GST1419
OP17013-MSD	ST48657.D	1	06/28/06	ME	06/26/06	OP17013	GST1419
F41636-7	ST48655.D	1	06/28/06	ME	06/26/06	OP17013	GST1419

The QC reported here applies to the following samples:

Method: SW846 8082

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	F41636-7 ug/kg	Spike Q ug/kg	MS ug/kg	MS %	MSD ug/kg	MSD %	RPD	Limits Rec/RPD
12674-11-2	Aroclor 1016	17 U	134	88.6	66	93.8	68	6	54-138/22
11096-82-5	Aroclor 1260	17 U	134	88.1	66	86.2	63	2	46-138/21

CAS No.	Surrogate Recoveries	MS	MSD	F41636-7	Limits
877-09-8	Tetrachloro-m-xylene	67%	65%	56%	52-136%
2051-24-3	Decachlorobiphenyl	59%	55%	52%	49-148%

7.4  
7

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17034-MS	LL11098.D	20	06/29/06	VS	06/27/06	OP17034	GLL410
OP17034-MSD	LL11099.D	10	06/29/06	VS	06/27/06	OP17034	GLL410
F41620-2	LL11097.D	8	06/29/06	VS	06/27/06	OP17034	GLL410

The QC reported here applies to the following samples:

Method: SW846 8015 M

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	F41620-2 mg/kg	Spike Q mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH (C10-C28)	570	47.3	1020	952* a	396	-367* a	88*	31-136/36

CAS No.	Surrogate Recoveries	MS	MSD	F41620-2	Limits
84-15-1	o-Terphenyl	0%* b	88%	86%	57-115%

(a) Outside control limits due to high level in sample relative to spike amount.  
 (b) Outside control limits due to dilution.

7.4  
7

# Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17053-DUP	TT00798.D	1	06/29/06	AA	06/28/06	OP17053	GTT35
F41620-1A	TT00797.D	1	06/29/06	AA	06/28/06	OP17053	GTT35

The QC reported here applies to the following samples:

Method: SW846 8081A

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-1A		DUP		RPD	Limits
		ug/l	Q	ug/l	Q		
58-89-9	gamma-BHC (Lindane)	ND		ND		nc	
12789-03-6	Chlordane	ND		ND		nc	
72-20-8	Endrin	ND		ND		nc	
76-44-8	Heptachlor	ND		ND		nc	
1024-57-3	Heptachlor epoxide	ND		ND		nc	
72-43-5	Methoxychlor	ND		ND		nc	

CAS No.	Surrogate Recoveries	DUP	F41620-1A	Limits
877-09-8	Tetrachloro-m-xylene	98%	100%	60-138%
2051-24-3	Decachlorobiphenyl	98%	98%	31-148%

7.5  
7



## Metals Analysis

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### QC Data Summaries



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Includes the following where applicable:

- Method Blank Summaries
- Matrix Spike and Duplicate Summaries
- Blank Spike and Lab Control Sample Summaries
- Serial Dilution Summaries

7.

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F41620  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP9826  
Matrix Type: LEACHATE

Methods: SW846 6010B  
Units: mg/l

Prep Date: 06/27/06 06/27/06 06/27/06

Metal	RL	IDL	MB raw	final	MB raw	final	MB raw	final
Aluminum	0.20	.018						
Antimony	0.0060	.0034						
Arsenic	0.020	.0028	-0.0012	<0.020(a)	-0.011	<0.020(a)	-0.012	<0.020(a)
Barium	1.0	.0004	0.00019	<1.0	0.0057	<1.0	0.014	<1.0
Beryllium	0.0050	.0004						
Cadmium	0.0050	.0002	-0.000010	<0.0050	0.0	<0.0050	0.00013	<0.0050
Calcium	5.0	.042						
Chromium	0.010	.0006	-0.000020	<0.010	0.0034	<0.010	-0.000070	<0.010
Cobalt	0.050	.0006						
Copper	0.025	.0009						
Iron	0.30	.012						
Lead	0.050	.0017	0.0013	<0.050	0.00023	<0.050	0.0024	<0.050
Magnesium	5.0	.0043						
Manganese	0.015	.0006						
Molybdenum	0.050	.0013						
Nickel	0.040	.0008						
Potassium	10	.01						
Selenium	0.10	.002	-0.00086	<0.10(b)	0.032	<0.10(b)	0.026	<0.10(b)
Silver	0.010	.0009	-0.00032	<0.010	-0.000010	<0.010	-0.00062	<0.010
Sodium	10	.5						
Thallium	0.010	.0023						
Tin	0.050	.0031						
Vanadium	0.050	.0006						
Zinc	0.10	.0013						

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested  
(a) Elevated RL/MDL due to negative bias of Method Blank.  
(b) Elevated RL/MDL due to positive bias of Method Blank.

8.1.1

8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	F41620-1A Original	F41620-1A DUP	RPD	QC Limits	F41620-1A Original MS	Spikelot MPFLICP1	% Rec	QC Limits	
Aluminum									
Antimony									
Arsenic	0.0	0.0 (a)	NC	0-20	0.0	2.0 (a)	2.0	100.0	80-120
Barium	2.1	2.1	0.0	0-20	2.1	4.1	2.0	100.0	80-120
Beryllium									
Cadmium	0.058	0.058	0.0	0-20	0.058	0.11	0.050	104.0	80-120
Calcium									
Chromium	0.019	0.018	5.4	0-20	0.019	0.21	0.20	95.5	80-120
Cobalt									
Copper									
Iron									
Lead	1.6	1.6	0.0	0-20	1.6	2.1	0.50	100.0	80-120
Magnesium									
Manganese									
Molybdenum									
Nickel									
Potassium									
Selenium	0.036	0.035(b)	2.8	0-20	0.036	2.2 (b)	2.0	108.2	80-120
Silver	0.0	0.0	NC	0-20	0.0	0.058	0.050	116.0	80-120
Sodium									
Thallium									
Tin									
Vanadium									
Zinc									

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested  
 (a) Elevated RL/MDL due to negative bias of Method Blank.  
 (b) Elevated RL/MDL due to positive bias of Method Blank.

8.1.2  
**8**

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	F41620-1A Original MSD	Spikelot MPFLICP1 % Rec	MSD RPD	QC Limit	Original DUP	RPD	QC Limits
Aluminum							
Antimony							
Arsenic	0.0	2.0 (a)	2.0	100.0	0.0	20	
Barium	2.1	4.1	2.0	100.0	0.0	20	
Beryllium							
Cadmium	0.058	0.11	0.050	104.0	0.0	20	
Calcium							
Chromium	0.019	0.21	0.20	95.5	0.0	20	
Cobalt							
Copper							
Iron							
Lead	1.6	2.1	0.50	100.0	0.0	20	
Magnesium							
Manganese							
Molybdenum							
Nickel							
Potassium							
Selenium	0.036	2.2 (b)	2.0	108.2	0.0	20	
Silver	0.0	0.057	0.050	114.0	1.7	20	
Sodium							
Thallium							
Tin							
Vanadium							
Zinc							

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested  
 (a) Elevated RL/MDL due to negative bias of Method Blank.  
 (b) Elevated RL/MDL due to positive bias of Method Blank.

8.1.2

8

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	BSP Result	SpikeLot MPFLICP1	% Rec	QC Limits	BSP Result	SpikeLot MPFLICP1	% Rec	QC Limits
Aluminum								
Antimony								
Arsenic	2.0 (a)	2.0	100.0	80-120	2.0 (a)	2.0	100.0	80-120
Barium	2.0	2.0	100.0	80-120	2.0	2.0	100.0	80-120
Beryllium								
Cadmium	0.050	0.050	100.0	80-120	0.049	0.050	98.0	80-120
Calcium								
Chromium	0.21	0.20	105.0	80-120	0.20	0.20	100.0	80-120
Cobalt								
Copper								
Iron								
Lead	0.50	0.50	100.0	80-120	0.51	0.50	102.0	80-120
Magnesium								
Manganese								
Molybdenum								
Nickel								
Potassium								
Selenium	2.0 (b)	2.0	100.0	80-120	2.2 (b)	2.0	110.0	80-120
Silver	0.051	0.050	102.0	80-120	0.058	0.050	116.0	80-120
Sodium								
Thallium								
Tin								
Vanadium								
Zinc								

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested  
 (a) Elevated RL/MDL due to negative bias of Method Blank.  
 (b) Elevated RL/MDL due to positive bias of Method Blank.

8.1.3



SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 06/27/06

Metal	BSP Result	Spike lot MPFLICP1	% Rec	QC Limits
Aluminum				
Antimony				
Arsenic	2.1 (a)	2.0	105.0	80-120
Barium	2.1	2.0	105.0	80-120
Beryllium				
Cadmium	0.050	0.050	100.0	80-120
Calcium				
Chromium	0.21	0.20	105.0	80-120
Cobalt				
Copper				
Iron				
Lead	0.50	0.50	100.0	80-120
Magnesium				
Manganese				
Molybdenum				
Nickel				
Potassium				
Selenium	2.2 (b)	2.0	110.0	80-120
Silver	0.052	0.050	104.0	80-120
Sodium				
Thallium				
Tin				
Vanadium				
Zinc				

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested  
 (a) Elevated RL/MDL due to negative bias of Method Blank.  
 (b) Elevated RL/MDL due to positive bias of Method Blank.

8.1.3



SERIAL DILUTION RESULTS SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: ug/l

Prep Date: 06/27/06

Metal	F41620-1A Original	SDL 1:5	RPD	QC Limits
-------	-----------------------	---------	-----	--------------

Aluminum				
Antimony				
Arsenic	0.00	0.00	NC	0-10
Barium	2060	2100	2.4	0-10
Beryllium				
Cadmium	58.2	61.0	4.7	0-10
Calcium				
Chromium	18.6	20.6	11.3 (a)	0-10
Cobalt				
Copper				
Iron				
Lead	1610	1680	4.6	0-10
Magnesium				
Manganese				
Molybdenum				
Nickel				
Potassium				
Selenium	36.3	35.1	3.4	0-10
Silver	0.00	0.00	NC	0-10
Sodium				
Thallium				
Tin				
Vanadium				
Zinc				

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes

(\*) Outside of QC limits

(anr) Analyte not requested

(a) Percent difference acceptable due to low initial sample concentration (< 50 times IDL).

8.1.4

8

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F41620  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP9828  
Matrix Type: LEACHATE

Methods: SW846 7470A  
Units: mg/l

Prep Date: 06/27/06 06/27/06 06/27/06

Metal	RL	IDL	MB raw	final	MB raw	final	MB raw	final
Mercury	0.0010	.00008	-0.000023	<0.0010	-0.00013	<0.010	-0.00043	<0.010

Associated samples MP9828: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

8.2.1

8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9828  
 Matrix Type: LEACHATE

Methods: SW846 7470A  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	F41620-1A Original	DUP	RPD	QC Limits	F41620-1A Original MS	Spikelot HGFLWS1	% Rec	QC Limits	
Mercury	0.0	0.0	NC	0-20	0.0	0.032	0.030	106.7	80-120

Associated samples MP9828: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes

(\*) Outside of QC limits

(N) Matrix Spike Rec. outside of QC limits

(anr) Analyte not requested

8.2.2



SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9828  
 Matrix Type: LEACHATE

Methods: SW846 7470A  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	BSP Result	SpikeLot HGFLWS1	% Rec	QC Limits	BSP Result	SpikeLot HGFLWS1	% Rec	QC Limits
Mercury	0.0030	0.0030	100.0	80-120	0.031	0.030	103.3	80-120

Associated samples MP9828: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

8.2.3



SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9828  
 Matrix Type: LEACHATE

Methods: SW846 7470A  
 Units: mg/l

Prep Date: 06/27/06

Metal	BSP Result	Spike/lot HGFLWS1	% Rec	QC Limits
Mercury	0.031	0.030	103.3	80-120

Associated samples MP9828: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

8.2.3





IT'S ALL IN THE CHEMISTRY

## General Chemistry

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank and Blank Spike Summaries
- Duplicate Summaries
- Matrix Spike Summaries

METHOD BLANK AND SPIKE RESULTS SUMMARY  
GENERAL CHEMISTRY

Login Number: F41620  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

Analyte	Batch ID	RL	MB Result	Units	Spike Amount	BSP Result	BSP %Recov	QC Limits
Cyanide Reactivity	GP8051/GN21169			mg/kg	5.0	0.18	3.5	0-100%
Cyanide Reactivity	GP8051/GN21169	1.5	<1.5	mg/kg	5.0	0.31	6.2	0-100%
Sulfide Reactivity	GP8053/GN21170			mg/kg	53.7	3.0	5.6	0-100%
Sulfide Reactivity	GP8053/GN21170	50	<50	mg/kg	53.7	5.0	9.3	0-100%

Associated Samples:

Batch GP8051: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

Batch GP8053: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6



DUPLICATE RESULTS SUMMARY  
GENERAL CHEMISTRY

Login Number: F41620  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

Analyte	Batch ID	QC Sample	Units	Original Result	DUP Result	RPD	QC Limits
Corrosivity as pH	GN21100	F41620-1		7.4	7.6		0-%
Ignitability (Flashpoint)	GN21105	F41620-1	Deg. F	>200	0(a)	0.0	0-38%
Solids, Percent	GN21093	F41611-1	%	86.3	86	0.3	0-30%

Associated Samples:

Batch GN21093: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

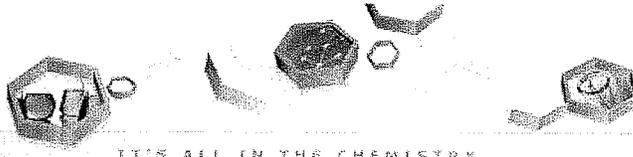
Batch GN21100: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

Batch GN21105: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

(a) Not ignitable.

9.2





IT'S ALL IN THE CHEMISTRY

## Misc. Forms

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## Custody Documents and Other Forms

(Accutest Laboratories Gulf Coast, Inc.)

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Includes the following where applicable:

- Chain of Custody

# CHAIN OF CUSTODY

4405 VINELAND ROAD • SUITE C-15  
ORLANDO, FL 32811  
TEL: 407-425-6700 • FAX: 407-425-0707

ACCUTEST JOB #:  
ACCUTEST QUOTE #:

CLIENT INFORMATION		FACILITY INFORMATION				ANALYTICAL INFORMATION										MATRIX CODES
NAME: <b>F41620</b>		PROJECT NAME: <b>Accutest SE</b>														DW - DRINKING WATER GW - GROUND WATER WW - WASTE WATER SO - SOIL SL - SLUDGE OI - OIL LIQ - OTHER LIQUID SOL - OTHER SOLID
ADDRESS:		LOCATION:														
CITY, STATE ZIP:		PROJECT NO.:														
SEND REPORT TO: PHONE #:		FAX #:														
ACCUTEST SAMPLE #	FIELD ID / POINT OF COLLECTION	COLLECTION				PRESERVATION						LAB USE ONLY				
		DATE	TIME	SAMPLED BY:	MATRIX	# OF BOTTLES	HTI	NICH	INICI	HS304	NONE					
	<b>F41620-1</b>	<b>06/26/06</b>	<b>10:00</b>		<b>S</b>											
	<b>-2</b>		<b>15:00</b>													
	<b>-3</b>		<b>16:00</b>													
	<b>-4</b>		<b>11:00</b>													
	<b>-5</b>		<b>13:00</b>													
	<b>-6</b>		<b>14:00</b>													

DATA TURNAROUND INFORMATION		DATA DELIVERABLE INFORMATION		COMMENTS/REMARKS	
<input type="checkbox"/> STANDARD <input type="checkbox"/> 48 HOUR RUSH <input type="checkbox"/> 24 HOUR EMERGENCY <input type="checkbox"/> OTHER <b>06/29/06 please</b>	APPROVED BY: _____	<input checked="" type="checkbox"/> STANDARD <input type="checkbox"/> COMMERCIAL "B" <input type="checkbox"/> DISK DELIVERABLE <input type="checkbox"/> STATE FORMS <input type="checkbox"/> OTHER (SPECIFY) _____		<b>ABC</b>	
EMERGENCY OR RUSH IS FAX DATA UNLESS PREVIOUSLY APPROVED					

**SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION, INCLUDING COURIER DELIVERY**

RELINQUISHED BY: <b>[Signature]</b>	DATE TIME: <b>06/26/06-1800</b>	RECEIVED BY: <b>1. [Signature]</b>	RELINQUISHED BY:	DATE TIME:	RECEIVED BY:
RELINQUISHED BY:	DATE TIME:	RECEIVED BY: <b>2. [Signature]</b>	RELINQUISHED BY:	DATE TIME:	RECEIVED BY:
RELINQUISHED BY:	DATE TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE TIME:	RECEIVED BY:
RELINQUISHED BY:	DATE TIME:	RECEIVED BY:	SEAL #	PRESERVE WHERE APPLICABLE	ON ICE <input checked="" type="checkbox"/>
					TEMPERATURE <b>22 C</b>

10.1 10

F41620: Chain of Custody  
Page 1 of 2  
Accutest Laboratories Gulf Coast, Inc.



ACCUTEST

SAMPLE RECEIPT LOG

JOB #: F41620

DATE/TIME RECEIVED: 6/24/06

CLIENT: ALSE

INITIALS: BAJ

Condition/Variance (Circle "Y" for yes and "N" for no or NA. If "N" is circled, see variance for explanation):

- 1.  Y  N Sample received in undamaged condition.
- 2.  Y  N Samples received within temp. range.
- 3.  Y  N Sample received with proper pH.
- 4.  Y  N Sample received in proper containers.
- 5.  Y  N Sample volume sufficient for analysis.
- 6.  Y  N Sample received with chain of custody.
- 7.  Y  N Chain of Custody matches sample IDs and analysis on containers.
- 8.  Y  N NA Custody seal received intact and tamper not evident on cooler.
- 9.  Y  N NA Custody seal received intact and tamper not evident on bottles.

SAMPLE or FIELD ID	BOTTLE #	DATE SAMPLED	MATRIX	VOLUME	LOCATION	PRESERV.	PH
1-6	1	6/20/06	SO	40±	IP	1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA

*Handwritten signature and date: 6/24/06*

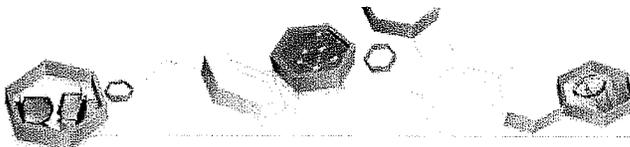
LOCATION: WI: Walk-in VR: Volatile Refrig. SUB: Subcontract EF: Encore Freezer  
 PRESERVATIVES: 1: None 2: HCL 3: HNO3 4: H2SO4 5: NAOH 6: Other

pH of waters checked excluding volatiles  
 pH of soils N/A

Delivery method: Courier: Fed. Ex  
 Tracking#: \_\_\_\_\_

COOLER TEMP: 32C  
 COOLER TEMP: \_\_\_\_\_

Method of sample disposal: (circle one) Accutest disposal Hold Return to Client Form: SM012, Rev.12/14/04, QAO



IT'S ALL IN THE CHEMISTRY

## GC Semi-volatiles

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### QC Data Summaries

(Accutest Laboratories Gulf Coast, Inc.)

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

11

# Method Blank Summary

Job Number: F41620  
Account: ALSE Accutest Laboratories Southeast, Inc.  
Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6063-MB	DD57046.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067

The QC reported here applies to the following samples:

Method: SW846 8151

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Result	RL	MDL	Units	Q
94-75-7	2,4-D	ND	1.0	0.50	ug/l	
93-72-1	2,4,5-TP (Silvex)	ND	0.20	0.15	ug/l	

CAS No.	Surrogate Recoveries	Limits
19719-28-9	2,4-DCAA	116% 23-171%

11.1  
11

# Blank Spike Summary

Job Number: F41620  
Account: ALSE Accutest Laboratories Southeast, Inc.  
Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6063-BS	DD57047.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067

The QC reported here applies to the following samples:

Method: SW846 8151

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
94-75-7	2,4-D	2	2.3	115	44-152
93-72-1	2,4,5-TP (Silvex)	0.4	0.34	85	41-142

CAS No.	Surrogate Recoveries	BSP	Limits
19719-28-9	2,4-DCAA	125%	23-171%

11.2  
11

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ALSE Accutest Laboratories Southeast, Inc.  
 Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6063-MS	DD57049.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067
OP6063-MSD	DD57050.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067
F41620-1A	DD57048.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067

The QC reported here applies to the following samples:

Method: SW846 8151

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-1A ug/l	Spike Q	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
94-75-7	2,4-D	ND	2	2.6	130	2.0	100	26*	28-144/25
93-72-1	2,4,5-TP (Silvex)	ND	0.4	0.43	108	0.39	98	10	25-137/24

CAS No.	Surrogate Recoveries	MS	MSD	F41620-1A	Limits
19719-28-9	2,4-DCAA	130%	121%	134%	23-171%

11.3  
11

GRID 10

ONLY

SUMMARY

OF FULL

TCLP RESULTS

SAMPLED

6/20/06

LabLink Analytical Data Report  
Paradise Creek 116539

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261.6/96)\*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time	
F41620-4	Aroclor 1016	12674-11-2	SW846 8082	ND		ug/kg	240		10	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	Aroclor 1221	11104-28-2	SW846 8082	ND		ug/kg	240		10	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	Aroclor 1232	11141-16-5	SW846 8082	ND		ug/kg	240		10	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	Aroclor 1242	53469-21-9	SW846 8082	ND		ug/kg	240		10	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	Aroclor 1248	12672-29-6	SW846 8082	ND		ug/kg	240		10	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	Aroclor 1254	11097-69-1	SW846 8082	ND		ug/kg	240		10	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	Aroclor 1260 (b)	11096-82-5	SW846 8082	1980	J	ug/kg	240		10	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	TPH (C10-C28) (c)		SW846 8015 M	73.5		mg/kg	48		4	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	Aroclor 1268 (b)	11100-14-4	SW846 8082	311	J	ug/kg	240		10	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	Total PCBs		SW846 8082	2290		ug/kg	480		10	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	o-Terphenyl	84-15-1	SW846 8015 M	78		%	95		4	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	Tetrachloro-m-xylene	877-09-8	SW846 8082	96		%			10	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	Decachlorobiphenyl (f)	2051-24-3	SW846 8082	168	*	%			10	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	TPH-GRO (C6-C10)		SW846 8015	12.1		mg/kg	8.4		1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	4-Bromofluorobenzene (g)	460-00-4	SW846 8015	118		%			1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	4-Bromofluorobenzene (h)	460-00-4	SW846 8015	151	*	%			1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	aaa-Trifluorotoluene	98-08-8	SW846 8015	91		%			1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	Ignitability (Flashpoint) (d)		SW846 1010	>200	>	Deg. F			1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	Cyanide Reactivity		SW846 CHAP7	<2.2	<	mg/kg	2.2		1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	Corrosivity as pH		SW846 CHAP7	7.4					1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	Sulfide Reactivity		SW846 CHAP7	<50	<	mg/kg	50		1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4	Solids, Percent		EPA 160.3 M	69.3		%			1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	2,4-D	94-75-7	SW846 8151	ND		mg/l	0.0015		10	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	2,4,5-TP (Silvex)	93-72-1	SW846 8151	ND		mg/l	0.0002		1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	gamma-BHC (Lindane)	58-89-9	SW846 8081A	ND		mg/l	0.0005		0.4	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Chlordane	12789-03-6	SW846 8081A	ND		mg/l	0.005		0.03	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Endrin	72-20-8	SW846 8081A	ND		mg/l	0.001		0.02	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Heptachlor	76-44-8	SW846 8081A	ND		mg/l	0.0005		0.008	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Heptachlor epoxide	1024-57-3	SW846 8081A	ND		mg/l	0.0005		0.008	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Methoxychlor	72-43-5	SW846 8081A	ND		mg/l	0.001		10	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Toxaphene	8001-35-2	SW846 8081A	ND		mg/l	0.025		0.5	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Tetrachloro-m-xylene	877-09-8	SW846 8081A	99		%			1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	2,4-DCAA	19719-28-9	SW846 8151	140		%			1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Decachlorobiphenyl	2051-24-3	SW846 8081A	97		%			1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Arsenic (i)	7440-38-2	SW846 6010B	0.0056	U	mg/l	0.02		5	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Barium	7440-39-3	SW846 6010B	1.7		mg/l	1		100	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Cadmium	7440-43-9	SW846 6010B	0.028		mg/l	0.005		1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Chromium	7440-47-3	SW846 6010B	0.009	B	mg/l	0.01		5	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Lead	7439-92-1	SW846 6010B	0.36		mg/l	0.05		5	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Mercury	7439-97-6	SW846 7470A	0.001	U	mg/l	0.01		0.2	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Selenium (j)	7782-49-2	SW846 6010B	0.04	U	mg/l	0.1		1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Silver	7440-22-4	SW846 6010B	0.0009	U	mg/l	0.01		5	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	2-Methylphenol	95-48-7	SW846 8270C	ND		mg/l	0.05		200	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	3&4-Methylphenol		SW846 8270C	ND		mg/l	0.05		200	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Pentachlorophenol	87-86-5	SW846 8270C	ND		mg/l	0.25		100	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	2,4,5-Trichlorophenol	95-95-4	SW846 8270C	ND		mg/l	0.05		400	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	2,4,6-Trichlorophenol	88-06-2	SW846 8270C	ND		mg/l	0.05		2	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	1,4-Dichlorobenzene	106-46-7	SW846 8270C	ND		mg/l	0.05		7.5	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	2,4-Dinitrotoluene	121-14-2	SW846 8270C	ND		mg/l	0.05		0.13	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Hexachlorobenzene	118-74-1	SW846 8270C	ND		mg/l	0.05		0.13	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Hexachlorobutadiene	87-68-3	SW846 8270C	ND		mg/l	0.05		0.5	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Hexachloroethane	67-72-1	SW846 8270C	ND		mg/l	0.05		3	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Nitrobenzene	98-95-3	SW846 8270C	ND		mg/l	0.05		2	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Pyridine	110-86-1	SW846 8270C	ND		mg/l	0.1		5	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	2-Fluorophenol	367-12-4	SW846 8270C	41		%			1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Phenol-d5	4165-62-2	SW846 8270C	25		%			1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	2,4,6-Tribromophenol	118-79-6	SW846 8270C	90		%			1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Nitrobenzene-d5	4165-60-0	SW846 8270C	80		%			1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	2-Fluorobiphenyl	321-60-8	SW846 8270C	85		%			1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Terphenyl-d14	1718-51-0	SW846 8270C	83		%			1	PC-TP-116539-GRID10	20-Jun-06	11:00	
F41620-4A	Benzene	71-43-2	SW846 8260B	ND		mg/l	0.01		0.5	10	PC-TP-116539-GRID10	20-Jun-06	11:00
F41620-4A	Chlorobenzene	108-90-7	SW846 8260B	ND		mg/l	0.02		100	10	PC-TP-116539-GRID10	20-Jun-06	11:00
F41620-4A	Chloroform	67-66-3	SW846 8260B	ND		mg/l	0.02		6	10	PC-TP-116539-GRID10	20-Jun-06	11:00
F41620-4A	Carbon tetrachloride	56-23-5	SW846 8260B	ND		mg/l	0.02		0.5	10	PC-TP-116539-GRID10	20-Jun-06	11:00
F41620-4A	1,1-Dichloroethylene	75-35-4	SW846 8260B	ND		mg/l	0.02		0.7	10	PC-TP-116539-GRID10	20-Jun-06	11:00
F41620-4A	1,2-Dichloroethane	107-06-2	SW846 8260B	ND		mg/l	0.02		0.5	10	PC-TP-116539-GRID10	20-Jun-06	11:00
F41620-4A	p-Dichlorobenzene	106-46-7	SW846 8260B	ND		mg/l	0.02		7.5	10	PC-TP-116539-GRID10	20-Jun-06	11:00

LabLink Analytical Data Report  
Paradise Creek 116539

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261 6/96)\*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F41620-4A	Methyl ethyl ketone	78-93-3	SW846 8260B	ND		mg/l	0.1	200	10	PC-TP-116539-GRID10	20-Jun-06	11:00
F41620-4A	Tetrachloroethylene	127-18-4	SW846 8260B	ND		mg/l	0.02	0.7	10	PC-TP-116539-GRID10	20-Jun-06	11:00
F41620-4A	Trichloroethylene	79-01-6	SW846 8260B	ND		mg/l	0.02	0.5	10	PC-TP-116539-GRID10	20-Jun-06	11:00
F41620-4A	Vinyl chloride	75-01-4	SW846 8260B	ND		mg/l	0.01	0.2	10	PC-TP-116539-GRID10	20-Jun-06	11:00
F41620-4A	Dibromofluoromethane	1868-53-7	SW846 8260B	106		%			10	PC-TP-116539-GRID10	20-Jun-06	11:00
F41620-4A	Toluene-D8	2037-26-5	SW846 8260B	99		%			10	PC-TP-116539-GRID10	20-Jun-06	11:00
F41620-4A	4-Bromofluorobenzene	460-00-4	SW846 8260B	103		%			10	PC-TP-116539-GRID10	20-Jun-06	11:00
F41620-4A	1,2-Dichloroethane-D4	17060-07-0	SW846 8260B	103		%			10	PC-TP-116539-GRID10	20-Jun-06	11:00

(b) Estimated value due to the presence of multiple overlapping Aroclor patterns.

(c) Petroleum hydrocarbon pattern extends beyond C28.

(d) Not ignitable

(e) Elevated reporting limits due to matrix interference.

(f) Outside control limits due to dilution.

(g) Result reported from PID.

(h) Outside control limits due to matrix interference.

(i) Elevated RL/MDL due to negative bias of Method Blank.

(j) Elevated RL/MDL due to positive bias of Method Blank.

(k) Elevated RL/MDL due to CRIA exceeding acceptance criteria.

**Found 2 results exceeding regulatory limits.**

**\*\* Indicates result outside regulatory limits.**

\* Regulatory limits listed in this document have been obtained from the latest version of the regulations cited and are used for advisory purposes only. Accutest assumes no responsibility for errors in regulatory documents or changes to criteria detailed in later versions of the referenced regulation. It is the responsibility of the user to verify these limits before using or reporting any data.

# F41620

**CHAIN-OF-CUSTODY RECORD**

COC Number: 116539-6.20.06  
 Purchase Order Number:

The Shaw Group Inc.

**SHAW Environmental & Infrastructure, INC. - 5700 Thurston Ave Suite 116B - Virginia Beach, VA 23455 - (757) 363-7190**

Lab Location		Lab Reference No.		Analysis Desired																		
<b>Accutest</b>		4408 Vineland Road Suite C-1, Orlando FL 32811 (407)426-6700																				
<b>Paradise Creek</b>				<b>Disposal Samples</b>																		
Project Number: <b>116539</b>		Project Manager: <b>Natasha Kelley Sullivan</b> (410)528-7598																				
Client: <b>Shaw</b>				Project Manager: <b>Taylor Sword</b>																		
Item No.	Sample Location	Date	Time	W	S	V	D	Sample Description	Number of Containers	Full TCLP + RC SW-846	PCBs SW-846 SW2	TPH DRD/DRD SW-846 BOTM										
1	PC-TP-116539-GRID04	06/20/06	1000				X	Hard Pan/Wood Debris Soil	3 x 8 cures, 2 x 4 cures soil jar	X	X	X										
2	PC-TP-116539-GRID06	06/20/06	1500				X	Hard Pan/Wood Debris Soil	3 x 8 cures, 2 x 4 cures soil jar	X	X	X										
3	PC-TP-116539-GRID08	06/20/06	1600				X	Hard Pan/Wood Debris Soil	3 x 8 cures, 2 x 4 cures soil jar	X	X	X										
4	PC-TP-116539-GRID10	06/20/06	1100				X	Hard Pan/Wood Debris Soil	3 x 8 cures, 2 x 4 cures soil jar	X	X	X										
5	PC-TP-116539-GRID11	06/20/06	1300				X	Hard Pan/Wood Debris Soil	3 x 8 cures, 2 x 4 cures soil jar	X	X	X										
6	PC-TP-116539-GRID12	06/20/06	1400				X	Hard Pan/Wood Debris Soil	3 x 8 cures, 2 x 4 cures soil jar	X	X	X										
7																						
8																						
9																						
10																						

Turnaround Time Required: <b>X 7 Day TAT</b>	Sampled By: <b>Brooke Mourain, SHAW</b>	Comments:	Laboratory Report No.:
---	--	-----------	------------------------

Transfer Number	Transfers Relinquished By	Date	Time	Number Accepted By	Date	Time	Remarks
1	<i>Brooke Mourain</i>	8/21/2006	1500	<i>FX</i>			<b>Summary Package</b> Deliverables: EDD Excel *** Fax results to Natasha Sullivan (410) 528-7599
2	<i>FX</i>			<i>Judge Corral</i>	6/22/06	19:00	
3							
4							

2.4

**ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION**

ACCUTEST'S JOB NUMBER: F41620 CLIENT: SHA W PROJECT: Paradise Creek  
 DATE/TIME RECEIVED: 6/22/06 19:00 # OF COOLERS RECEIVED: 1 COOLER TEMPS: 2.4  
 METHOD OF DELIVERY: FEDEX UPS ACCUTEST COURIER GREYHOUND DELIVERY OTHER  
 AIRBILL NUMBERS: 85748739 8402

**COOLER INFORMATION**

- CUSTODY SEAL NOT PRESENT OR NOT INTACT
- CHAIN OF CUSTODY NOT RECEIVED (COC)
- ANALYSIS REQUESTED IS UNCLEAR OR MISSING
- SAMPLE DATES OR TIMES UNCLEAR OR MISSING
- TEMPERATURE CRITERIA NOT MET

**TRIP BLANK INFORMATION**

- TRIP BLANK NOT PROVIDED
- TRIP BLANK NOT ON COC
- TRIP BLANK INTACT
- TRIP BLANK NOT INTACT
- RECEIVED WATER TRIP BLANK
- RECEIVED SOIL TRIP BLANK

**MISC. INFORMATION**

NUMBER OF ENCORES ? 0  
 NUMBER OF 5035 FIELD KITS ? 0  
 NUMBER OR LAB FILTERED METALS ? 6

SUMMARY OF COMMENTS: No date + time on soil jars

**SAMPLE INFORMATION**

- SAMPLE LABELS PRESENT ON ALL BOTTLES
- CORRECT NUMBER OF CONTAINERS USED
- SAMPLE RECEIVED IMPROPERLY PRESERVED
- INSUFFICIENT VOLUME FOR ANALYSIS
- TIMES ON COC DONT MATCH LABEL
- ID'S ON COC DONT MATCH LABEL
- VOC VIALS HAVE HEADSPACE (MACRO BUBBLES)
- BOTTLES RECEIVED BUT ANALYSIS NOT REQUESTED
- NO BOTTLES RECEIVED FOR ANALYSIS REQUESTED
- UNCLEAR FILTERING INSTRUCTIONS
- UNCLEAR COMPOSITING INSTRUCTIONS
- SAMPLE CONTAINER(S) RECEIVED BROKEN
- % SOLIDS JAR NOT RECEIVED
- 5035 FIELD KIT FROZEN WITHIN 48 HOUR'S

GRID 10

ADD'L SAMPLES

TPH-(C10-C20)

PH

TCLP-Pb only

SAMPLED

7/19/06

## Report of Analysis

Client Sample ID: SP005 Lab Sample ID: F42350-1 Matrix: SO - Soil Method: SW846 8015 M SW846 3550B Project: TO-17, MOD6: Paradise Creek	Date Sampled: 07/19/06 Date Received: 07/21/06 Percent Solids: 60.0
---	---

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	ZF20690.D	10	07/24/06	ME	07/22/06	OP17308	GZF975
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.7 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28) <sup>a</sup>	402	140	81	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	109%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Report of Analysis

Client Sample ID:	SP005	Date Sampled:	07/19/06
Lab Sample ID:	F42350-1	Date Received:	07/21/06
Matrix:	SO - Soil	Percent Solids:	60.0
Project:	TO-17, MOD6: Paradise Creek		

### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	60		%	1	07/24/06	EM	EPA 160.3 M
pH	7.2		su	1	07/26/06	SJL	SW846 9045

---

RL = Reporting Limit

## Report of Analysis

Client Sample ID: SP004 Lab Sample ID: F42350-2 Matrix: SO - Soil Method: SW846 8015 M SW846 3550B Project: TO-17, MOD6: Paradise Creek	Date Sampled: 07/19/06 Date Received: 07/21/06 Percent Solids: 62.6
---	---

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	ZF20691.D	10	07/24/06	ME	07/22/06	OP17308	GZF975
Run #2							

	Initial Weight	Final Volume
Run #1	30.1 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28) <sup>a</sup>	711	130	80	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	114%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Report of Analysis

Client Sample ID: SP004	Date Sampled: 07/19/06
Lab Sample ID: F42350-2	Date Received: 07/21/06
Matrix: SO - Soil	Percent Solids: 62.6
Project: TO-17, MOD6: Paradise Creek	

### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	62.6		%	1	07/24/06	EM	EPA 160.3 M
pH	7.0		su	1	07/26/06	SJL	SW846 9045

---

RL = Reporting Limit

## Report of Analysis

Client Sample ID: SP003	Date Sampled: 07/19/06
Lab Sample ID: F42350-3	Date Received: 07/21/06
Matrix: SO - Soil	Percent Solids: 67.3
Method: SW846 8015 M SW846 3550B	
Project: TO-17, MOD6: Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	ZF20692.D	10	07/24/06	ME	07/22/06	OP17308	GZF975
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.6 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28) <sup>a</sup>	1390	120	73	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	135% <sup>b</sup>		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

(b) Outside control limits due to dilution.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Report of Analysis

Client Sample ID:	SP003	Date Sampled:	07/19/06
Lab Sample ID:	F42350-3	Date Received:	07/21/06
Matrix:	SO - Soil	Percent Solids:	67.3
Project:	TO-17, MOD6: Paradise Creek		

### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	67.3		%	1	07/24/06	EM	EPA 160.3 M
pH	7.2		su	1	07/26/06	SJL	SW846 9045

---

RL = Reporting Limit



IT'S ALL IN THE CHEMISTRY

07/28/06



## Technical Report for

Field Support Service Inc

TO-17, MOD6: Paradise Creek

Accutest Job Number: F42350

Sampling Date: 07/19/06

Report to:

Field Support Service Inc

Ralph.buckles@fssi.asrcfederal.com

ATTN: Ralph Buckles

Total number of pages in report: 16



Test results contained within this data package meet the requirements of the National Environmental Laboratory Accreditation Conference and/or state specific certification programs as applicable.

*Harry Behzadi*  
Harry Behzadi, Ph.D.  
Laboratory Director

Certifications: FL (DOH E83510), NC (573), NJ (FL002), MA (FL946), IA (366), LA (03051), KS (E-10327), SC, AK  
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### Sample Summary

Field Support Service Inc

Job No: F42350

TO-17, MOD6: Paradise Creek

Sample Number	Collected		Received	Matrix		Client Sample ID
	Date	Time By		Code	Type	
F42350-1	07/19/06	16:15 RB	07/21/06	SO	Soil	SP005
F42350-1A	07/19/06	16:15 RB	07/21/06	SO	Soil	SP005
F42350-2	07/19/06	16:00 RB	07/21/06	SO	Soil	SP004
F42350-2A	07/19/06	16:00 RB	07/21/06	SO	Soil	SP004
F42350-3	07/19/06	16:10 RB	07/21/06	SO	Soil	SP003
F42350-3A	07/19/06	16:10 RB	07/21/06	SO	Soil	SP003

---

Soil samples reported on a dry weight basis unless otherwise indicated on result page.



Sample Results

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Report of Analysis

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**Report of Analysis**

<b>Client Sample ID:</b> SP005		
<b>Lab Sample ID:</b> F42350-1		<b>Date Sampled:</b> 07/19/06
<b>Matrix:</b> SO - Soil		<b>Date Received:</b> 07/21/06
<b>Method:</b> SW846 8015 M SW846 3550B		<b>Percent Solids:</b> 60.0
<b>Project:</b> TO-17, MOD6: Paradise Creek		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	ZF20690.D	10	07/24/06	ME	07/22/06	OP17308	GZF975
Run #2							

	Initial Weight	Final Volume
Run #1	30.7 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28) <sup>a</sup>	402	140	81	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	109%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Report of Analysis

<b>Client Sample ID:</b> SP005	<b>Date Sampled:</b> 07/19/06
<b>Lab Sample ID:</b> F42350-1	<b>Date Received:</b> 07/21/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 60.0
<b>Project:</b> TO-17, MOD6: Paradise Creek	

### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	60		%	1	07/24/06	EM	EPA 160.3 M
pH	7.2		su	1	07/26/06	SJL	SW846 9045

RL = Reporting Limit

## Report of Analysis

<b>Client Sample ID:</b> SP005	<b>Date Sampled:</b> 07/19/06
<b>Lab Sample ID:</b> F42350-1A	<b>Date Received:</b> 07/21/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 60.0
<b>Project:</b> TO-17, MOD6: Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Lead	0.58	D008	5.0	0.050	mg/l	1	07/27/06	07/27/06 RS	SW846 6010B <sup>1</sup>	SW846 3010A <sup>2</sup>

(1) Instrument QC Batch: MA5118

(2) Prep QC Batch: MP9984

---

RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

**Report of Analysis**

2.3  
2

<b>Client Sample ID:</b> SP004		
<b>Lab Sample ID:</b> F42350-2		<b>Date Sampled:</b> 07/19/06
<b>Matrix:</b> SO - Soil		<b>Date Received:</b> 07/21/06
<b>Method:</b> SW846 8015 M SW846 3550B		<b>Percent Solids:</b> 62.6
<b>Project:</b> TO-17, MOD6: Paradise Creek		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	ZF20691.D	10	07/24/06	ME	07/22/06	OP17308	GZF975
Run #2							

	Initial Weight	Final Volume
Run #1	30.1 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28) <sup>a</sup>	711	130	80	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	114%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

---

ND = Not detected      MDL - Method Detection Limit      J = Indicates an estimated value  
 RL = Reporting Limit      B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

# Report of Analysis

<b>Client Sample ID:</b> SP004	<b>Date Sampled:</b> 07/19/06
<b>Lab Sample ID:</b> F42350-2	<b>Date Received:</b> 07/21/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 62.6
<b>Project:</b> TO-17, MOD6: Paradise Creek	

## General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	62.6		%	1	07/24/06	EM	EPA 160.3 M
pH	7.0		su	1	07/26/06	SJL	SW846 9045

RL = Reporting Limit

### Report of Analysis

<b>Client Sample ID:</b> SP004	<b>Date Sampled:</b> 07/19/06
<b>Lab Sample ID:</b> F42350-2A	<b>Date Received:</b> 07/21/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 62.6
<b>Project:</b> TO-17, MOD6: Paradise Creek	

#### Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Lead	0.76	D008	5.0	0.050	mg/l	1	07/27/06	07/27/06 RS	SW846 6010B <sup>1</sup>	SW846 3010A <sup>2</sup>

(1) Instrument QC Batch: MA5118

(2) Prep QC Batch: MP9984

---

RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)

**Report of Analysis**

<b>Client Sample ID:</b> SP003		
<b>Lab Sample ID:</b> F42350-3		<b>Date Sampled:</b> 07/19/06
<b>Matrix:</b> SO - Soil		<b>Date Received:</b> 07/21/06
<b>Method:</b> SW846 8015 M SW846 3550B		<b>Percent Solids:</b> 67.3
<b>Project:</b> TO-17, MOD6: Paradise Creek		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	ZF20692.D	10	07/24/06	ME	07/22/06	OP17308	GZF975
Run #2							

	Initial Weight	Final Volume
Run #1	30.6 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28) <sup>a</sup>	1390	120	73	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	135% <sup>b</sup>		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.  
 (b) Outside control limits due to dilution.

---

ND = Not detected      MDL - Method Detection Limit      J = Indicates an estimated value  
 RL = Reporting Limit      B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

## Report of Analysis

2.5  
2

<b>Client Sample ID:</b> SP003	<b>Date Sampled:</b> 07/19/06
<b>Lab Sample ID:</b> F42350-3	<b>Date Received:</b> 07/21/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 67.3
<b>Project:</b> TO-17, MOD6: Paradise Creek	

**General Chemistry**

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	67.3		%	1	07/24/06	EM	EPA 160.3 M
pH	7.2		su	1	07/26/06	SJL	SW846 9045

---

RL = Reporting Limit

**Report of Analysis**

2.6  
2

<b>Client Sample ID:</b> SP003	<b>Date Sampled:</b> 07/19/06
<b>Lab Sample ID:</b> F42350-3A	<b>Date Received:</b> 07/21/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 67.3
<b>Project:</b> TO-17, MOD6: Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Lead	1.1	D008	5.0	0.050	mg/l	1	07/27/06	07/27/06 RS	SW846 6010B <sup>1</sup>	SW846 3010A <sup>2</sup>

(1) Instrument QC Batch: MA5118

(2) Prep QC Batch: MP9984

---

RL = Reporting Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)



## Misc. Forms

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## Custody Documents and Other Forms

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Includes the following where applicable:

- Chain of Custody



# CHAIN OF CUSTODY

4406 VINELAND ROAD • SUITE C-15  
ORLANDO, FL 32811  
TEL: 407-425-6700 • FAX: 407-425-0707

ACCUTEST JOB #: **F42350**

ACCUTEST QUOTE #:

CLIENT INFORMATION			FACILITY INFORMATION			ANALYTICAL INFORMATION										MATRIX CODES
<b>NAME:</b> R. Buckles <b>PROJECT NAME:</b> 70.17 - PA Police Crash <b>ADDRESS:</b> Suite 130, 0305 Jay Lane <b>CITY:</b> Gaens belt <b>STATE:</b> MD <b>ZIP:</b> <b>PHONE #:</b> 202-439-2901 <b>FAX #:</b> on file			<b>PROJECT NO.:</b> <b>LOCATION:</b> mod 6			(Grid for analytical data)										DW - DRINKING WATER GW - GROUND WATER WW - WASTE WATER SO - SOIL SL - SLUDGE OL - OIL LIQ - OTHER LIQUID SOL - OTHER SOLID
ACCUTEST SAMPLE #	FIELD ID / POINT OF COLLECTION	DATE	TIME	SAMPLED BY:	MATRIX	# OF BOTTLES	PRESERVATION					TCLP Pb	PH	Dfo	LAB USE ONLY	
							AC	NO	NO	NO	NO					
1	SPO05 Stack Pile (Grill)	7/19/06	1615	Rg	SO	1										
2	SPO04 ↓ ↓ ↓	↓	1600	↓	↓	↓										
3	SPO03 ↓ ↓ ↓	↓	1610	↓	↓	↓										
<b>DATA TURNAROUND INFORMATION</b> <input type="checkbox"/> STANDARD <input checked="" type="checkbox"/> 48 HOUR RUSH <input type="checkbox"/> 24 HOUR EMERGENCY <input type="checkbox"/> OTHER APPROVED BY: _____ EMERGENCY OR RUSH IS FAX DATA UNLESS PREVIOUSLY APPROVED			<b>DATA DELIVERABLE INFORMATION</b> <input type="checkbox"/> STANDARD <input type="checkbox"/> COMMERCIAL "B" <input type="checkbox"/> DISK DELIVERABLE <input type="checkbox"/> STATE FORMS <input type="checkbox"/> OTHER (SPECIFY) _____			<b>COMMENTS/REMARKS</b>   										
<b>SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION, INCLUDING COURIER DELIVERY</b>																
RELINQUISHED BY SAMPLER:		DATE TIME:		RECEIVED BY:		RELINQUISHED BY:		DATE TIME:		RECEIVED BY:		PRESERVE WHERE APPLICABLE			ON ICE	TEMPERATURE
1. R. Buckles		7/20/06/1500		1. Rg		2. Rg		7-21-06		2. [Signature]		<input type="checkbox"/>			<input type="checkbox"/>	7.8 C
3.				3.		4.				4.		<input type="checkbox"/>				
5.				5.		SEAL #						<input type="checkbox"/>				

3.1  
3

**ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION**

ACCUTEST'S JOB NUMBER: F42350 CLIENT: KSSI PROJECT: 10-17 Paradise Creek  
 DATE/TIME RECEIVED: 7-21-06/ 9:00 # OF COOLERS RECEIVED: 1 COOLER TEMPS: 2.6  
 METHOD OF DELIVERY: FEDEX UPS ACCUTEST COURIER GREYHOUND DELIVERY OTHER  
 AIRBILL NUMBERS: 8574-8740-2681

**COOLER INFORMATION**

- CUSTODY SEAL NOT PRESENT OR NOT INTACT
- CHAIN OF CUSTODY NOT RECEIVED (COC)
- ANALYSIS REQUESTED IS UNCLEAR OR MISSING
- SAMPLE DATES OR TIMES UNCLEAR OR MISSING
- TEMPERATURE CRITERIA NOT MET

**TRIP BLANK INFORMATION**

- TRIP BLANK NOT PROVIDED
- TRIP BLANK NOT ON COC
- TRIP BLANK INTACT
- TRIP BLANK NOT INTACT
- RECEIVED WATER TRIP BLANK
- RECEIVED SOIL TRIP BLANK

**MISC. INFORMATION**

NUMBER OF ENCORES ? 0  
 NUMBER OF 5035 FIELD KITS ? 0  
 NUMBER OR LAB FILTERED METALS ? 0

SUMMARY OF COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**SAMPLE INFORMATION**

- SAMPLE LABELS PRESENT ON ALL BOTTLES
- CORRECT NUMBER OF CONTAINERS USED
- SAMPLE RECEIVED IMPROPERLY PRESERVED
- INSUFFICIENT VOLUME FOR ANALYSIS
- TIMES ON COC DON'T MATCH LABEL
- ID'S ON COC DON'T MATCH LABEL
- VOC VIALS HAVE HEADSPACE (MACRO BUBBLES)
- BOTTLES RECEIVED BUT ANALYSIS NOT REQUESTED
- NO BOTTLES RECEIVED FOR ANALYSIS REQUESTED
- UNCLEAR FILTERING INSTRUCTIONS
- UNCLEAR COMPOSITING INSTRUCTIONS
- SAMPLE CONTAINER(S) RECEIVED BROKEN
- % SOLIDS JAR NOT RECEIVED
- 5035 FIELD KIT FROZEN WITHIN 48 HOUR'S

TECHNICIAN SIGNATURE/DATE: Stacy Crum/7-21-06 TECHNICIAN SIGNATURE/DATE \_\_\_\_\_

ASBD03/27/06

# GRID 8

## WASTE PACKAGE INCLUDES:

- WM Application
- SPSW form Application
- Map
- Full TCLP results Grid 8 only
- Additional Grid 8 samples:
  - TPH – DRO
  - pH
  - TCLP – lead only

DEPARTMENT OF ENVIRONMENTAL QUALITY  
TIDEWATER REGIONAL OFFICE

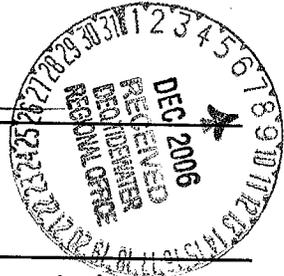
Company Name: SHAW (S)

Person delivering item: TAYLOR SWORD  
(PRINT)

Item delivered: GRIND 8, GRIND 1-23, 79 PKGS

Received By: Barbara A Jones  
(PRINT)

(Signature) *Barbara A Jones*



(Date of Receipt)

**Waste Management Application**

**Navy Signature req'd**



**GENERATOR'S WASTE PROFILE SHEET**  
PLEASE PRINT IN INK OR TYPE

Service Agreement on File?  YES  NO  
 Hazardous  Non-Hazardous  TSCA

Profile Number: WMI \_\_\_\_\_  
 Renewal Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**A. Waste Generator Information**

- |   |  |
|---|--|
| 1. Generator Name: <u>Commander, Navy Region Mid-Atlantic (CNRMA)</u> | 2. SIC Code: _____                                     |
| 3. Facility Street Address: <u>1510 Gilbert St,</u>                   | 4. Phone: <u>(757) 445-6703</u>                        |
| 5. Facility City: <u>Norfolk</u>                                      | 6. State/Province: <u>VA</u>                           |
| 7. Zip/Postal Code: <u>23511-2737</u>                                 | 8. Generator USEPA/Federal ID #: <u>NOT APPLICABLE</u> |
| 9. County: _____  | 10. State/Province ID #: <u>NOT APPLICABLE</u>         |
| 11. Customer Name: <u>Capital Environmental NAVFAC</u>                | 12. Customer Phone: <u>(804)239-9968 757 444-6850</u>  |
| 13. Customer Contact: <u>Matt Gemmel TMZELSH</u>                      | 14. Customer Fax: <u>804-798-3326 757 444-5925</u>     |
| 15. Billing Address _____   | <input type="checkbox"/> Same as above                 |

**B. Waste Stream Information**

1. Description

- a. Name of Waste: Soil contaminated with Wood Debris  
 b. Process Generating Waste: Excavation

c. Color <u>gray to black</u>	d. Strong odor (describe): <u>none</u>	e. Physical state @ 70°F <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> Sludge <input type="checkbox"/> Other	f. Layers <input checked="" type="checkbox"/> Single Layer <input type="checkbox"/> Multi-layer	g. Free liquid range <u>n/a to</u> %  h. pH: Range <u>11 to 12</u>
----------------------------------	---	---	---	--

- i. Liquid Flash Point:  <73°F  73-99°F  100-139°F  140-199°F  ≥ 200°F  Not applicable  
 j. Chemical Composition (List all constituents [including halogenated organics, debris, and UHC's] present in any concentration and submit representative analysis):

Constituents	Concentration Range	Constituents	Concentration Range
<u>See attached analytical</u>			

**TOTAL COMPOSITION MUST EQUAL OR EXCEED 100%**

Check all that apply:

- k.  Oxidizer  Pyrophoric  Explosive  Radioactive  
 Carcinogen  Infectious  Shock Sensitive  Water Reactive
- l. Does the waste represented by this profile contain any of the carcinogens which require OSHA notification? (list in Section B.1.j).....  YES  NO
- m. Does the waste represented by this profile contain dioxins? (list in Section B.1.j).....  YES  NO
- n. Does the waste represented by this profile contain asbestos?.....  YES  NO  
 If yes.....  friable  non-friable
- o. Does the waste represented by this profile contain benzene?.....  YES  NO  
 If yes, concentration \_\_\_\_\_ ppm  
 Is the waste subject to the benzene waste operations NESHP?.....  YES  NO
- p. Is the waste subject to RCRA Subpart CC controls?.....  YES  NO  
 If yes, volatile organic concentration \_\_\_\_\_ ppmw
- q. Does the waste contain any Class I or Class II ozone-depleting substances?.....  YES  NO
- r. Does the waste contain debris? (list in Section B.1.j).....  YES  NO

2. Quantity of Waste

Estimated Annual Volume ~3000 cy  Tons  Yards  Drums  Other (specify) \_\_\_\_\_

3. Shipping Information

- a. Packaging:  
 Bulk Solid; Type/Size: dump trucks  Bulk Liquid; Type/Size: \_\_\_\_\_  
 Drum; Type; Size: \_\_\_\_\_  Other: \_\_\_\_\_
- b. Shipping Frequency: Units truck loads Per:  Month  Quarter  Year  One time  Other
- c. Is this a U.S. Department of Transportation (USDOT) Hazardous Material? (If no, skip d, e, and f).....  YES  NO



**GENERATOR'S WASTE PROFILE SHEET** Profile Number: WMI  
PLEASE PRINT IN INK OR TYPE

- d. Reportable Quantity (lbs.; kgs.): \_\_\_\_\_ e. Hazard Class/ID #: \_\_\_\_\_  
 f. USDOT Shipping Name: \_\_\_\_\_  
 g. Personal Protective Equipment Requirements: \_\_\_\_\_  
 h. Transporter/Transfer Station: \_\_\_\_\_

**C. Generator's Certification** (Please check appropriate responses, sign, and date below.)

1. Is this a USEPA hazardous waste (40 CFR Part 261)? If the answer is no, skip to 2.  YES  NO
  - a. If yes, identify ALL USEPA listed and characteristic waste code numbers (D, F, K, P, U) \_\_\_\_\_
  - b. If a characteristic hazardous waste, do underlying hazardous constituents (UHCs) apply? (if yes, list in Section B.1.j)  YES  NO
  - c. Does this waste contain debris? (if yes, list size and type in Chemical Composition - B.1.)  YES  NO
2. Is this a state hazardous waste?  YES  NO  
 Identify ALL state hazardous waste codes \_\_\_\_\_
3. Is the waste from a CERCLA (40 CFR 300, Appendix B) or state mandated clean-up?  YES  NO  
 If yes, attach Record of Decision (ROD), 104/106 or 122 order or court order that governs site clean-up activity. For state mandated clean-up, provide relevant documentation.
4. Does the waste represented by this waste profile sheet contain radioactive material, or is disposal regulated by the Nuclear Regulatory Commission?  YES  NO
5. Does the waste represented by this waste profile sheet contain concentrations of Polychlorinated Biphenyls (PCBs) regulated by 40 CFR 761? (if yes, list in Chemical Composition - B.1.j)  YES  NO
  - a. If yes, were the PCBs imported into the U.S.?  YES  NO
6. Do the waste profile sheet and all attachments contain true and accurate descriptions of the waste material, and has all relevant information within the possession of the Generator regarding known or suspected hazards pertaining to the waste been disclosed to the Contractor?  YES  NO
7. Will all changes which occur in the character of the waste be identified by the Generator and disclosed to the Contractor prior to providing the waste to the Contractor?  YES  NO

Check here if a Certificate of Destruction or Disposal is required.

Any sample submitted is representative as defined in 40 CFR 261 - Appendix I or by using an equivalent method. I authorize WMI to obtain a sample from any waste shipment for purposes of recertification. If this certification is made by a broker, the undersigned signs as authorized agent of the generator and has confirmed the information contained in this Profile Sheet from information provided by the generator and additional information as it has determined to be reasonably necessary. If approved for management, Contractor has all the necessary permits and licenses for the waste that has been characterized and identified by this approved profile.

Certification Signature: [Signature] Title: Project Manager - Env. Ops.  
 Name (Type or Print): THOMAS H. REISCH Company Name: WMPAC Env. Cons. Date: 12/1/2006

Check if additional information is attached. Indicate the number of attached pages \_\_\_\_\_

D. WMI Management's Decision	FOR WMI USE ONLY
1. Management Method <input type="checkbox"/> Landfill <input type="checkbox"/> Non-hazardous Solidification <input type="checkbox"/> Bioremediation <input type="checkbox"/> Incineration <input type="checkbox"/> Hazardous Stabilization <input type="checkbox"/> Other (Specify) _____	
2. Proposed Ultimate Management Facility: _____	
3. Precautions, Special Handling Procedures, or Limitation on Approval: _____ _____	
Special Waste Decision: _____	<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved
Salesperson's Signature: _____	Date: _____
Division Approval Signature (Optional): _____	Date: _____
Special Waste Approvals Person Signature: _____	Date: _____



## GENERATOR'S WASTE PROFILE SHEET

PLEASE PRINT IN INK OR TYPE

### Instructions

Information on this form is used to determine if the waste may be transported, treated, stored or disposed in a legal, safe, and environmentally sound manner. This information will be maintained in strict confidence. Answers must be provided for sections A, B, and C and must be printed in ink or typed. A response of "NONE" or "NA" (not applicable) can be made if appropriate. If additional space is needed, indicate on the form that additional information is attached, and attach the information to Generator's Waste Profile Sheet. If you have questions concerning this form, please contact the Contractor's sales representative.

#### A. Waste Generator Information

1. **Generator Name** - Enter the name of the facility where the waste is generated.
2. **SIC Code** - Enter the four digit Standard Industrial Classification Code for the facility where the waste is generated.
3. **Facility Street Address** - Enter the street address (not P.O. Box) of the facility where the waste is generated.
4. **Phone** - Enter Generator's area code and phone number.
5. **Facility City** - Enter the city where the waste is generated.
6. **State/Province** - Enter the state or province where the waste is generated.
7. **Zip/Postal Code** - Enter the generating facility's zip or postal code.
8. **Generator USEPA/Federal ID #** - Enter the identification number issued by the USEPA, Canadian, or Mexican Federal Agency to the facility generating the waste (if applicable).
9. **County** - Enter the county where the waste is generated.
10. **State/Province ID #** - Enter the identification number issued by the state or province to the facility generating the waste (if applicable).
11. **Customer Name** - Entity that the Contractor is directly working with regarding the represented waste stream. If the same as the Generator, mark "Same as Above".
12. **Customer Phone** - Enter technical contact's area code and telephone number.
13. **Customer Contact** - Enter the name of the person who can answer technical questions about the waste.
14. **Customer Fax** - Area code and facsimile number for the customer.
15. **Billing Address** - Address where bill for services should be sent.

#### B. Waste Stream Information

- 1.a. **Name of Waste** - Enter a name generally descriptive of this waste (e.g., paint sludge, fluorescent bulbs).
- 1.b. **Process Generating Waste** - Describe the process generating the waste in detail. List the specific process/operation or source that generates the waste (e.g., incineration of municipal refuse, asbestos removal, wastewater treatment, building maintenance).  
At a minimum, the Generator should answer the following questions in determining the process generating the waste.
  - What chemicals are stored and/or used at the facility?
  - Is the waste generated from the production/manufacturing of any of the following industries: wood preservation; inorganic pigments; organic pigments; pesticides; explosives; petroleum refining; iron and steel, copper, lead or zinc production?
  - Is the waste a result from degreasing, solvent parts cleaning, recovery/reclaiming of solvents (bottoms), wastewater treatment (sludges), or electroplating?
- 1.c. **Color** - Describe the color of the waste (e.g., blue, transparent, varies).
- 1.d. **Strong odor** - **DO NOT SMELL THE WASTE!** If the waste has a known odor, then describe (e.g., acrid, pungent, solvent, sweet).
- 1.e. **Physical state @ 70°F** - If the four boxes provided do not apply, a descriptive phrase may be entered after "Other" (e.g., multi-phase).
- 1.f. **Layers** - Single Layer means the waste is homogenous. Multi-layer means the waste is comprised of two or more layers (e.g., oil/water/sludge).
- 1.g. **Free liquid range** - Range (in percent by volume) of free liquids in the waste.
- 1.h. **pH Range** - Indicate the pH range.
- 1.i. **Liquid Flash Point** - Indicate the flash point obtained using the appropriate test method.
- 1.j. **Chemical Composition** - List all organic and/or inorganic components of the waste using chemical names. If trade names are used, attach Material Safety Data Sheets or other documents that adequately describe the composition of the waste. For each component, estimate the range (in percent) in which the component is present.
- 1.k. Check all that apply.
  - 1.l. Identify any element, chemical compound, or mixture in concentration of 0.1 percent or greater that is considered a carcinogen or potential carcinogen pursuant to OSHA.
  - 1.m. Indicate if the waste contains any dioxins (list in Section B.1.j).
  - 1.n. Indicate if the waste contains asbestos. Indicate if the asbestos is friable.
  - 1.o. Indicate if the waste contains benzene, the level in ppm, and whether it is subject to the benzene NESHAP.
  - 1.p. Indicate if the waste is subject to RCRA Subpart CC control. In addition, indicate the volatile organic concentration, if known, in parts per million weight.
  - 1.q. Indicate if the waste contains any Class I or Class II ozone-depleting controlled substances.
  - 1.r. Indicate if the waste contains debris (list size and type in B.1.j).
2. **Quantity of Waste** - Approximate volume in tons, yards, or other (e.g., drums, gallons) that will be received by the ultimate management facility. This volume amount is not intended for use in complying with state and/or permit restrictions.
- 3.a. **Packaging** - Choose the appropriate option or "other" along with a description.
- 3.b. **Shipping Frequency** - Choose the appropriate option or "other" along with a description.
- 3.c. **Is this a U.S. Department of Transportation (USDOT) hazardous material?** - Choose the appropriate response: yes or no.
- 3.d. **Reportable Quantity (lbs.; kgs.)** - If the answer to 3.c. is yes, enter the Reportable Quantity (RQ) established by 40 CFR 302.4 or equivalent Canadian or Mexican regulation for this waste. Indicate the appropriate units for the RQ.
- 3.e. **Hazard Class/ID #** - If the answer to 3.c. is yes, indicate the proper USDOT hazard class and identification number.
- 3.f. **USDOT Shipping Name** - If the answer to 3.c. is yes, enter the proper USDOT shipping name for the waste.
- 3.g. **Personal Protective Equipment Requirements** - All personal protective equipment necessary to safely manage the waste stream.
- 3.h. **Transporter/Transfer Station** - Transporter and/or transfer station name.



**GENERATOR'S WASTE PROFILE SHEET**  
PLEASE PRINT IN INK OR TYPE

**C. Generator's Certification** (Please check appropriate responses, sign, and date below.)

Indicate the appropriate response to questions/statements 1, 2, 3, 4, 5, 6, and 7. By signing this Generator's Waste Profile Sheet, the Generator certifies the responses are true and accurate with respect to the waste stream(s) listed.

**Certification Signature** - Signature of an authorized employee of the Generator or representative of the generator if authorized in writing by the generator.

**Title** - Enter Employee's title.

**Name** - Type or Print Employee's name.

**Company Name** - Company employing the person certifying the Generator's Waste Profile Sheet.

**Date** - Enter the date this Generator's Waste Profile Sheet is signed.

**D. WMI Management's Decision**

FOR WMI USE ONLY

To be completed by WMI.

**SPSW-2 FORM**

**Signature Required**

**Form SPSW-2**  
**SPECIAL WASTE DISPOSAL REQUEST**  
**GENERATOR INFORMATION**

Section I. Generator Identification:

a. Generator Name: Commander, Navy Region Mid-Atlantic

b. Generator Address: 1510 Gilbert St, Norfolk VA, 23511-2737

-----

c. Generator Phone: Crystal St. Clair-Canaii (757)445-6775 /

Tim Reisch (757) 444-6890

Section II. General Waste Profile:

Note: It is the duty of all persons to dispose of their solid waste in a legal manner (Va.Code ' 10.1-1418.1.A). In addition, any person who generates a solid waste shall determine if that waste is a hazardous waste (' 6.1 of the Virginia Hazardous Waste Management Regulations (VR 672-10-1) ("VHWMR")).

a. General description of waste, including its state (e.g., solid liquid, semi-solid, gas):

Solid material that includes Soil and debris (concrete and wood) consistent with construction debris mixed with Portland cement.

-----

b. Amount of materials proposed for disposal:

Volume or Weight approximately 3,000

Units cubic yards

The initial full TCLP sampling results from Grid 8 identified this grid for in-situ stabilization. Upon completion of the in-situ stabilization, additional waste characterization samples (TCLP – Pb only, TPH, and pH) were collected from the grid based on rate of 1 sample per 500 CY based on the initial volume estimate of 1, 500 CY for the grid. However, when excavated and staged for disposal, the volume of debris from grid was conservatively estimated, assuming the staged waste was rectangular in shape, to be 3033 CY, which did not conform to the characterization sampling rate of 1 per 500 CY. VDEQ was made aware of this situation and conservative assumption, and requested additional information. Accurate field measurements of the staged waste were taken to define the volumes for off-site disposal. Based on these accurate volume calculations, 2,914 CY of waste was excavated from Grid 8.

In consideration of the homogeneous nature of the mixed material and the sampling methodology to ensure the sampling was representative of the waste, the sampling waste characterization data provide herein is deemed adequate to characterize the debris for disposal.

- c. Activities or processes from which the waste was generated, including process flow diagrams specifically addressing the waste stream(s), a description of the source of the waste, and a statement of whether the waste was formerly managed as a hazardous waste.

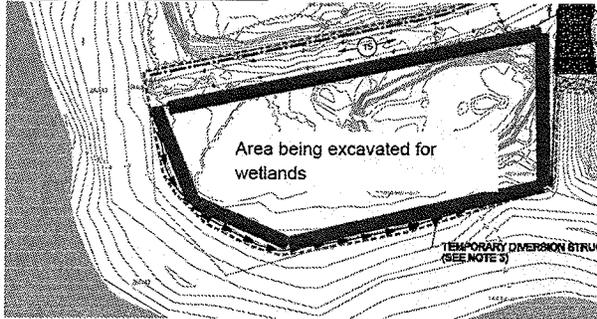
This waste material is being generated as a result of the excavation for construction of an engineered wetlands. The material was deposited originally as fill material adjacent to the toe of a former landfill operated by Norfolk Naval Shipyard (NNSY). On top of the fill a calcium hydroxide berm impoundment was built. That impoundment has been removed. The remaining fill material dimensional lumber, (wood debris) and soil mix needs to be removed to accommodate the construction of an engineered landfill.

NOTE: Attach a flow diagram and indicate any deletions due to proprietary or trade secret information. The Department cannot protect proprietary information or trade secrets.

- d. Location of generation:

The removal site is located between Paradise Creek on the southern boundary, and the northern boundary is the NNSY former Eastern Area Landfill and the Western Area Landfill.

The area being excavated is on a bend in Paradise Creek : Attached map shows GRID 8 AREA SPECIFICALLY



e. Method of transportation:

Describe the manner in which the material is being transported for disposal (e.g., bulk containers):

Bulk shipment via Dump Trucks

f. Testing results

PARAMETER	ANALYZED (METHOD)	NOT ANALYZED (REASON)	RESULTS INCLUDED
Corrosivity	SW 846, Chapter 7	N/a	See attached analysis
Ignitability	SW 846 1010	N/a	See attached analysis
TCLP (a - e) only			
a. Metals	See attached table	N/a	See attached analysis
b. Volatile Organics	See attached table	N/a	See attached analysis
c. Semi-Volatile Organics	See attached table	N/a	See attached analysis
d. Pesticides	See attached table	N/a	See attached analysis
e. Herbicides	See attached table	N/a	See attached analysis
Total Metals		TCLP	N
Volatile Organics		TCLP	N
Semi-Volatile Organics		TCLP	N

Pesticides		TCLP	N
Herbicides		TCLP	N
PCB's	SW846 8082	N/a	See attached analysis
Paint Filter Test		To be performed during removal action	N
Radioactive Waste		Previous investigation, site history	N
Asbestos		Previous investigation, site history	N
Percent Solids	EPA 160.3		w/ TCLP results
TOX		Previous investigation, site history	N
TPH <sup>1</sup>	SW 846 8015M	N/a	See attached analysis

g. Sample location map included: Yes (xx ) No ( )

Section III. Generator Certification:

I hereby certify, based upon my diligent inquiry into the activities, materials, and processes generating the materials described on this form:

1. That these materials are not classified as listed or characteristic hazardous waste governed by the Commonwealth of Virginia or the state of origin of this waste;
2. That the materials are not regulated medical waste governed by the Virginia Regulated Medical Waste Management Regulations (VR 672-40-01);
3. That the materials do not contain 50.0 parts per million or more of polychlorinated biphenyls (PCB's);
4. That the materials do not contain more than 1.0 part per billion of dioxins;  
*There is no reason to expect presence of dioxins.*
5. That the material is not a radioactive waste or possess the property of radioactivity;

1.

TPH DRO samples are to be taken during removal prior to disposal for meeting disposal facility criteria at the frequency of 1 per 500 cubic yards material.

6. That the materials are not prohibited or restricted from disposal in a Virginia solid waste management facility; and
7. That the analytical results, completed application and attached documentation submitted in support of this special waste disposal request are a representative, true, and accurate description of these materials.

Print Name: Crystal St. Clair-Camaii

Title: Regional Hazardous Waste Program Manager

Signature: Crystal St. Clair-Camaii Date: 12/16/06

Notary Statement

State of NORFOLK

County of VERBENA

On 6th DAY OF DECEMBER, 2006, Crystal St. Clair-Canis  
personally appeared before me,

\_\_\_\_\_ who is personally known to me

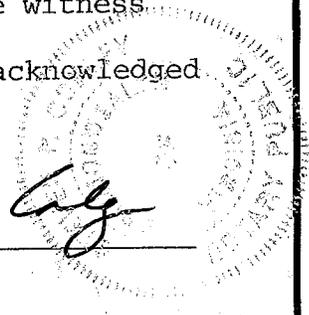
whose identity I proved on the basis of CIVILIAN  
military dependent to Coast Guard Employee

\_\_\_\_\_ whose identity I proved on the oath/affirmation of  
\_\_\_\_\_, a credible witness.

to be the signer of the above document, and he/she acknowledged  
that he/she signed it.

Steve P. Long

Notary Public



# **Map – Grid 8 Location**

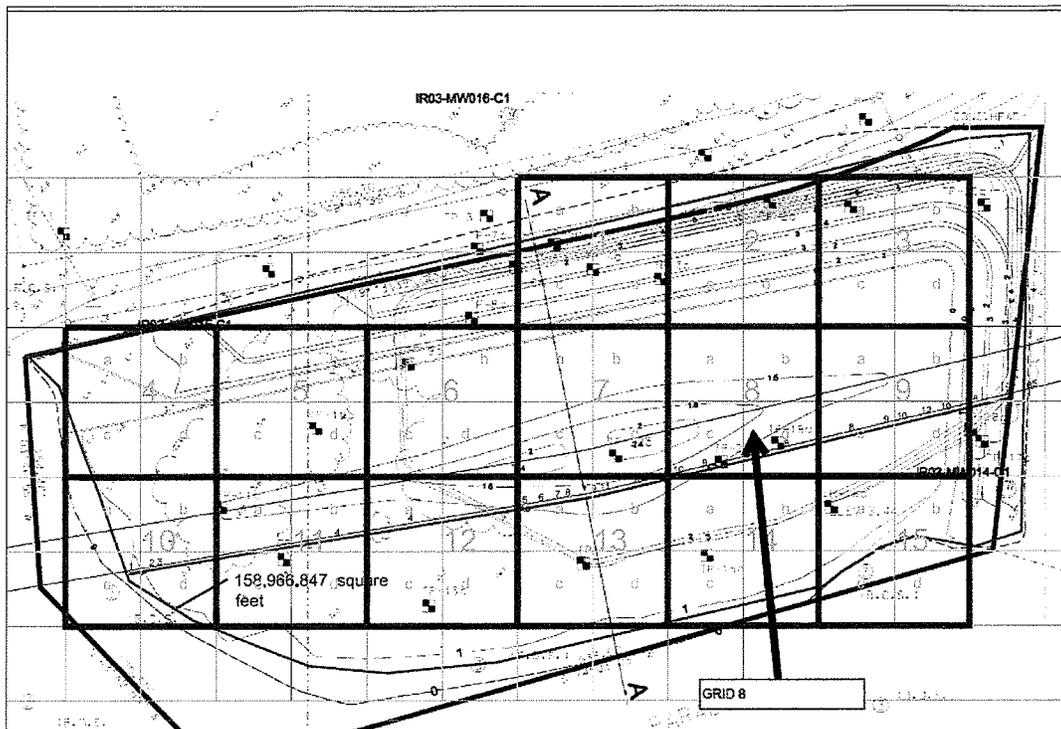
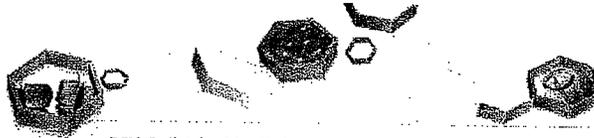


Figure 1

# **Full TCLP Results – Grids 8 Only**



IT'S ALL IN THE CHEMISTRY

08/03/06



**Technical Report for**

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**Shaw E & I, Inc.**

**Paradise Creek**

**116539**

**Accutest Job Number: F42307**

**Sampling Date: 07/18/06**

---

**Report to:**

**Shaw E & I, Inc.  
5700 Thurston Ave. Suite 116-B  
Virginia Beach, VA 23455  
natasha.sullivan@shawgrp.com**

**ATTN: Natasha Sullivan**

**Total number of pages in report: 102**



Test results contained within this data package meet the requirements of the National Environmental Laboratory Accreditation Conference and/or state specific certification programs as applicable.

*Harry Behzadi*  
**Harry Behzadi, Ph.D.**  
**Laboratory Director**

Certifications: FL (DOH E83510), NC (573), NJ (FL002), MA (FL946), IA (366), LA (03051), KS (E-10327), SC, AK  
This report shall not be reproduced, except in its entirety, without the written approval of Accutest Laboratories.

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**Sample Summary**

Shaw E &amp; I, Inc.

Job No: F42307

Paradise Creek  
Project No: 116539

Sample Number	Collected Date	Time By	Received	Matrix Code	Type	Client Sample ID
F42307-1	07/18/06	07:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID007
F42307-1A	07/18/06	07:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID007
F42307-2	07/18/06	08:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID008
F42307-2A	07/18/06	08:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID008
F42307-3	07/18/06	09:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID009
F42307-3A	07/18/06	09:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID009
F42307-4	07/18/06	10:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID0113
F42307-4A	07/18/06	10:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID0113
F42307-5	07/18/06	11:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID014
F42307-5A	07/18/06	11:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID014

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Soil samples reported on a dry weight basis unless otherwise indicated on result page.



**Sample Results**

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**Report of Analysis**

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**Report of Analysis**

2.3  
2

<b>Client Sample ID:</b> PC-TP-116539-GRID008	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-2	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 69.2
<b>Method:</b> SW846 8015	
<b>Project:</b> Paradise Creek	

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	CD070185.D	1	07/21/06	MM	n/a	n/a	GCD2898
Run #2							

	Initial Weight	Final Volume	Methanol Aliquot
Run #1	4.28 g	5.0 ml	100 ul
Run #2			

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	11	5.3	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
460-00-4	4-Bromofluorobenzene	86%		62-135%
98-08-8	aaa-Trifluorotoluene	86%		65-118%

(a) Sample was received in a bulk container but was not preserved within 48 hours of sampling.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID008	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-2	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 69.2
<b>Method:</b> SW846 8082 SW846 3550B	
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	ST49815.D	10	07/28/06	NAF	07/25/06	OP17353	GST1443
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.2 g	10.0 ml
Run #2		

**PCB List**

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	240	120	ug/kg	
11104-28-2	Aroclor 1221	ND	240	190	ug/kg	
11141-16-5	Aroclor 1232	ND	240	190	ug/kg	
53469-21-9	Aroclor 1242	ND	240	120	ug/kg	
12672-29-6	Aroclor 1248	ND	240	120	ug/kg	
11097-69-1	Aroclor 1254	ND	240	120	ug/kg	
11096-82-5	Aroclor 1260	ND	240	120	ug/kg	
11100-14-4	Aroclor 1268	168	240	120	ug/kg	J
	Total PCBs	168	480		ug/kg	J

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	110%		52-136%
2051-24-3	Decachlorobiphenyl	313% <sup>b</sup>		49-148%

(a) All hits confirmed by dual column analysis. Dilution required due to matrix interference.  
 (b) Outside control limits due to dilution.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

2.3  
2

<b>Client Sample ID:</b> PC-TP-116539-GRID008	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-2	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 69.2
<b>Method:</b> SW846 8015 M SW846 3550B	
<b>Project:</b> Paradise Creek	

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	ZF20827.D	4	07/27/06	ME	07/26/06	OP17355	GZF978
Run #2							

	Initial Weight	Final Volume
Run #1	30.9 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	631	47	28	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	62%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID008	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-2	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 69.2
<b>Project:</b> Paradise Creek	

### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Corrosivity as pH	7.5			1	07/21/06	EM	SW846 CHAP7
Cyanide Reactivity	< 1.8	1.8	mg/kg	1	07/25/06	SJL	SW846 CHAP7
Ignitability (Flashpoint) <sup>a</sup>	> 200		Deg. F	1	07/21/06	CP	SW846 1010
Solids, Percent	69.2		%	1	07/20/06	KG	EPA 160.3 M
Sulfide Reactivity	< 50	50	mg/kg	1	07/25/06	LE	SW846 CHAP7

(a) Not ignitable

RL = Reporting Limit

Report of Analysis

2.4  
2

<b>Client Sample ID:</b> PC-TP-116539-GRID008	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-2A	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 69.2
<b>Method:</b> SW846 8260B SW846 1311	
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	C0042613.D	10	08/03/06	KW	07/31/06	OP17412	VC1721
Run #2							

Run #	Purge Volume
Run #1	5.0 ml
Run #2	

VOA TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
71-43-2	Benzene	ND	D018	0.50	0.010	0.0050	mg/l	
108-90-7	Chlorobenzene	ND	D021	100	0.020	0.0050	mg/l	
67-66-3	Chloroform	ND	D022	6.0	0.020	0.0050	mg/l	
56-23-5	Carbon tetrachloride	ND	D019	0.50	0.020	0.0050	mg/l	
75-35-4	1,1-Dichloroethylene	ND	D029	0.70	0.020	0.0050	mg/l	
107-06-2	1,2-Dichloroethane	ND	D028	0.50	0.020	0.0050	mg/l	
106-46-7	p-Dichlorobenzene	ND	D027	7.5	0.020	0.0050	mg/l	
78-93-3	Methyl ethyl ketone	ND	D035	200	0.10	0.025	mg/l	
127-18-4	Tetrachloroethylene	ND	D039	0.70	0.020	0.0050	mg/l	
79-01-6	Trichloroethylene	ND	D040	0.50	0.020	0.0050	mg/l	
75-01-4	Vinyl chloride	ND	D043	0.20	0.010	0.0050	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	107%		86-115%
2037-26-5	Toluene-D8	100%		86-112%
460-00-4	4-Bromofluorobenzene	105%		83-119%
17060-07-0	1,2-Dichloroethane-D4	111%		73-126%

ND = Not detected MDL - Method Detection Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)  
E = Indicates value exceeds calibration range

J = Indicates an estimated value  
B = Indicates analyte found in associated method blank  
N = Indicates presumptive evidence of a compound

## Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID008		<b>Date Sampled:</b> 07/18/06	
<b>Lab Sample ID:</b> F42307-2A		<b>Date Received:</b> 07/20/06	
<b>Matrix:</b> SO - Soil		<b>Percent Solids:</b> 69.2	
<b>Method:</b> SW846 8270C SW846 3510C			
<b>Project:</b> Paradise Creek			

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	R04133.D	1	08/02/06	NJ	07/31/06	OP17413	SR195
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	1.0 ml
Run #2		

## ABN TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	D023	200	0.050	0.020	mg/l	
	3&4-Methylphenol	ND	D024	200	0.050	0.020	mg/l	
87-86-5	Pentachlorophenol	ND	D037	100	0.25	0.10	mg/l	
95-95-4	2,4,5-Trichlorophenol	ND	D041	400	0.050	0.020	mg/l	
88-06-2	2,4,6-Trichlorophenol	ND	D042	2.0	0.050	0.020	mg/l	
106-46-7	1,4-Dichlorobenzene	ND	D027	7.5	0.050	0.010	mg/l	
121-14-2	2,4-Dinitrotoluene	ND	D030	0.13	0.050	0.020	mg/l	
118-74-1	Hexachlorobenzene	ND	D032	0.13	0.050	0.010	mg/l	
87-68-3	Hexachlorobutadiene	ND	D033	0.50	0.050	0.020	mg/l	
67-72-1	Hexachloroethane	ND	D034	3.0	0.050	0.020	mg/l	
98-95-3	Nitrobenzene	ND	D036	2.0	0.050	0.010	mg/l	
110-86-1	Pyridine	ND	D038	5.0	0.10	0.030	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
367-12-4	2-Fluorophenol	27%		19-90%
4165-62-2	Phenol-d5	16%		10-68%
118-79-6	2,4,6-Tribromophenol	80%		36-137%
4165-60-0	Nitrobenzene-d5	76%		49-119%
321-60-8	2-Fluorobiphenyl	74%		45-118%
1718-51-0	Terphenyl-d14	84%		46-135%

ND = Not detected    MDL - Method Detection Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)  
E = Indicates value exceeds calibration range

J = Indicates an estimated value  
B = Indicates analyte found in associated method blank  
N = Indicates presumptive evidence of a compound

### Report of Analysis

2.4  
2

<b>Client Sample ID:</b> PC-TP-116539-GRID008	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-2A	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 69.2
<b>Method:</b> SW846 8081A SW846 3510C	
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	KK13808.D	1	08/01/06	AA	07/31/06	OP17414	GKK523
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

**Pesticide TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	D013	0.40	0.00050	0.00020	mg/l	
12789-03-6	Chlordane	ND	D020	0.030	0.0050	0.0025	mg/l	
72-20-8	Endrin	ND	D012	0.020	0.0010	0.00040	mg/l	
76-44-8	Heptachlor	ND	D031	0.0080	0.00050	0.00020	mg/l	
1024-57-3	Heptachlor epoxide	ND	D031	0.0080	0.00050	0.00020	mg/l	
72-43-5	Methoxychlor	ND	D014	10	0.0010	0.00040	mg/l	
8001-35-2	Toxaphene	ND	D015	0.50	0.025	0.015	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	85%		60-138%
2051-24-3	Decachlorobiphenyl	51%		31-148%

ND = Not detected      MDL - Method Detection Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)  
E = Indicates value exceeds calibration range

J = Indicates an estimated value  
B = Indicates analyte found in associated method blank  
N = Indicates presumptive evidence of a compound

**Report of Analysis**

2.4  
2

<b>Client Sample ID:</b> PC-TP-116539-GRID008	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-2A	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 69.2
<b>Method:</b> SW846 8151 SW846 3510C	
<b>Project:</b> Paradise Creek	

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	DD57600.D	1	07/31/06	ATX	07/28/06	T:OP6178	T:GDD1085
Run #2							

	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

**Herbicide TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
94-75-7	2,4-D	ND	D016	10	0.015	0.011	mg/l	
93-72-1	2,4,5-TP (Silvex)	ND	D017	1.0	0.0020	0.00060	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
19719-28-9	2,4-DCAA	127%		23-171%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

ND = Not detected      MDL - Method Detection Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)  
E = Indicates value exceeds calibration range

J = Indicates an estimated value  
B = Indicates analyte found in associated method blank  
N = Indicates presumptive evidence of a compound

**Report of Analysis**

<b>Client Sample ID:</b> PC-TP-116539-GRID008	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-2A	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 69.2
<b>Project:</b> Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Arsenic <sup>a</sup>	0.017 B	D004	5.0	0.020	0.0056	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Barium	1.9	D005	100	1.0	0.20	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Cadmium	0.073	D006	1.0	0.0050	0.00030	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Chromium	0.020	D007	5.0	0.010	0.00060	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Lead	22.2	D008	5.0	0.50	0.017	mg/l	10	07/31/06	08/01/06	RS SW846 6010B <sup>3</sup>
Mercury	0.0010 U	D009	0.20	0.010	0.0010	mg/l	1	08/01/06	08/01/06	MS SW846 7470A <sup>2</sup>
Selenium <sup>a</sup>	0.040 B	D010	1.0	0.10	0.040	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Silver	0.00090 U	D011	5.0	0.010	0.00090	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>

- (1) Instrument QC Batch: MA5127
- (2) Instrument QC Batch: MA5128
- (3) Instrument QC Batch: MA5130
- (4) Prep QC Batch: MP10008
- (5) Prep QC Batch: MP10014

(a) Elevated RL/MDL due to positive bias of Method Blank.

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result > = MDL but < RL



## Misc. Forms

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## Custody Documents and Other Forms

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Includes the following where applicable:

- Chain of Custody

F42307

CHAIN-OF-CUSTODY RECORD

COC Number: 116539-7.18.08  
Purchase Order Number:



SHAW Environmental & Infrastructure, P.C. - 5700 Timberstone Ave Suite 116B - Virginia Beach, VA 23455 (757) 363 7190

Client/Project		Address		City/State/Zip		Phone/Fax		Sample Description		Field TUP + ICI 8/16/06	ICEL: 8/16/06 2002	TPH: 8/16/06 8/16/06 8/16/06									
Accutest		4405 Vineland Road Suite C-1, Orlando FL 32811		Orlando FL		(407) 428-6780															
Paradise Creek		Disposal Samples																			
116539		Natasha Kelley Sullivan		(410) 528-7598																	
Shaw		Taylor Sword																			
Item #	Location	Date	Time	Temp	Volume	Container	Analysis	Remarks	Field TUP + ICI 8/16/06	ICEL: 8/16/06 2002	TPH: 8/16/06 8/16/06 8/16/06										
1	PC-TP-116539-GRD007	07/18/08	0700		X	3 x 8 ounce, 2 x 4 ounce soil jar			X	X	X										
2	PC-TP-116539-GRD008	07/18/08	0800		X	3 x 8 ounce, 2 x 4 ounce soil jar			X	X	X										
3	PC-TP-116539-GRD009	07/18/08	0900		X	3 x 8 ounce, 2 x 4 ounce soil jar			X	X	X										
4	PC-TP-116539-GRD0113	07/18/08	1000		X	3 x 8 ounce, 2 x 4 ounce soil jar			X	X	X										
5	PC-TP-116539-GRD014	07/18/08	1100		X	3 x 8 ounce, 2 x 4 ounce soil jar			X	X	X										
6																					
7																					
8																					
9																					
10																					

Transportation Method:  14 Day TAT  Other: \_\_\_\_\_  
 Transported By: Brooks Mourain, SHAW

Item #	Location	Date	Time	Temp	Volume	Container	Analysis	Remarks
1	Brooke Mourain	7/19/2008	1600				URS	
2	URS						ARZALRE	7/20/08 1030
3								
4								

24

**ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION**

ACCUTEST'S JOB NUMBER: F42307 CLIENT: Shaw PROJECT: Paradise Creek  
 DATE/TIME RECEIVED: 1030 7/29/06 # OF COOLERS RECEIVED: 1 COOLER TEMPS: 2.4  
 METHOD OF DELIVERY: FEDEX  **UPS**  ACCUTEST COURIER GREYHOUND DELIVERY OTHER  
 AIRBILL NUMBERS: 12 68V 742 01 9200 1298

**COOLER INFORMATION**

- CUSTODY SEAL NOT PRESENT OR NOT INTACT
- CHAIN OF CUSTODY NOT RECEIVED (COC)
- ANALYSIS REQUESTED IS UNCLEAR OR MISSING
- SAMPLE DATES OR TIMES UNCLEAR OR MISSING
- TEMPERATURE CRITERIA NOT MET

**TRIP BLANK INFORMATION**

- TRIP BLANK NOT PROVIDED
- TRIP BLANK NOT ON COC
- TRIP BLANK INTACT
- TRIP BLANK NOT INTACT
- RECEIVED WATER TRIP BLANK
- RECEIVED SOIL TRIP BLANK

**MISC. INFORMATION**

NUMBER OF ENCORES ?   0    
 NUMBER OF 5035 FIELD KITS ?   2    
 NUMBER OR LAB FILTERED METALS ?   0  

SUMMARY OF COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

TECHNICIAN SIGNATURE/DATE [Signature] 7/29/06 TECHNICIAN SIGNATURE/DATE \_\_\_\_\_

ASBD03/27/06



## GC/MS Volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Leachate Blank Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17412-LB	C0042611.D	10	08/03/06	KW	07/31/06	OP17412	VC1721

4.1  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	Result	RL	MDL	Units	Q
71-43-2	Benzene	ND	10	5.0	ug/l	
108-90-7	Chlorobenzene	ND	20	5.0	ug/l	
67-66-3	Chloroform	ND	20	5.0	ug/l	
56-23-5	Carbon tetrachloride	ND	20	5.0	ug/l	
75-35-4	1,1-Dichloroethylene	ND	20	5.0	ug/l	
107-06-2	1,2-Dichloroethane	ND	20	5.0	ug/l	
106-46-7	p-Dichlorobenzene	ND	20	5.0	ug/l	
78-93-3	Methyl ethyl ketone	ND	100	25	ug/l	
127-18-4	Tetrachloroethylene	ND	20	5.0	ug/l	
79-01-6	Trichloroethylene	ND	20	5.0	ug/l	
75-01-4	Vinyl chloride	ND	10	5.0	ug/l	

CAS No.	Surrogate Recoveries		Limits
1868-53-7	Dibromofluoromethane	107%	86-115%
17060-07-0	1,2-Dichloroethane-D4	108%	73-126%
2037-26-5	Toluene-D8	101%	86-112%
460-00-4	4-Bromofluorobenzene	105%	83-119%

# Blank Spike Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VC1721-BS	C0042610.D	10	08/03/06	KW	n/a	n/a	VC1721

4.2  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
71-43-2	Benzene	250	258	103	80-120
108-90-7	Chlorobenzene	250	252	101	82-112
67-66-3	Chloroform	250	271	108	78-118
56-23-5	Carbon tetrachloride	250	302	121	69-137
75-35-4	1,1-Dichloroethylene	250	286	114	67-134
107-06-2	1,2-Dichloroethane	250	268	107	68-121
106-46-7	p-Dichlorobenzene	250	244	98	77-113
78-93-3	Methyl ethyl ketone	1250	1100	88	58-127
127-18-4	Tetrachloroethylene	250	273	109	75-126
79-01-6	Trichloroethylene	250	259	104	80-115
75-01-4	Vinyl chloride	250	328	131	70-151

CAS No.	Surrogate Recoveries	BSP	Limits
1868-53-7	Dibromofluoromethane	104%	86-115%
17060-07-0	1,2-Dichloroethane-D4	110%	73-126%
2037-26-5	Toluene-D8	102%	86-112%
460-00-4	4-Bromofluorobenzene	98%	83-119%



## GC/MS Semi-volatiles

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## QC Data Summaries

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**Includes the following where applicable:**

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Leachate Blank Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17413-LB	R04125.D	1	08/02/06	NJ	08/01/06	OP17413	SR195

The QC reported here applies to the following samples:

Method: SW846 8270C

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	Result	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	50	20	ug/l	
	3&4-Methylphenol	ND	50	20	ug/l	
87-86-5	Pentachlorophenol	ND	250	100	ug/l	
95-95-4	2,4,5-Trichlorophenol	ND	50	20	ug/l	
88-06-2	2,4,6-Trichlorophenol	ND	50	20	ug/l	
106-46-7	1,4-Dichlorobenzene	ND	50	10	ug/l	
121-14-2	2,4-Dinitrotoluene	ND	50	20	ug/l	
118-74-1	Hexachlorobenzene	ND	50	10	ug/l	
87-68-3	Hexachlorobutadiene	ND	50	20	ug/l	
67-72-1	Hexachloroethane	ND	50	20	ug/l	
98-95-3	Nitrobenzene	ND	50	10	ug/l	
110-86-1	Pyridine	ND	100	30	ug/l	

CAS No.	Surrogate Recoveries		Limits
367-12-4	2-Fluorophenol	19%	19-90%
4165-62-2	Phenol-d5	10%	10-68%
118-79-6	2,4,6-Tribromophenol	70%	36-137%
4165-60-0	Nitrobenzene-d5	65%	49-119%
321-60-8	2-Fluorobiphenyl	62%	45-118%
1718-51-0	Terphenyl-d14	89%	46-135%



# Blank Spike Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17413-LBS	R04124.D	1	08/02/06	NJ	08/01/06	OP17413	SR195

The QC reported here applies to the following samples:

Method: SW846 8270C

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
95-48-7	2-Methylphenol	500	257	51	48-90
	3&4-Methylphenol	1000	452	45	43-94
87-86-5	Pentachlorophenol	1000	888	89	62-120
95-95-4	2,4,5-Trichlorophenol	500	408	82	67-103
88-06-2	2,4,6-Trichlorophenol	500	399	80	68-104
106-46-7	1,4-Dichlorobenzene	500	350	70	46-96
121-14-2	2,4-Dinitrotoluene	500	408	82	64-107
118-74-1	Hexachlorobenzene	500	410	82	69-103
87-68-3	Hexachlorobutadiene	500	376	75	48-100
67-72-1	Hexachloroethane	500	354	71	41-98
98-95-3	Nitrobenzene	500	383	77	60-102
110-86-1	Pyridine	500	205	41	17-65

CAS No.	Surrogate Recoveries	BSP	Limits
367-12-4	2-Fluorophenol	31%	19-90%
4165-62-2	Phenol-d5	19%	10-68%
118-79-6	2,4,6-Tribromophenol	83%	36-137%
4165-60-0	Nitrobenzene-d5	80%	49-119%
321-60-8	2-Fluorobiphenyl	80%	45-118%
1718-51-0	Terphenyl-d14	84%	46-135%

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17413-MS	R04129.D	1	08/02/06	NJ	07/31/06	OP17413	SR195
OP17413-MSD	R04130.D	1	08/02/06	NJ	07/31/06	OP17413	SR195
F42421-2A	R04128.D	1	08/02/06	NJ	07/31/06	OP17413	SR195

The QC reported here applies to the following samples:

Method: SW846 8270C

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	F42421-2A ug/l	Spike Q ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
95-48-7	2-Methylphenol	ND	500	206	41	177	35*	15	40-102/25
	3&4-Methylphenol	257	1000	597	34*	518	26*	14	39-97/24
87-86-5	Pentachlorophenol	ND	1000	887	89	835	84	6	53-128/22
95-95-4	2,4,5-Trichlorophenol	ND	500	394	79	370	74	6	56-110/19
88-06-2	2,4,6-Trichlorophenol	ND	500	393	79	369	74	6	55-112/19
106-46-7	1,4-Dichlorobenzene	ND	500	360	72	325	65	10	43-102/24
121-14-2	2,4-Dinitrotoluene	ND	500	410	82	388	78	6	60-108/18
118-74-1	Hexachlorobenzene	ND	500	416	83	391	78	6	66-106/16
87-68-3	Hexachlorobutadiene	ND	500	387	77	348	70	11	46-107/26
98-95-3	Nitrobenzene	ND	500	386	77	341	68	12	50-107/25
110-86-1	Pyridine	ND	500	202	40	185	37	9	19-77/41

CAS No.	Surrogate Recoveries	MS	MSD	F42421-2A	Limits
367-12-4	2-Fluorophenol	23%	20%	22%	19-90%
4165-62-2	Phenol-d5	13%	11%	14%	10-68%
118-79-6	2,4,6-Tribromophenol	84%	79%	77%	36-137%
4165-60-0	Nitrobenzene-d5	78%	73%	66%	49-119%
321-60-8	2-Fluorobiphenyl	79%	74%	67%	45-118%
1718-51-0	Terphenyl-d14	86%	82%	69%	46-135%

# Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17413-DUP	R04127.D	1	08/02/06	NJ	07/31/06	OP17413	SR195
F42421-1A	R04126.D	1	08/02/06	NJ	07/31/06	OP17413	SR195

The QC reported here applies to the following samples:

Method: SW846 8270C

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	F42421-1A		Q	RPD	Limits
		ug/l	DUP Q ug/l			
95-48-7	2-Methylphenol	ND	ND		nc	
	3&4-Methylphenol	ND	ND		nc	
87-86-5	Pentachlorophenol	ND	ND		nc	
95-95-4	2,4,5-Trichlorophenol	ND	ND		nc	
88-06-2	2,4,6-Trichlorophenol	ND	ND		nc	
106-46-7	1,4-Dichlorobenzene	ND	ND		nc	
121-14-2	2,4-Dinitrotoluene	ND	ND		nc	
118-74-1	Hexachlorobenzene	ND	ND		nc	
87-68-3	Hexachlorobutadiene	ND	ND		nc	
67-72-1	Hexachloroethane	ND	ND		nc	
98-95-3	Nitrobenzene	ND	ND		nc	
110-86-1	Pyridine	ND	ND		nc	

CAS No.	Surrogate Recoveries	DUP	F42421-1A	Limits
367-12-4	2-Fluorophenol	23%	22%	19-90%
4165-62-2	Phenol-d5	13%	12%	10-68%
118-79-6	2,4,6-Tribromophenol	78%	83%	36-137%
4165-60-0	Nitrobenzene-d5	75%	79%	49-119%
321-60-8	2-Fluorobiphenyl	74%	76%	45-118%
1718-51-0	Terphenyl-d14	84%	89%	46-135%

5.4  
5



## GC Volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries



# Method Blank Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GCD2898-MB	CD070182.D1		07/21/06	MM	n/a	n/a	GCD2898

The QC reported here applies to the following samples:

Method: SW846 8015

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

6.1  
6

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	5.0	2.5	mg/kg	

CAS No.	Surrogate Recoveries		Limits
460-00-4	4-Bromofluorobenzene	82%	62-135%
98-08-8	aaa-Trifluorotoluene	89%	65-118%

# Blank Spike Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GCD2898-BS	CD070181.D1		07/21/06	MM	n/a	n/a	GCD2898

The QC reported here applies to the following samples:

Method: SW846 8015

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH-GRO (C6-C10)	20	19.7	99	66-122

CAS No.	Surrogate Recoveries	BSP	Limits
460-00-4	4-Bromofluorobenzene	96%	62-135%
98-08-8	aaa-Trifluorotoluene	99%	65-118%

6.2  
6

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F42301-1MS	CD070197.D 1		07/21/06	MM	n/a	n/a	GCD2898
F42301-1MSD	CD070198.D 1		07/21/06	MM	n/a	n/a	GCD2898
F42301-1	CD070189.D 1		07/21/06	MM	n/a	n/a	GCD2898

The QC reported here applies to the following samples:

Method: SW846 8015

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	F42301-1 mg/kg	Spike mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH-GRO (C6-C10)	ND	22.8	21.0	92	20.9	92	0	37-142/17

CAS No.	Surrogate Recoveries	MS	MSD	F42301-1	Limits
460-00-4	4-Bromofluorobenzene	101%	89%	80%	62-135%
98-08-8	aaa-Trifluorotoluene	105%	95%	85%	65-118%

63  
6



## GC Semi-volatiles

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## QC Data Summaries

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**Includes the following where applicable:**

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

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**Method Blank Summary**

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17353-MB	ST49793.D	1	07/28/06	NAF	07/25/06	OP17353	GST1443

The QC reported here applies to the following samples:

Method: SW846 8082

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	8.3	ug/kg	
11104-28-2	Aroclor 1221	ND	17	13	ug/kg	
11141-16-5	Aroclor 1232	ND	17	13	ug/kg	
53469-21-9	Aroclor 1242	ND	17	8.3	ug/kg	
12672-29-6	Aroclor 1248	ND	17	8.3	ug/kg	
11097-69-1	Aroclor 1254	ND	17	8.3	ug/kg	
11096-82-5	Aroclor 1260	ND	17	8.3	ug/kg	
11100-14-4	Aroclor 1268	ND	17	8.3	ug/kg	
	Total PCBs	ND	33		ug/kg	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	88%	52-136%
2051-24-3	Decachlorobiphenyl	101%	49-148%

7.1  
7

**Method Blank Summary**

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17353-MB	DD32907.D	1	07/31/06	NAF	07/25/06	OP17353	GDD919

The QC reported here applies to the following samples:

Method: SW846 8082

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	8.3	ug/kg	
11104-28-2	Aroclor 1221	ND	17	13	ug/kg	
11141-16-5	Aroclor 1232	ND	17	13	ug/kg	
53469-21-9	Aroclor 1242	ND	17	8.3	ug/kg	
12672-29-6	Aroclor 1248	ND	17	8.3	ug/kg	
11097-69-1	Aroclor 1254	ND	17	8.3	ug/kg	
11096-82-5	Aroclor 1260	ND	17	8.3	ug/kg	
11100-14-4	Aroclor 1268	ND	17	8.3	ug/kg	
	Total PCBs	ND	33		ug/kg	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	105%	52-136%
2051-24-3	Decachlorobiphenyl	107%	49-148%

7.1  
7

# Method Blank Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17355-MB	ZF20823.D	1	07/27/06	ME	07/26/06	OP17355	GZF978

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries		Limits
84-15-1	o-Terphenyl	90%	57-115%

71  
7

# Leachate Blank Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17414-LB	KK13798.D	1	08/01/06	AA	08/01/06	OP17414	GKK523

The QC reported here applies to the following samples:

Method: SW846 8081A

F42307-1A, F42307-2A, F42307-3A, F42307-4A

CAS No.	Compound	Result	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	0.50	0.20	ug/l	
12789-03-6	Chlordane	ND	5.0	2.5	ug/l	
72-20-8	Endrin	ND	1.0	0.40	ug/l	
76-44-8	Heptachlor	ND	0.50	0.20	ug/l	
1024-57-3	Heptachlor epoxide	ND	0.50	0.20	ug/l	
72-43-5	Methoxychlor	ND	1.0	0.40	ug/l	
8001-35-2	Toxaphene	ND	25	15	ug/l	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	79%	60-138%
2051-24-3	Decachlorobiphenyl	80%	31-148%

7.2  
7

# Leachate Blank Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17436-LB	TT01323.D	1	08/03/06	VS	08/02/06	OP17436	GTT53

The QC reported here applies to the following samples:

Method: SW846 8081A

F42307-5A

CAS No.	Compound	Result	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	0.50	0.20	ug/l	
12789-03-6	Chlordane	ND	5.0	2.5	ug/l	
72-20-8	Endrin	ND	1.0	0.40	ug/l	
76-44-8	Heptachlor	ND	0.50	0.20	ug/l	
1024-57-3	Heptachlor epoxide	ND	0.50	0.20	ug/l	
72-43-5	Methoxychlor	ND	1.0	0.40	ug/l	
8001-35-2	Toxaphene	ND	25	15	ug/l	

CAS No.	Surrogate Recoveries	Result	Limits
877-09-8	Tetrachloro-m-xylene	99%	60-138%
2051-24-3	Decachlorobiphenyl	94%	31-148%

7.2

7

# Blank Spike Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17414-LBS	KK13797.D	1	08/01/06	AA	08/01/06	OP17414	GKK523

The QC reported here applies to the following samples:

Method: SW846 8081A

F42307-1A, F42307-2A, F42307-3A, F42307-4A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
58-89-9	gamma-BHC (Lindane)	5	5.1	102	69-137
72-20-8	Endrin	5	5.0	100	78-134
76-44-8	Heptachlor	5	4.9	98	62-137
1024-57-3	Heptachlor epoxide	5	5.0	100	74-130
72-43-5	Methoxychlor	5	4.5	90	77-131

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	82%	60-138%
2051-24-3	Decachlorobiphenyl	90%	31-148%

7.3  
7

# Blank Spike Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17436-LBS <sup>a</sup>	TT01322.D	1	08/03/06	VS	08/02/06	OP17436	GTT53

The QC reported here applies to the following samples:

Method: SW846 8081A

F42307-5A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
58-89-9	gamma-BHC (Lindane)	5	6.1	122	69-137
72-20-8	Endrin	5	6.2	124	78-134
76-44-8	Heptachlor	5	7.1	142*	62-137
1024-57-3	Heptachlor epoxide	5	6.1	122	74-130
72-43-5	Methoxychlor	5	6.6	132*	77-131

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	101%	60-138%
2051-24-3	Decachlorobiphenyl	98%	31-148%

(a) Insufficient sample for MS/MSD.

73  
7

# Blank Spike Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17353-BS	ST49792.D	1	07/28/06	NAF	07/25/06	OP17353	GST1443

The QC reported here applies to the following samples:

Method: SW846 8082

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Spike ug/kg	BSP ug/kg	BSP %	Limits
12674-11-2	Aroclor 1016	133	122	92	75-123
11096-82-5	Aroclor 1260	133	119	89	72-124

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	82%	52-136%
2051-24-3	Decachlorobiphenyl	103%	49-148%

7.3  
7

# Blank Spike Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17355-BS	ZF20822.D	1	07/27/06	ME	07/26/06	OP17355	GZF978

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH (C10-C28)	33.3	26.0	78	62-114

CAS No.	Surrogate Recoveries	BSP	Limits
84-15-1	o-Terphenyl	94%	57-115%

7.3  
7

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17414-MS	KK13802.D	1	08/01/06	AA	07/31/06	OP17414	GKK523
OP17414-MSD	KK13803.D	1	08/01/06	AA	07/31/06	OP17414	GKK523
F42421-2A	KK13801.D	1	08/01/06	AA	07/31/06	OP17414	GKK523

The QC reported here applies to the following samples:

Method: SW846 8081A

F42307-1A, F42307-2A, F42307-3A, F42307-4A

CAS No.	Compound	F42421-2A ug/l	Spike Q	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
58-89-9	gamma-BHC (Lindane)	ND	5	5.4	108	5.5	110	2	75-140/21
72-20-8	Endrin	ND	5	5.7	114	5.7	114	0	72-149/21
76-44-8	Heptachlor	ND	5	5.6	112	5.6	112	0	74-136/25
1024-57-3	Heptachlor epoxide	ND	5	5.5	110	5.3	106	4	75-138/21
72-43-5	Methoxychlor	ND	5	5.2	104	5.4	108	4	69-145/27

CAS No.	Surrogate Recoveries	MS	MSD	F42421-2A	Limits
877-09-8	Tetrachloro-m-xylene	85%	83%	81%	60-138%
2051-24-3	Decachlorobiphenyl	84%	85%	84%	31-148%

7.4  
7

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17353-MS	ST49796.D	1	07/28/06	NAF	07/25/06	OP17353	GST1443
OP17353-MSD	ST49797.D	1	07/28/06	NAF	07/25/06	OP17353	GST1443
F42161-4	ST49795.D	1	07/28/06	NAF	07/25/06	OP17353	GST1443

The QC reported here applies to the following samples:

Method: SW846 8082

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	F42161-4 ug/kg	Spike Q	MS ug/kg	MS %	MSD ug/kg	MSD %	RPD	Limits Rec/RPD
12674-11-2	Aroclor 1016	18 U	144	132	92	130	91	2	54-138/22
11096-82-5	Aroclor 1260	18 U	144	128	89	127	89	1	46-138/21

CAS No.	Surrogate Recoveries	MS	MSD	F42161-4	Limits
877-09-8	Tetrachloro-m-xylene	91%	85%	78%	52-136%
2051-24-3	Decachlorobiphenyl	97%	102%	94%	49-148%

7.4  
7

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17355-MS	ZF20841.D	1	07/27/06	ME	07/26/06	OP17355	GZF978
OP17355-MSD	ZF20842.D	1	07/27/06	ME	07/26/06	OP17355	GZF978
F42359-4 <sup>a</sup>	ZF20840.D	1	07/27/06	ME	07/26/06	OP17355	GZF978

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	F42359-4 mg/kg	Spike mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH (C10-C28)	19.5	37.2	73.4	145*	64.0	120	14	31-136/36

CAS No.	Surrogate Recoveries	MS	MSD	F42359-4	Limits
84-15-1	o-Terphenyl	97%	90%	81%	57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

7.4  
7

## Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17414-DUP	KK13800.D	1	08/01/06	AA	07/31/06	OP17414	GKK523
F42421-1A	KK13799.D	1	08/01/06	AA	07/31/06	OP17414	GKK523

The QC reported here applies to the following samples:

Method: SW846 8081A

F42307-1A, F42307-2A, F42307-3A, F42307-4A

CAS No.	Compound	F42421-1A		Q	RPD	Limits
		ug/l	DUP Q ug/l			
58-89-9	gamma-BHC (Lindane)	ND	ND		nc	
12789-03-6	Chlordane	ND	ND		nc	
72-20-8	Endrin	ND	ND		nc	
76-44-8	Heptachlor	ND	ND		nc	
1024-57-3	Heptachlor epoxide	ND	ND		nc	
72-43-5	Methoxychlor	ND	ND		nc	
8001-35-2	Toxaphene	ND	ND		nc	

CAS No.	Surrogate Recoveries	DUP	F42421-1A	Limits
877-09-8	Tetrachloro-m-xylene	82%	85%	60-138%
2051-24-3	Decachlorobiphenyl	89%	85%	31-148%

75  
7



## Metals Analysis

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## QC Data Summaries

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**Includes the following where applicable:**

- Method Blank Summaries
- Matrix Spike and Duplicate Summaries
- Blank Spike and Lab Control Sample Summaries
- Serial Dilution Summaries

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F42307  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP10008  
Matrix Type: LEACHATE

Methods: SW846 6010B  
Units: mg/l

Prep Date: 07/31/06 07/31/06 07/31/06

Metal	RL	IDL	MB raw	final	MB raw	final	MB raw	final
Aluminum	0.20	.018						
Antimony	0.0060	.0034						
Arsenic	0.020	.0028	-0.0032	<0.020	0.0060	<0.020	-0.00027	<0.020
Barium	1.0	.0004	-0.000060	<1.0	0.0031	<1.0	0.0026	<1.0
Beryllium	0.0050	.0004						
Cadmium	0.0050	.0002	0.000050	<0.0050	0.000030	<0.0050	-0.000050	<0.0050
Calcium	5.0	.042						
Chromium	0.010	.0006	-0.000020	<0.010	0.0028	<0.010	0.0	<0.010
Cobalt	0.050	.0006						
Copper	0.025	.0009						
Iron	0.30	.012						
Lead	0.050	.0017	0.0010	<0.050	0.0063	<0.050	0.0075	<0.050
Magnesium	5.0	.0043						
Manganese	0.015	.0006						
Molybdenum	0.050	.0013						
Nickel	0.040	.0008	anr					
Potassium	10	.01						
Selenium	0.10	.002	0.0012	<0.10	0.033	<0.10	0.029	<0.10
Silver	0.010	.0009	0.00023	<0.010	0.00047	<0.010	0.00072	<0.010
Sodium	10	.5						
Thallium	0.010	.0023						
Tin	0.050	.0031						
Vanadium	0.050	.0006						
Zinc	0.10	.0013						

Associated samples MP10008: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

8.1.1  
8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MF10008  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 07/31/06 07/31/06

Metal	F42269-1 Original	DUP	RPD	QC Limits	F42269-1 Original MS	Spikelot MPFLICP1	% Rec	QC Limits
Aluminum								
Antimony								
Arsenic	0.0	0.0	NC	0-20	0.0	2.3	2.0	115.0 80-120
Barium	0.039	0.039	0.0	0-20	0.039	2.0	2.0	98.1 80-120
Beryllium								
Cadmium	0.0	0.0	NC	0-20	0.0	0.049	0.050	98.0 80-120
Calcium								
Chromium	0.010	0.010	0.0	0-20	0.010	0.20	0.20	95.0 80-120
Cobalt								
Copper								
Iron								
Lead	0.0044	0.0044	0.0	0-20	0.0044	0.49	0.50	97.1 80-120
Magnesium								
Manganese								
Molybdenum								
Nickel	anr							
Potassium								
Selenium	0.052	0.053	1.9	0-20	0.052	2.3	2.0	112.4 80-120
Silver	0.0	0.0012	200.0(a)	0-20	0.0	0.058	0.050	116.0 80-120
Sodium								
Thallium								
Tin								
Vanadium								
Zinc								

Associated samples MF10008: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested  
 (a) RPD acceptable due to low duplicate and sample concentrations.

8.12  
**8**

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10008  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 07/31/06 07/31/06

Metal	F42269-1 Original MSD	Spikelot MPFLICP1 % Rec	MSD RPD	QC Limit	F42421-1A Original DUP	RPD	QC Limits
Aluminum							
Antimony							
Arsenic	0.0 2.3	2.0 115.0	0.0	20	0.0 0.0	NC (a)	0-20
Barium	0.039 2.0	2.0 98.1	0.0	20	0.10 0.083	18.6	0-20
Beryllium							
Cadmium	0.0 0.048	0.050 96.0	2.1	20	0.0020 0.0021	4.9	0-20
Calcium							
Chromium	0.010 0.20	0.20 95.0	0.0	20	0.0062 0.0012	135.1(a)	0-20
Cobalt							
Copper							
Iron							
Lead	0.0044 0.49	0.50 97.1	0.0	20	0.0042 0.0	200.0(a)	0-20
Magnesium							
Manganese							
Molybdenum							
Nickel	anr						
Potassium							
Selenium	0.052 2.3	2.0 112.4	0.0	20	0.048 0.049	2.1	0-20
Silver	0.0 0.058	0.050 116.0	0.0	20	0.0013 0.0	200.0(a)	0-20
Sodium							
Thallium							
Tin							
Vanadium							
Zinc							

Associated samples MP10008: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested  
 (a) RPD acceptable due to low duplicate and sample concentrations.

8.1.2  
**8**

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MF10008  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 07/31/06 07/31/06

Metal	BSP Result	Spikelot MPFLICPl % Rec	QC Limits	BSP Result	Spikelot MPFLICPl % Rec	QC Limits
Aluminum						
Antimony						
Arsenic	2.2	2.0 110.0	80-120	2.4	2.0 120.0	80-120
Barium	2.1	2.0 105.0	80-120	2.0	2.0 100.0	80-120
Beryllium						
Cadmium	0.051	0.050 102.0	80-120	0.051	0.050 102.0	80-120
Calcium						
Chromium	0.20	0.20 100.0	80-120	0.20	0.20 100.0	80-120
Cobalt						
Copper						
Iron						
Lead	0.51	0.50 102.0	80-120	0.52	0.50 104.0	80-120
Magnesium						
Manganese						
Molybdenum						
Nickel	anr					
Potassium						
Selenium	1.9	2.0 95.0	80-120	2.3	2.0 115.0	80-120
Silver	0.053	0.050 106.0	80-120	0.057	0.050 114.0	80-120
Sodium						
Thallium						
Tin						
Vanadium						
Zinc						

Associated samples MF10008: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

8.1.3  
**8**

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MF10008  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 07/31/06

Metal	BSP Result	Spikelot MPFLICP1 & Rec	QC Limits
Aluminum			
Antimony			
Arsenic	2.2	2.0	110.0 80-120
Barium	2.1	2.0	105.0 80-120
Beryllium			
Cadmium	0.050	0.050	100.0 80-120
Calcium			
Chromium	0.20	0.20	100.0 80-120
Cobalt			
Copper			
Iron			
Lead	0.50	0.50	100.0 80-120
Magnesium			
Manganese			
Molybdenum			
Nickel	anr		
Potassium			
Selenium	2.1	2.0	105.0 80-120
Silver	0.051	0.050	102.0 80-120
Sodium			
Thallium			
Tin			
Vanadium			
Zinc			

Associated samples MF10008: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

8.1.3  
**8**

SERIAL DILUTION RESULTS SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10008  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: ug/l

Prep Date: 07/31/06

Metal	F42269-1 Original	SDL 1:5	RPD	QC Limits
Aluminum				
Antimony				
Arsenic	0.00	0.00	NC	0-10
Barium	38.9	40.8	4.9	0-10
Beryllium				
Cadmium	0.00	0.00	NC	0-10
Calcium				
Chromium	10.5	9.81	6.3	0-10
Cobalt				
Copper				
Iron				
Lead	4.39	0.00	100.0 (a)	0-10
Magnesium				
Manganese				
Molybdenum				
Nickel	anr			
Potassium				
Selenium	51.6	44.7	13.3 (a)	0-10
Silver	0.00	5.00		0-10
Sodium				
Thallium				
Tin				
Vanadium				
Zinc				

Associated samples MP10008: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes

(\*) Outside of QC limits

(anr) Analyte not requested

(a) Percent difference acceptable due to low initial sample concentration (< 50 times IDL).

8.1.4

8

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F42307  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP10014  
Matrix Type: LEACHATE

Methods: SW846 7470A  
Units: mg/l

Prep Date: 08/01/06 08/01/06 08/01/06

Metal	RL	IDL	MB raw	final	MB raw	final	MB raw	final
Mercury	0.0010	.00008	0.000015	<0.0010	0.00038	<0.010	-0.00027	<0.010

Associated samples MP10014: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

8.21  
8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10014  
 Matrix Type: LEACHATE

Methods: SW846 7470A  
 Units: mg/l

Prep Date: 08/01/06 08/01/06

Metal	F42421-1A Original DUP	RPD	QC Limits	F42421-1A Original MS	Spikelet HGFLWS1	% Rec	QC Limits
Mercury	0.0	0.0	NC	0-20	0.0	0.031	0.030 103.3 80-120

Associated samples MP10014: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested

8.2.2

8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42307  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MF10014  
Matrix Type: LEACHATE

Methods: SW846 7470A  
Units: mg/l

Prep Date: 08/01/06

Metal	F42421-1A Original MSD	Spikelot HGFLWS1	% Rec	MSD RPD	QC Limit	
Mercury	0.0	0.031	0.030	103.3	0.0	20

Associated samples MP10014: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(N) Matrix Spike Rec. outside of QC limits  
(anr) Analyte not requested

8.2.2

8

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10014  
 Matrix Type: LEACHATE

Methods: SW846 7470A  
 Units: mg/l

Prep Date: 08/01/06 08/01/06

Metal	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.0030	0.0030	100.0	80-120	0.031	0.030	103.3	80-120

Associated samples MP10014: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

8.2.3  
**8**

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F42307  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MF10014  
Matrix Type: LEACHATE

Methods: SW846 7470A  
Units: mg/l

Prep Date: 08/01/06

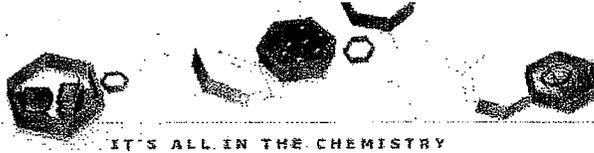
Metal	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.030	0.030	100.0	80-120

Associated samples MF10014: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

8.2.3

8



## General Chemistry

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank and Blank Spike Summaries
- Duplicate Summaries
- Matrix Spike Summaries

METHOD BLANK AND SPIKE RESULTS SUMMARY  
GENERAL CHEMISTRY

Login Number: F42307  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

Analyte	Batch ID	RL	MB Result	Units	Spike Amount	BSP Result	BSP %Recov	QC Limits
Cyanide Reactivity	GP8160/GN21501			mg/kg	5.00	1.6	32.8	0-100%
Cyanide Reactivity	GP8160/GN21501	1.5	<1.5	mg/kg	5.00	1.9	38.2	0-100%
Sulfide Reactivity	GP8161/GN21502	50	<50	mg/kg	53.7	2.0	3.7	0-100%

Associated Samples:

Batch GP8160: F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

Batch GP8161: F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

91

6

DUPLICATE RESULTS SUMMARY  
GENERAL CHEMISTRY

Login Number: F42307  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

Analyte	Batch ID	QC Sample	Units	Original Result	DUP Result	RPD	QC Limits
Corrosivity as pH	GN21458	F42307-1		7.3	7.2		0-%
Ignitability (Flashpoint)	GN21505	F42224-1	Deg. F	>200	>200(a)	0.0	0-38%
Solids, Percent	GN21440	F42301-1	%	92.2	92.6	0.4	0-30%

Associated Samples:

Batch GN21440: F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

Batch GN21458: F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

Batch GN21505: F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

(a) Not ignitable.

9.2  
9



**Misc. Forms**

---

**Custody Documents and Other Forms**

(Accutest Laboratories Gulf Coast, Inc.)

---

**Includes the following where applicable:**

- Chain of Custody



# CHAIN OF CUSTODY

4405 VINELAND ROAD • SUITE C-13  
ORLANDO, FL 32811  
TEL: 407-425-6700 • FAX: 407-425-0707

ACCUTEST JOB #:  
ACCUTEST QUOTE #:

CLIENT INFORMATION		FACILITY INFORMATION				ANALYTICAL INFORMATION										MATRIX CODES	
NAME: <b>ALSE</b>		PROJECT NAME: <b>F42307</b>				8/5/12 L.P.										DW - DRINKING WATER GW - GROUND WATER WW - WASTE WATER SD - SOIL SL - SLUDGE OI - OIL LIQ - OTHER LIQUID SOL - OTHER SOLID	
ADDRESS:		LOCATION:															
CITY, STATE, ZIP:		PROJECT NO.:															
SEND REPORT TO: PHONE #:		FAX #:															
ACCUTEST SAMPLE #	FIELD ID / POINT OF COLLECTION	COLLECTION			PRESERVATION							LAB USE ONLY					
		DATE	TIME	SAMPLED BY:	MATRIX	# OF BOTTLES	REF	INCH	INCH	INCH	INCH		INCH				
	<b>F42307-1A</b>	<b>7/19/08</b>	<b>200</b>	<b>SD</b>	<b>1</b>												
	" -2A		<b>800</b>		<b>1</b>												
	" -3A		<b>900</b>		<b>1</b>												
	" -4A		<b>1000</b>		<b>1</b>												
	" -5A		<b>1100</b>		<b>1</b>												
DATA TURNAROUND INFORMATION		DATA DELIVERABLE INFORMATION				COMMENTS/REMARKS											
<input type="checkbox"/> STANDARD <input type="checkbox"/> 48 HOUR RUSH <input type="checkbox"/> 24 HOUR EMERGENCY <input checked="" type="checkbox"/> OTHER <b>14 DAY</b> EMERGENCY OR RUSH IS FAX DATA UNLESS PREVIOUSLY APPROVED		APPROVED BY: _____ <input type="checkbox"/> STANDARD <input checked="" type="checkbox"/> COMMERCIAL "B" <input type="checkbox"/> DISK DELIVERABLE <input type="checkbox"/> STATE FORMS <input type="checkbox"/> OTHER (SPECIFY) _____				<b>ALGC</b> <b>- ASD -</b> <b>Airbill # 791057461648</b>											
SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION, INCLUDING COURIER DELIVERY																	
RELINQUISHED BY SAMPLER:		DATE TIME:		RECEIVED BY:		RELINQUISHED BY:		DATE TIME:		RECEIVED BY:		RELINQUISHED BY:		DATE TIME:		RECEIVED BY:	
1. <b>Steve Brown</b>		<b>7-10-08</b>		1. _____		2. _____				2. _____		3. _____				3. _____	
RELINQUISHED BY:		DATE TIME:		RECEIVED BY:		RELINQUISHED BY:		DATE TIME:		RECEIVED BY:		RELINQUISHED BY:		DATE TIME:		RECEIVED BY:	
3. _____				3. _____		4. _____				4. _____		5. _____				5. _____	
RELINQUISHED BY:		DATE TIME:		RECEIVED BY:		RELINQUISHED BY:		DATE TIME:		RECEIVED BY:		RELINQUISHED BY:		DATE TIME:		RECEIVED BY:	
5. _____		<b>7/10/08 09:50</b>		<b>D. Roney</b>		SEAL #		PRESERVE WHERE APPLICABLE		ON ICE		TEMPERATURE				<b>3.8 C</b>	

10.1 10

F42307: Chain of Custody  
Page 1 of 3  
Accutest Laboratories Gulf Coast, Inc.



FedEx | Ship Manager | Label 7910 5746 6648

F42307

From: Origin ID: (407426-6709)  
Austin Ben Davis  
ACQUEST LABORATORIES  
445 VINELAND ROAD SUITE C-15  
ORLANDO, FL 32811

Ship Date: 20ALL05  
Actual Wt: 26 LB  
System #: 6277259NET2000  
Account #: 31000000000000000000



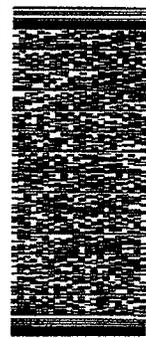
SHIP TO: 0130271-4700  
BILL RECEIPT  
Sample Management  
Acquest Laboratories Gulf Coast  
10165 Harwin Drive  
Houston, TX 77036



Delivery Address Bar Code

PRIORITY OVERNIGHT  
TRK# 7910 5746 6648  
77036 -TX-US  
FRI  
Deliver By:  
21JUL08  
IAH A2

XH JGQA



Shipping Label: Your shipment is complete  
1. Use the 'Print' feature from your browser to send this page to your laser or inkjet printer.  
2. Fold the printed page along the horizontal line.  
3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.  
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## **GC Semi-volatiles**

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## **QC Data Summaries**

**(Accutest Laboratories Gulf Coast, Inc.)**

---

**Includes the following where applicable:**

- **Method Blank Summaries**
- **Blank Spike Summaries**
- **Matrix Spike and Duplicate Summaries**

## Method Blank Summary

Page 1 of 1

Job Number: F42307  
Account: ALSE Accutest Laboratories Southeast, Inc.  
Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6178-MB	DD57593.D	1	07/31/06	RC	08/01/06	OP6178	GDD1085

The QC reported here applies to the following samples:

Method: SW846 8151

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	Result	RL	MDL	Units	Q
94-75-7	2,4-D	ND	10	5.0	ug/l	
93-72-1	2,4,5-TP (Silvex)	ND	2.0	1.5	ug/l	

CAS No.	Surrogate Recoveries		Limits
19719-28-9	2,4-DCAA	45%	23-171%

111  
11

# Blank Spike Summary

Job Number: F42307  
Account: ALSE Accutest Laboratories Southeast, Inc.  
Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6178-BS	DD57594.D	1	07/31/06	RC	08/01/06	OP6178	GDD1085

The QC reported here applies to the following samples:

Method: SW846 8151

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
94-75-7	2,4-D	20	19.6	98	44-152
93-72-1	2,4,5-TP (Silvex)	4	3.4	85	41-142

CAS No.	Surrogate Recoveries	BSP	Limits
19719-28-9	2,4-DCAA	94%	23-171%

112  
11

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42307  
 Account: ALSE Accutest Laboratories Southeast, Inc.  
 Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6178-MS	DD57597.D	1	07/31/06	RC	08/01/06	OP6178	GDD1085
OP6178-MSD	DD57598.D	1	07/31/06	RC	08/01/06	OP6178	GDD1085
F42421-2A	DD57596.D	1	07/31/06	RC	07/28/06	OP6178	GDD1085

The QC reported here applies to the following samples:

Method: SW846 8151

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	F42421-2A ug/l	Spike Q ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
94-75-7	2,4-D	ND	20	5.2	26*	11.2	56	73*	28-144/25
93-72-1	2,4,5-TP (Silvex)	ND	4	3.6	90	3.2	80	12	25-137/24

CAS No.	Surrogate Recoveries	MS	MSD	F42421-2A	Limits
19719-28-9	2,4-DCAA	132%	113%	121%	23-171%

11.3  
11

**Grid 8**

**Additional**

**Samples**

**TPH- (C<sub>10</sub> – C<sub>28</sub>),**

**pH, TCLP pb only**



09/28/06



## Technical Report for

---

Shaw E & I, Inc.

Paradise Creek

116539

Accutest Job Number: F43922

Sampling Date: 09/22/06

---

### Report to:

Shaw E & I, Inc.

natasha.sullivan@shawgrp.com

ATTN: Natasha Sullivan

Total number of pages in report: 27



Test results contained within this data package meet the requirements of the National Environmental Laboratory Accreditation Conference and/or state specific certification programs as applicable.

*Harry Behzadi*  
Harry Behzadi, Ph.D.  
Laboratory Director

Certifications: FL (DOH E83510), NC (573), NJ (FL002), MA (FL946), IA (366), LA (03051), KS (E-10327), SC, AK  
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### Sample Summary

Shaw E & I, Inc.

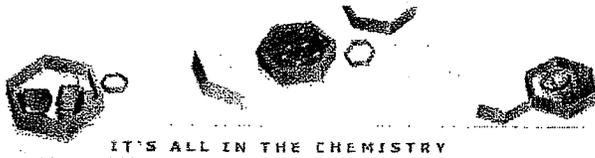
Job No: F43922

Paradise Creek  
Project No: 116539

Sample Number	Collected Date	Time By	Received	Matrix Code	Type	Client Sample ID
F43922-1	09/22/06	13:15 BM	09/25/06	SO	Soil	PC-MIX-116539-GRID008A
F43922-2	09/22/06	13:30 BM	09/25/06	SO	Soil	PC-MIX-116539-GRID008B
F43922-3	09/22/06	13:12 BM	09/25/06	SO	Soil	PC-MIX-116539-GRID008C
F43922-4	09/22/06	13:10 BM	09/25/06	SO	Soil	PC-MIX-116539-GRID008D
F43922-5	09/22/06	13:22 BM	09/25/06	SO	Soil	PC-MIX-116539-GRID008-1
F43922-6	09/22/06	13:18 BM	09/25/06	SO	Soil	PC-MIX-116539-GRID008-2
F43922-7	09/22/06	13:26 BM	09/25/06	SO	Soil	PC-MIX-116539-GRID008-3

---

Soil samples reported on a dry weight basis unless otherwise indicated on result page.



IT'S ALL IN THE CHEMISTRY

### Sample Results

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### Report of Analysis

---

**Report of Analysis**

21  
2

<b>Client Sample ID:</b> PC-MIX-116539-GRID008A	<b>Date Sampled:</b> 09/22/06
<b>Lab Sample ID:</b> F43922-1	<b>Date Received:</b> 09/25/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> n/a
<b>Project:</b> Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	0.024 B	D008	5.0	0.050	0.0017	mg/l	1	09/27/06	09/27/06 RS	SW846 6010B <sup>1</sup>

(1) Instrument QC Batch: MA5255

(2) Prep QC Batch: MP10382

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result >= MDL but < RL

### Report of Analysis

2.2  
2

<b>Client Sample ID:</b> PC-MIX-116539-GRID008B	<b>Date Sampled:</b> 09/22/06
<b>Lab Sample ID:</b> F43922-2	<b>Date Received:</b> 09/25/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> n/a
<b>Project:</b> Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	0.0093 B	D008	5.0	0.050	0.0017	mg/l	1	09/27/06	09/27/06 RS	SW846 6010B <sup>1</sup>

(1) Instrument QC Batch: MA5255

(2) Prep QC Batch: MP10382

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result > = MDL but < RL

Report of Analysis

2.3  
2

<b>Client Sample ID:</b> PC-MIX-116539-GRID008C	<b>Date Sampled:</b> 09/22/06
<b>Lab Sample ID:</b> F43922-3	<b>Date Received:</b> 09/25/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> n/a
<b>Project:</b> Paradise Creek	

Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	0.0017 U	D008	5.0	0.050	0.0017	mg/l	1	09/27/06	09/27/06 RS	SW846 6010B <sup>1</sup>

- (1) Instrument QC Batch: MA5255
- (2) Prep QC Batch: MP10382

---

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result > = MDL but < RL

### Report of Analysis

2.4  
2

<b>Client Sample ID:</b> PC-MIX-116539-GRID008D	<b>Date Sampled:</b> 09/22/06
<b>Lab Sample ID:</b> F43922-4	<b>Date Received:</b> 09/25/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> n/a
<b>Project:</b> Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	0.0019 B	D008	5.0	0.050	0.0017	mg/l	1	09/27/06	09/27/06 RS	SW846 6010B <sup>1</sup>

- (1) Instrument QC Batch: MA5255
- (2) Prep QC Batch: MP10382

---

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result > = MDL but < RL

Report of Analysis

2.5  
2

<b>Client Sample ID:</b> PC-MIX-116539-GRID008-1	<b>Date Sampled:</b> 09/22/06
<b>Lab Sample ID:</b> F43922-5	<b>Date Received:</b> 09/25/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 66.4
<b>Method:</b> SW846 8015 M SW846 3550B	
<b>Project:</b> Paradise Creek	

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	ZF21573.D	10	09/27/06	VS	09/26/06	OP17982	GZF1013
Run #2							

	Initial Weight	Final Volume
Run #1	30.1 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28) <sup>a</sup>	313	130	75	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	59%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected    MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-MIX-116539-GRID008-1	<b>Date Sampled:</b> 09/22/06
<b>Lab Sample ID:</b> F43922-5	<b>Date Received:</b> 09/25/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 66.4
<b>Project:</b> Paradise Creek	

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	66.4		%	1	09/25/06	JB	EPA 160.3 M
pH	11.0		su	1	09/27/06 11:50	LE	SW846 9045

RL = Reporting Limit

Report of Analysis

2.6  
2

<b>Client Sample ID:</b> PC-MIX-116539-GRID008-2	<b>Date Sampled:</b> 09/22/06
<b>Lab Sample ID:</b> F43922-6	<b>Date Received:</b> 09/25/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 72.5
<b>Method:</b> SW846 8015 M SW846 3550B	
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	ZF21574.D	10	09/27/06	VS	09/26/06	OP17982	GZF1013
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.0 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28) <sup>a</sup>	517	110	69	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	63%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

**Report of Analysis**

<b>Client Sample ID:</b> PC-MIX-116539-GRID008-2	<b>Date Sampled:</b> 09/22/06
<b>Lab Sample ID:</b> F43922-6	<b>Date Received:</b> 09/25/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 72.5
<b>Project:</b> Paradise Creek	

**General Chemistry**

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	72.5		%	1	09/25/06	JB	EPA 160.3 M
pH	11.4		su	1	09/27/06 11:50	LE	SW846 9045

RL = Reporting Limit

Report of Analysis

27  
2

<b>Client Sample ID:</b>	PC-MIX-116539-GRID008-3	<b>Date Sampled:</b>	09/22/06
<b>Lab Sample ID:</b>	F43922-7	<b>Date Received:</b>	09/25/06
<b>Matrix:</b>	SO - Soil	<b>Percent Solids:</b>	82.3
<b>Method:</b>	SW846 8015 M SW846 3550B		
<b>Project:</b>	Paradise Creek		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	ZF21575.D	10	09/27/06	VS	09/26/06	OP17982	GZF1013
Run #2							

	Initial Weight	Final Volume
Run #1	30.0 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28) <sup>a</sup>	226	100	61	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	63%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

27  
2

<b>Client Sample ID:</b> PC-MIX-116539-GRID008-3	<b>Date Sampled:</b> 09/22/06
<b>Lab Sample ID:</b> F43922-7	<b>Date Received:</b> 09/25/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 82.3
<b>Project:</b> Paradise Creek	

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	82.3		%	1	09/25/06	JB	EPA 160.3 M
pH	12.0		su	1	09/27/06 11:50	LE	SW846 9045

RL = Reporting Limit



## Misc. Forms

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## Custody Documents and Other Forms

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Includes the following where applicable:

- Chain of Custody

CHAIN-OF-CUSTODY RECORD

**F43922**

COC Number: 116539-9.22.08  
Purchase Order Number:



SHAW Environmental & Infrastructure, INC. - 5700 Thurston Ave Suite 116B - Virginia Beach, VA 23455 - (757) 363-7190

<b>Accutest</b> 4405 Vineland Road Suite C-1, Orlando FL 32811 (407) 426-8700		4405 Vineland Road Suite C-1, Orlando FL 32811 (407) 426-8700		4405 Vineland Road Suite C-1, Orlando FL 32811 (407) 426-8700		4405 Vineland Road Suite C-1, Orlando FL 32811 (407) 426-8700		4405 Vineland Road Suite C-1, Orlando FL 32811 (407) 426-8700		4405 Vineland Road Suite C-1, Orlando FL 32811 (407) 426-8700		4405 Vineland Road Suite C-1, Orlando FL 32811 (407) 426-8700		4405 Vineland Road Suite C-1, Orlando FL 32811 (407) 426-8700		4405 Vineland Road Suite C-1, Orlando FL 32811 (407) 426-8700		4405 Vineland Road Suite C-1, Orlando FL 32811 (407) 426-8700		4405 Vineland Road Suite C-1, Orlando FL 32811 (407) 426-8700	
<b>Paradise Creek</b> 116539		Natasha Kelley Sullivan (410) 528-7588		Taylor Sword		Shaw		Taylor Sword		Shaw		Taylor Sword		Shaw		Taylor Sword		Shaw		Taylor Sword	
Seq	Sample Location	Date	Time	Temp	Method	Remarks	Container	Analysis	Method	Method	Method										
1	PC-mix-116539-GRID006a	09/22/08	1315		X	grab	2 x 4 duno	X													
2	PC-mix-116539-GRID006b	09/22/08	1330		X	grab	2 x 4 duno	X													
3	PC-mix-116539-GRID006c	09/22/08	1312		X	grab	2 x 4 duno	X													
4	PC-mix-116539-GRID006d	09/22/08	1310		X	grab	2 x 4 duno	X													
5	PC-mix-116539-GRID008-1	09/22/08	1322		X	grab	2 x 4 duno		X	X											
6	PC-mix-116539-GRID008-2	09/22/08	1318		X	grab	2 x 4 duno		X	X											
7	PC-mix-116539-GRID008-3	09/22/08	1326		X	grab	2 x 4 duno		X	X											
8																					
9																					
10																					
11																					
12																					
13																					
14																					
15																					

Retention time Required: 3 day TAT Sampled by: Brooke Mourain, SHAW

Seq	Transfer to	Date	Time	Transfer by	Remarks	Notes
1	Brooke Mourain	9/22/2008	1600			
2	FX			George Perol	9-23-08 09:30	
3						
4						

Summary Package  
Deliverables: EDD Excel  
\*\* Fax results to Natasha Sullivan (410) 528-7589

2-B

31  
6

**ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION**

ACCUTEST'S JOB NUMBER: F43922 CLIENT: SHAW PROJECT: Paradise Creek  
 DATE/TIME RECEIVED: 09/26/06 - 09:30 # OF COOLERS RECEIVED: 1 COOLER TEMPS: 2.80  
 METHOD OF DELIVERY: FEDER UPS ACCUTEST COURIER GREYHOUND DELIVERY OTHER  
 AIRBILL NUMBERS: 7985 0459 834

**COOLER INFORMATION**

- CUSTODY SEAL NOT PRESENT OR NOT INTACT
- CHAIN OF CUSTODY NOT RECEIVED (COC)
- ANALYSIS REQUESTED IS UNCLEAR OR MISSING
- SAMPLE DATES OR TIMES UNCLEAR OR MISSING
- TEMPERATURE CRITERIA NOT MET

**TRIP BLANK INFORMATION**

- TRIP BLANK NOT PROVIDED
- TRIP BLANK NOT ON COC
- TRIP BLANK INTACT
- TRIP BLANK NOT INTACT
- RECEIVED WATER TRIP BLANK
- RECEIVED SOIL TRIP BLANK

**MISC. INFORMATION**

NUMBER OF ENCORES ? 0  
 NUMBER OF 5035 FIELD KITS ? 0  
 NUMBER OR LAB FILTERED METALS ? 0

SUMMARY OF COMMENTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TECHNICIAN SIGNATURE/DATE [Signature] TECHNICIAN SIGNATURE/DATE \_\_\_\_\_

ASBD03/27/06

3.1  
3



## GC Semi-volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Method Blank Summary

Job Number: F43922  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17982-MB	ZF21572.D	1	09/27/06	VS	09/26/06	OP17982	GZF1013

4.1  
4

The QC reported here applies to the following samples:

Method: SW846 8015 M

F43922-5, F43922-6, F43922-7

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries	Limits
84-15-1	o-Terphenyl	68% 57-115%

# Blank Spike Summary

Job Number: F43922  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17982-BS	ZF21571.D	1	09/27/06	VS	09/26/06	OP17982	GZF1013

4.2  
4

The QC reported here applies to the following samples:

Method: SW846 8015 M

F43922-5, F43922-6, F43922-7

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH (C10-C28)	33.3	24.7	74	62-114

CAS No.	Surrogate Recoveries	BSP	Limits
84-15-1	o-Terphenyl	72%	57-115%

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F43922  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17982-MS	ZF21576.D	10	09/27/06	VS	09/26/06	OP17982	GZF1013
OP17982-MSD	ZF21577.D	10	09/27/06	VS	09/26/06	OP17982	GZF1013
F43922-7	ZF21575.D	10	09/27/06	VS	09/26/06	OP17982	GZF1013

4.3  
4

The QC reported here applies to the following samples:

Method: SW846 8015 M

F43922-5, F43922-6, F43922-7

CAS No.	Compound	F43922-7 mg/kg	Spike Q mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH (C10-C28)	226	40	261	88	277	128	6	31-136/36

CAS No.	Surrogate Recoveries	MS	MSD	F43922-7	Limits
84-15-1	o-Terphenyl	52%* a	67%	63%	57-115%

(a) Outside control limits due to dilution.



## Metals Analysis

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5

## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Matrix Spike and Duplicate Summaries
- Blank Spike and Lab Control Sample Summaries
- Serial Dilution Summaries

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F43922  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP10382  
Matrix Type: LEACHATE

Methods: SW846 6010B  
Units: mg/l

Prep Date: 09/27/06 09/27/06

Metal	RL	IDL	MB raw	final	MB raw	final
Aluminum	0.20	.018				
Antimony	0.0060	.0034				
Arsenic	0.010	.0028				
Barium	1.0	.0004				
Beryllium	0.0050	.0004				
Cadmium	0.0050	.0002				
Calcium	5.0	.042				
Chromium	0.010	.0006				
Cobalt	0.050	.0006				
Copper	0.025	.0009				
Iron	0.30	.012				
Lead	0.050	.0017	0.00078	<0.050	0.00082	<0.050
Magnesium	5.0	.0043				
Manganese	0.015	.0006				
Molybdenum	0.050	.0013				
Nickel	0.040	.0008				
Potassium	10	.01				
Selenium	0.050	.002				
Silver	0.010	.0009				
Sodium	10	.5				
Thallium	0.010	.0023				
Tin	0.050	.0031				
Vanadium	0.050	.0006				
Zinc	0.10	.0013				

Associated samples MP10382: F43922-1, F43922-2, F43922-3, F43922-4

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

5.1.1  
5

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F43922  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10382  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 09/27/06 09/27/06

Metal	F43922-1 Original DUP	RPD	QC Limits	F43922-1 Original MS	Spikelot MPFLICPI % Rec	QC Limits
-------	--------------------------	-----	--------------	-------------------------	----------------------------	--------------

Aluminum									
Antimony									
Arsenic									
Barium									
Beryllium									
Cadmium									
Calcium									
Chromium									
Cobalt									
Copper									
Iron									
Lead	0.024	0.022	8.7	0-20	0.024	0.50	0.50	95.2	80-120
Magnesium									
Manganese									
Molybdenum									
Nickel									
Potassium									
Selenium									
Silver									
Sodium									
Thallium									
Tin									
Vanadium									
Zinc									

Associated samples MP10382: F43922-1, F43922-2, F43922-3, F43922-4

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested

5.12  
5

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F43922  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10382  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 09/27/06

Metal	F43922-2 Original DUP	RPD	QC Limits
-------	--------------------------	-----	--------------

Aluminum				
Antimony				
Arsenic				
Barium				
Beryllium				
Cadmium				
Calcium				
Chromium				
Cobalt				
Copper				
Iron				
Lead	0.0093	0.0081	13.8	0-20
Magnesium				
Manganese				
Molybdenum				
Nickel				
Potassium				
Selenium				
Silver				
Sodium				
Thallium				
Tin				
Vanadium				
Zinc				

Associated samples MP10382: F43922-1, F43922-2, F43922-3, F43922-4

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested

5.12  
**5**

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F43922  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10382  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 09/27/06 09/27/06

Metal	BSP Result	Spikelot MPFLICP1 % Rec	QC Limits	BSP Result	Spikelot MPFLICP1 % Rec	QC Limits		
Aluminum								
Antimony								
Arsenic								
Barium								
Beryllium								
Cadmium								
Calcium								
Chromium								
Cobalt								
Copper								
Iron								
Lead	0.53	0.50	106.0	80-120	0.48	0.50	96.0	80-120
Magnesium								
Manganese								
Molybdenum								
Nickel								
Potassium								
Selenium								
Silver								
Sodium								
Thallium								
Tin								
Vanadium								
Zinc								

Associated samples MP10382: F43922-1, F43922-2, F43922-3, F43922-4

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

5.1.3  
**5**

SERIAL DILUTION RESULTS SUMMARY

Login Number: F43922  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10382  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: ug/l

Prep Date: 09/27/06

Metal	F43922-1 Original SDL 1:5	RPD	QC Limits
-------	------------------------------	-----	--------------

Aluminum  
 Antimony  
 Arsenic  
 Barium  
 Beryllium  
 Cadmium  
 Calcium  
 Chromium  
 Cobalt  
 Copper  
 Iron  
 Lead            24.2       28.3       17.1 (a) 0-10  
 Magnesium  
 Manganese  
 Molybdenum  
 Nickel  
 Potassium  
 Selenium  
 Silver  
 Sodium  
 Thallium  
 Tin  
 Vanadium  
 Zinc

Associated samples MP10382: F43922-1, F43922-2, F43922-3, F43922-4

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested  
 (a) Percent difference acceptable due to low initial sample concentration (< 50 times IDL).

5.14  
**5**

### Sample Summary

Shaw E & I, Inc.

Job No: F43922

Paradise Creek  
Project No: 116539

Sample Number	Collected Date	Time By	Received	Matrix Code	Type	Client Sample ID
F43922-1	09/22/06	13:15 BM	09/25/06	SO	Soil	PC-MIX-116539-GRID008A
F43922-2	09/22/06	13:30 BM	09/25/06	SO	Soil	PC-MIX-116539-GRID008B
F43922-3	09/22/06	13:12 BM	09/25/06	SO	Soil	PC-MIX-116539-GRID008C
F43922-4	09/22/06	13:10 BM	09/25/06	SO	Soil	PC-MIX-116539-GRID008D
F43922-5	09/22/06	13:22 BM	09/25/06	SO	Soil	PC-MIX-116539-GRID008-1
F43922-6	09/22/06	13:18 BM	09/25/06	SO	Soil	PC-MIX-116539-GRID008-2
F43922-7	09/22/06	13:26 BM	09/25/06	SO	Soil	PC-MIX-116539-GRID008-3

---

Soil samples reported on a dry weight basis unless otherwise indicated on result page.

### Report of Analysis

<b>Client Sample ID:</b> PC-MIX-116539-GRID008A	<b>Date Sampled:</b> 09/22/06
<b>Lab Sample ID:</b> F43922-1	<b>Date Received:</b> 09/25/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> n/a
<b>Project:</b> Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	0.024 B	D008	5.0	0.050	0.0017	mg/l	1	09/27/06	09/27/06 RS	SW846 6010B <sup>1</sup>

- (1) Instrument QC Batch: MA5255
- (2) Prep QC Batch: MP10382

---

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result >= MDL but < RL

### Report of Analysis

<b>Client Sample ID:</b> PC-MIX-116539-GRID008B	<b>Date Sampled:</b> 09/22/06
<b>Lab Sample ID:</b> F43922-2	<b>Date Received:</b> 09/25/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> n/a
<b>Project:</b> Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	0.0093 B	D008	5.0	0.050	0.0017	mg/l	1	09/27/06	09/27/06 RS	SW846 6010B <sup>1</sup>

(1) Instrument QC Batch: MA5255

(2) Prep QC Batch: MP10382

---

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result >= MDL but < RL

### Report of Analysis

<b>Client Sample ID:</b> PC-MIX-116539-GRID008C	<b>Date Sampled:</b> 09/22/06
<b>Lab Sample ID:</b> F43922-3	<b>Date Received:</b> 09/25/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> n/a
<b>Project:</b> Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	0.0017 U	D008	5.0	0.050	0.0017	mg/l	1	09/27/06	09/27/06 RS	SW846 6010B <sup>1</sup>

(1) Instrument QC Batch: MA5255

(2) Prep QC Batch: MP10382

---

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result >= MDL but < RL

### Report of Analysis

<b>Client Sample ID:</b> PC-MIX-116539-GRID008D	<b>Date Sampled:</b> 09/22/06
<b>Lab Sample ID:</b> F43922-4	<b>Date Received:</b> 09/25/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> n/a
<b>Project:</b> Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	0.0019 B	D008	5.0	0.050	0.0017	mg/l	1	09/27/06	09/27/06 RS	SW846 6010B <sup>1</sup>

(1) Instrument QC Batch: MA5255

(2) Prep QC Batch: MP10382

---

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result > = MDL but < RL

**Report of Analysis**

<b>Client Sample ID:</b>	PC-MIX-116539-GRID008-1	<b>Date Sampled:</b>	09/22/06
<b>Lab Sample ID:</b>	F43922-5	<b>Date Received:</b>	09/25/06
<b>Matrix:</b>	SO - Soil	<b>Percent Solids:</b>	66.4
<b>Method:</b>	SW846 8015 M SW846 3550B		
<b>Project:</b>	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	ZF21573.D	10	09/27/06	VS	09/26/06	OP17982	GZF1013
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.1 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28) <sup>a</sup>	313	130	75	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	59%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-MIX-116539-GRID008-1	<b>Date Sampled:</b> 09/22/06
<b>Lab Sample ID:</b> F43922-5	<b>Date Received:</b> 09/25/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 66.4
<b>Project:</b> Paradise Creek	

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	66.4		%	1	09/25/06	JB	EPA 160.3 M
pH	11.0		su	1	09/27/06 11:50	LE	SW846 9045

---

RL = Reporting Limit

**Report of Analysis**

<b>Client Sample ID:</b>	PC-MIX-116539-GRID008-2	<b>Date Sampled:</b>	09/22/06
<b>Lab Sample ID:</b>	F43922-6	<b>Date Received:</b>	09/25/06
<b>Matrix:</b>	SO - Soil	<b>Percent Solids:</b>	72.5
<b>Method:</b>	SW846 8015 M SW846 3550B		
<b>Project:</b>	Paradise Creek		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	ZF21574.D	10	09/27/06	VS	09/26/06	OP17982	GZF1013
Run #2							

	Initial Weight	Final Volume
Run #1	30.0 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28) <sup>a</sup>	517	110	69	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	63%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-MIX-116539-GRID008-2	<b>Date Sampled:</b> 09/22/06
<b>Lab Sample ID:</b> F43922-6	<b>Date Received:</b> 09/25/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 72.5
<b>Project:</b> Paradise Creek	

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	72.5		%	1	09/25/06	JB	EPA 160.3 M
pH	11.4		su	1	09/27/06 11:50	LE	SW846 9045

---

RL = Reporting Limit

**Report of Analysis**

<b>Client Sample ID:</b>	PC-MIX-116539-GRID008-3	<b>Date Sampled:</b>	09/22/06
<b>Lab Sample ID:</b>	F43922-7	<b>Date Received:</b>	09/25/06
<b>Matrix:</b>	SO - Soil	<b>Percent Solids:</b>	82.3
<b>Method:</b>	SW846 8015 M SW846 3550B		
<b>Project:</b>	Paradise Creek		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	ZF21575.D	10	09/27/06	VS	09/26/06	OP17982	GZF1013
Run #2							

	Initial Weight	Final Volume
Run #1	30.0 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28) <sup>a</sup>	226	100	61	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	63%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-MIX-116539-GRID008-3	<b>Date Sampled:</b> 09/22/06
<b>Lab Sample ID:</b> F43922-7	<b>Date Received:</b> 09/25/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 82.3
<b>Project:</b> Paradise Creek	

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	82.3		%	1	09/25/06	JB	EPA 160.3 M
pH	12.0		su	1	09/27/06 11:50	LE	SW846 9045

---

RL = Reporting Limit



**ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION**

ACCUTEST'S JOB NUMBER: F43922 CLIENT: SHAW PROJECT: Paradise Creek  
 DATE/TIME RECEIVED: 09/25/06 - 09:30 # OF COOLERS RECEIVED: 1 COOLER TEMPS: 2.80  
 METHOD OF DELIVERY: FEDER UPS ACCUTEST COURIER GREYHOUND DELIVERY OTHER  
 AIRBILL NUMBERS: 7985 0459 8134

**COOLER INFORMATION**

- CUSTODY SEAL NOT PRESENT OR NOT INTACT
- CHAIN OF CUSTODY NOT RECEIVED (COC)
- ANALYSIS REQUESTED IS UNCLEAR OR MISSING
- SAMPLE DATES OR TIMES UNCLEAR OR MISSING
- TEMPERATURE CRITERIA NOT MET

**TRIP BLANK INFORMATION**

- TRIP BLANK NOT PROVIDED
- TRIP BLANK NOT ON COC
- TRIP BLANK INTACT
- TRIP BLANK NOT INTACT
- RECEIVED WATER TRIP BLANK
- RECEIVED SOIL TRIP BLANK

**MISC. INFORMATION**

NUMBER OF ENCORES ? 0  
 NUMBER OF 5035 FIELD KITS ? 0  
 NUMBER OR LAB FILTERED METALS ? 0

SUMMARY OF COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**SAMPLE INFORMATION**

- SAMPLE LABELS PRESENT ON ALL BOTTLES
- CORRECT NUMBER OF CONTAINERS USED
- SAMPLE RECEIVED IMPROPERLY PRESERVED
- INSUFFICIENT VOLUME FOR ANALYSIS
- TIMES ON COC DON'T MATCH LABEL
- ID'S ON COC DON'T MATCH LABEL
- VOC VIALS HAVE HEADSPACE (MACRO BUBBLES)
- BOTTLES RECEIVED BUT ANALYSIS NOT REQUESTED
- NO BOTTLES RECEIVED FOR ANALYSIS REQUESTED
- UNCLEAR FILTERING INSTRUCTIONS
- UNCLEAR COMPOSITING INSTRUCTIONS
- SAMPLE CONTAINER(S) RECEIVED BROKEN
- % SOLIDS JAR NOT RECEIVED
- 5035 FIELD KIT FROZEN WITHIN 48 HOUR'S

TECHNICIAN SIGNATURE/DATE [Signature] TECHNICIAN SIGNATURE/DATE \_\_\_\_\_

ASBD03/27/06

LabLink Analytical Data Report  
Paradise Creek 116539

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261.6/96)\*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F43922-1	Lead	7439-92-1	SW846 6010B	0.024	B	mg/l	0.05	5	1	PC-MIX-116539-GRID008A	22-Sep-06	13:15
F43922-2	Lead	7439-92-1	SW846 6010B	0.0093	B	mg/l	0.05	5	1	PC-MIX-116539-GRID008B	22-Sep-06	13:30
F43922-3	Lead	7439-92-1	SW846 6010B	0.0017	U	mg/l	0.05	5	1	PC-MIX-116539-GRID008C	22-Sep-06	13:12
F43922-4	Lead	7439-92-1	SW846 6010B	0.0019	B	mg/l	0.05	5	1	PC-MIX-116539-GRID008D	22-Sep-06	13:10
F43922-5	TPH (C10-C28) (b)		SW846 8015 M	313		mg/kg	130		10	PC-MIX-116539-GRID008-1	22-Sep-06	13:22
F43922-5	o-Terphenyl	84-15-1	SW846 8015 M	59		%	250		10	PC-MIX-116539-GRID008-1	22-Sep-06	13:22
F43922-5	pH		SW846 9045	11		su			1	PC-MIX-116539-GRID008-1	22-Sep-06	13:22
F43922-5	Solids, Percent		EPA 160.3 M	66.4		%			1	PC-MIX-116539-GRID008-1	22-Sep-06	13:22
F43922-6	TPH (C10-C28) (b)		SW846 8015 M	517		mg/kg	110		10	PC-MIX-116539-GRID008-2	22-Sep-06	13:18
F43922-6	o-Terphenyl	84-15-1	SW846 8015 M	63		%	230		10	PC-MIX-116539-GRID008-2	22-Sep-06	13:18
F43922-6	pH		SW846 9045	11.4		su			1	PC-MIX-116539-GRID008-2	22-Sep-06	13:18
F43922-6	Solids, Percent		EPA 160.3 M	72.5		%			1	PC-MIX-116539-GRID008-2	22-Sep-06	13:18
F43922-6	TPH (C10-C28) (b)		SW846 8015 M	226		mg/kg	100		10	PC-MIX-116539-GRID008-3	22-Sep-06	13:26
F43922-7	o-Terphenyl	84-15-1	SW846 8015 M	63		%	200		10	PC-MIX-116539-GRID008-3	22-Sep-06	13:26
F43922-7	pH		SW846 9045	12		su			1	PC-MIX-116539-GRID008-3	22-Sep-06	13:26
F43922-7	Solids, Percent		EPA 160.3 M	82.3		%			1	PC-MIX-116539-GRID008-3	22-Sep-06	13:26

(b) Petroleum hydrocarbon pattern extends beyond C28.

Found 0 results exceeding regulatory limits.

\*\* Indicates result outside regulatory limits.

\* Regulatory limits listed in this document have been obtained from the latest version of the regulations cited and are used for advisory purposes only. Accutest assumes no responsibility for errors in regulatory documents or changes to criteria detailed in later versions of the referenced regulation. It is the responsibility of the user to verify these limits before using or reporting any data.

LabLink Analytical Data Report - Hits/J-Values Only  
Paradise Creek 116539

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261.6/96)\*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F43922-1	Lead	7439-92-1	SW846 6010B	0.024	B	mg/l	0.05	5	1	PC-MIX-116539-GRID008A	22-Sep-06	13:15
F43922-2	Lead	7439-92-1	SW846 6010B	0.0093	B	mg/l	0.05	5	1	PC-MIX-116539-GRID008B	22-Sep-06	13:30
F43922-4	Lead	7439-92-1	SW846 6010B	0.0019	B	mg/l	0.05	5	1	PC-MIX-116539-GRID008D	22-Sep-06	13:10
F43922-5	TPH (C10-C28) (b)		SW846 8015 M	313		mg/kg	130		10	PC-MIX-116539-GRID008-1	22-Sep-06	13:22
F43922-5	pH		SW846 9045	11		su			1	PC-MIX-116539-GRID008-1	22-Sep-06	13:22
F43922-6	TPH (C10-C28) (b)		SW846 8015 M	517		mg/kg	110		10	PC-MIX-116539-GRID008-2	22-Sep-06	13:18
F43922-6	pH		SW846 9045	11.4		su			1	PC-MIX-116539-GRID008-2	22-Sep-06	13:18
F43922-7	TPH (C10-C28) (b)		SW846 8015 M	226		mg/kg	100		10	PC-MIX-116539-GRID008-3	22-Sep-06	13:26
F43922-7	pH		SW846 9045	12		su			1	PC-MIX-116539-GRID008-3	22-Sep-06	13:26

(b) Petroleum hydrocarbon pattern extends beyond C28.

Found 0 results exceeding regulatory limits.

\*\* Indicates result outside regulatory limits.

\* Regulatory limits listed in this document have been obtained from the latest version of the regulations cited and are used for advisory purposes only. Accutest assumes no responsibility for errors in regulatory documents or changes to criteria detailed in later versions of the referenced regulation. It is the responsibility of the user to verify these limits before using or reporting any data.

# **GRID 6**

## **WASTE PACKAGE INCLUDES:**

- WM Application
- SPSW form Application
- Map
- Full TCLP results Grid 6 only
- Grid 6 TCLP results Summary
- Additional Grid 6 samples:
  - TPH – DRO
  - pH
  - TCLP – lead only

**Waste Management Application**

**Navy Signature req'd**



**GENERATOR'S WASTE PROFILE SHEET**  
PLEASE PRINT IN INK OR TYPE

Service Agreement on File?  YES  NO  
 Hazardous  Non-Hazardous  TSCA

Profile Number: WMI \_\_\_\_\_  
 Renewal Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**A. Waste Generator Information**

1. Generator Name: Commander, Navy Region Mid-Atlantic (CNRMA) 2. SIC Code: \_\_\_\_\_  
 3. Facility Street Address: 1510 Gilbert St, 4. Phone: (757) 445-6703  
 5. Facility City: Norfolk 6. State/Province: VA  
 7. Zip/Postal Code: 23511-2737 8. Generator USEPA/Federal ID #: NOT APPLICABLE  
 9. County: \_\_\_\_\_ 10. State/Province ID #: NOT APPLICABLE  
 11. Customer Name: Capital Environmental TIM ROSEN 12. Customer Phone: (804) 239-0968 (757) 444-6890  
 13. Customer Contact: Matt Gemmel NAUFAC 14. Customer Fax: 804-798-3326 (757) 444-5922  
 15. Billing Address \_\_\_\_\_  Same as above

**B. Waste Stream Information**

1. Description  
 a. Name of Waste: Soil contaminated with Wood Debris mixed with Portland Cement  
 b. Process Generating Waste: Excavation

c. Color <u>gray to black</u>	d. Strong odor (describe): <u>none</u>	e. Physical state @ 70°F <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> Sludge <input type="checkbox"/> Other	f. Layers <input checked="" type="checkbox"/> Single Layer <input type="checkbox"/> Multi-layer	g. Free liquid range <u>n/a to</u> % h. pH: Range <u>10.3 to 11.3</u>
----------------------------------	---	---	---	--

i. Liquid Flash Point:  <73°F  73-99°F  100-139°F  140-199°F  ≥ 200°F  Not applicable  
 j. Chemical Composition (List all constituents [including halogenated organics, debris, and UHC's] present in any concentration and submit representative analysis):

Constituents	Concentration Range	Constituents	Concentration Range
<u>See attached analytical</u>			

**TOTAL COMPOSITION MUST EQUAL OR EXCEED 100%**

Check all that apply:

- k.  Oxidizer  Pyrophoric  Explosive  Radioactive  
 Carcinogen  Infectious  Shock Sensitive  Water Reactive
- l. Does the waste represented by this profile contain any of the carcinogens which require OSHA notification? (list in Section B.1.j).....  YES  NO
- m. Does the waste represented by this profile contain dioxins? (list in Section B.1.j).....  YES  NO
- n. Does the waste represented by this profile contain asbestos?.....  YES  NO  
 If yes.....  friable  non-friable
- o. Does the waste represented by this profile contain benzene?.....  YES  NO  
 If yes, concentration \_\_\_\_\_ ppm  
 Is the waste subject to the benzene waste operations NESHAP?.....  YES  NO
- p. Is the waste subject to RCRA Subpart CC controls?.....  YES  NO  
 If yes, volatile organic concentration \_\_\_\_\_ ppmw
- q. Does the waste contain any Class I or Class II ozone-depleting substances?.....  YES  NO
- r. Does the waste contain debris? (list in Section B.1.j).....  YES  NO

2. Quantity of Waste  
 Estimated Annual Volume ~1500  Tons  Yards  Drums  Other (specify) \_\_\_\_\_

3. Shipping Information  
 a. Packaging:  
 Bulk Solid; Type/Size: dump trucks  Bulk Liquid; Type/Size: \_\_\_\_\_  
 Drum; Type; Size: \_\_\_\_\_  Other: \_\_\_\_\_

b. Shipping Frequency: Units truck loads Per:  Month  Quarter  Year  One time  Other \_\_\_\_\_

c. Is this a U.S. Department of Transportation (USDOT) Hazardous Material? (If no, skip d, e, and f).....  YES  NO



**GENERATOR'S WASTE PROFILE SHEET** Profile Number: WMI  
PLEASE PRINT IN INK OR TYPE

- d. Reportable Quantity (lbs.; kgs.): \_\_\_\_\_ e. Hazard Class/ID #: \_\_\_\_\_  
 f. USDOT Shipping Name: \_\_\_\_\_  
 g. Personal Protective Equipment Requirements: \_\_\_\_\_  
 h. Transporter/Transfer Station: \_\_\_\_\_

**C. Generator's Certification** (Please check appropriate responses, sign, and date below.)

1. Is this a USEPA hazardous waste (40 CFR Part 261)? If the answer is no, skip to 2.  YES  NO
  - a. If yes, identify ALL USEPA listed and characteristic waste code numbers (D, F, K, P, U) \_\_\_\_\_
  - b. If a characteristic hazardous waste, do underlying hazardous constituents (UHCs) apply? (if yes, list in Section B.1.j)  YES  NO
  - c. Does this waste contain debris? (if yes, list size and type in Chemical Composition - B.1.)  YES  NO
2. Is this a state hazardous waste?  YES  NO  
Identify ALL state hazardous waste codes \_\_\_\_\_
3. Is the waste from a CERCLA (40 CFR 300, Appendix B) or state mandated clean-up?  YES  NO  
If yes, attach Record of Decision (ROD), 104/106 or 122 order or court order that governs site clean-up activity. For state mandated clean-up, provide relevant documentation.
4. Does the waste represented by this waste profile sheet contain radioactive material, or is disposal regulated by the Nuclear Regulatory Commission?  YES  NO
5. Does the waste represented by this waste profile sheet contain concentrations of Polychlorinated Biphenyls (PCBs) regulated by 40 CFR 761? (if yes, list in Chemical Composition - B.1.j)  YES  NO
  - a. If yes, were the PCBs imported into the U.S.?  YES  NO
6. Do the waste profile sheet and all attachments contain true and accurate descriptions of the waste material, and has all relevant information within the possession of the Generator regarding known or suspected hazards pertaining to the waste been disclosed to the Contractor?  YES  NO
7. Will all changes which occur in the character of the waste be identified by the Generator and disclosed to the Contractor prior to providing the waste to the Contractor?  YES  NO

Check here if a Certificate of Destruction or Disposal is required.

Any sample submitted is representative as defined in 40 CFR 261 - Appendix I or by using an equivalent method. I authorize WMI to obtain a sample from any waste shipment for purposes of recertification. If this certification is made by a broker, the undersigned signs as authorized agent of the generator and has confirmed the information contained in this Profile Sheet from information provided by the generator and additional information as it has determined to be reasonably necessary. If approved for management, Contractor has all the necessary permits and licenses for the waste that has been characterized and identified by this approved profile.

Certification Signature: \_\_\_\_\_  
Name (Type or Print): \_\_\_\_\_

*[Handwritten Signature]*  
*[Handwritten Name]*

Title: ENV. ENGINEER PROJECT MANAGER  
Company Name: NAVAL FACILITIES ENCL Date: 29 April 2006  
 Check if additional information is attached. Indicate the number of attached pages LOW MANY

D. WMI Management's Decision	FOR WMI USE ONLY
1. Management Method <input type="checkbox"/> Landfill <input type="checkbox"/> Non-hazardous Solidification <input type="checkbox"/> Bioremediation <input type="checkbox"/> Incineration <input type="checkbox"/> Hazardous Stabilization <input type="checkbox"/> Other (Specify) _____	
2. Proposed Ultimate Management Facility: _____	
3. Precautions, Special Handling Procedures, or Limitation on Approval: _____ _____ _____	
Special Waste Decision: _____	<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved
Salesperson's Signature: _____	Date: _____
Division Approval Signature (Optional): _____	Date: _____
Special Waste Approvals Person Signature: _____	Date: _____



## GENERATOR'S WASTE PROFILE SHEET

PLEASE PRINT IN INK OR TYPE

### Instructions

Information on this form is used to determine if the waste may be transported, treated, stored or disposed in a legal, safe, and environmentally sound manner. This information will be maintained in strict confidence. Answers must be provided for sections A, B, and C and must be printed in ink or typed. A response of "NONE" or "NA" (not applicable) can be made if appropriate. If additional space is needed, indicate on the form that additional information is attached, and attach the information to Generator's Waste Profile Sheet. If you have questions concerning this form, please contact the Contractor's sales representative.

#### A. Waste Generator Information

1. **Generator Name** - Enter the name of the facility where the waste is generated.
2. **SIC Code** - Enter the four digit Standard Industrial Classification Code for the facility where the waste is generated.
3. **Facility Street Address** - Enter the street address (not P.O. Box) of the facility where the waste is generated.
4. **Phone** - Enter Generator's area code and phone number.
5. **Facility City** - Enter the city where the waste is generated.
6. **State/Province** - Enter the state or province where the waste is generated.
7. **Zip/Postal Code** - Enter the generating facility's zip or postal code.
8. **Generator USEPA/Federal ID #** - Enter the identification number issued by the USEPA, Canadian, or Mexican Federal Agency to the facility generating the waste (if applicable).
9. **County** - Enter the county where the waste is generated.
10. **State/Province ID #** - Enter the identification number issued by the state or province to the facility generating the waste (if applicable).
11. **Customer Name** - Entity that the Contractor is directly working with regarding the represented waste stream. If the same as the Generator, mark "Same as Above".
12. **Customer Phone** - Enter technical contact's area code and telephone number.
13. **Customer Contact** - Enter the name of the person who can answer technical questions about the waste.
14. **Customer Fax** - Area code and facsimile number for the customer.
15. **Billing Address** - Address where bill for services should be sent.

#### B. Waste Stream Information

- 1.a. **Name of Waste** - Enter a name generally descriptive of this waste (e.g., paint sludge, fluorescent bulbs).
- 1.b. **Process Generating Waste** - Describe the process generating the waste in detail. List the specific process/operation or source that generates the waste (e.g., incineration of municipal refuse, asbestos removal, wastewater treatment, building maintenance).
  - At a minimum, the Generator should answer the following questions in determining the process generating the waste.
  - What chemicals are stored and/or used at the facility?
  - Is the waste generated from the production/manufacturing of any of the following industries: wood preservation; inorganic pigments; organic pigments; pesticides; explosives; petroleum refining; iron and steel, copper, lead or zinc production?
  - Is the waste a result from degreasing, solvent parts cleaning, recovery/reclaiming of solvents (bottoms), wastewater treatment (sludges), or electroplating?
- 1.c. **Color** - Describe the color of the waste (e.g., blue, transparent, varies).
- 1.d. **Strong odor - DO NOT SMELL THE WASTE!** If the waste has a known odor, then describe (e.g., acrid, pungent, solvent, sweet).
- 1.e. **Physical state @ 70°F** - If the four boxes provided do not apply, a descriptive phrase may be entered after "Other" (e.g., multi-phase).
- 1.f. **Layers** - Single Layer means the waste is homogenous. Multi-layer means the waste is comprised of two or more layers (e.g., oil/water/sludge).
- 1.g. **Free liquid range** - Range (in percent by volume) of free liquids in the waste.
- 1.h. **pH Range** - Indicate the pH range.
- 1.i. **Liquid Flash Point** - Indicate the flash point obtained using the appropriate test method.
- 1.j. **Chemical Composition** - List all organic and/or inorganic components of the waste using chemical names. If trade names are used, attach Material Safety Data Sheets or other documents that adequately describe the composition of the waste. For each component, estimate the range (in percent) in which the component is present.
- 1.k. Check all that apply.
  - 1.l. Identify any element, chemical compound, or mixture in concentration of 0.1 percent or greater that is considered a carcinogen or potential carcinogen pursuant to OSHA.
  - 1.m. Indicate if the waste contains any dioxins (list in Section B.1.j).
  - 1.n. Indicate if the waste contains asbestos. Indicate if the asbestos is friable.
  - 1.o. Indicate if the waste contains benzene, the level in ppm, and whether it is subject to the benzene NESHAP.
  - 1.p. Indicate if the waste is subject to RCRA Subpart CC control. In addition, indicate the volatile organic concentration, if known, in parts per million weight.
  - 1.q. Indicate if the waste contains any Class I or Class II ozone-depleting controlled substances.
  - 1.r. Indicate if the waste contains debris (list size and type in B.1.j).
2. **Quantity of Waste** - Approximate volume in tons, yards, or other (e.g., drums, gallons) that will be received by the ultimate management facility. This volume amount is not intended for use in complying with state and/or permit restrictions.
- 3.a. **Packaging** - Choose the appropriate option or "other" along with a description.
- 3.b. **Shipping Frequency** - Choose the appropriate option or "other" along with a description.
- 3.c. **Is this a U.S. Department of Transportation (USDOT) hazardous material?** - Choose the appropriate response: yes or no.
- 3.d. **Reportable Quantity (lbs.; kgs.)** - If the answer to 3.c. is yes, enter the Reportable Quantity (RQ) established by 40 CFR 302.4 or equivalent Canadian or Mexican regulation for this waste. Indicate the appropriate units for the RQ.
- 3.e. **Hazard Class/ID #** - If the answer to 3.c. is yes, indicate the proper USDOT hazard class and identification number.
- 3.f. **USDOT Shipping Name** - IF the answer to 3.c. is yes, enter the proper USDOT shipping name for the waste.
- 3.g. **Personal Protective Equipment Requirements** - All personal protective equipment necessary to safely manage the waste stream.
- 3.h. **Transporter/Transfer Station** - Transporter and/or transfer station name.



**GENERATOR'S WASTE PROFILE SHEET**  
PLEASE PRINT IN INK OR TYPE

**C. Generator's Certification** (Please check appropriate responses, sign, and date below.)

Indicate the appropriate response to questions/statements 1, 2, 3, 4, 5, 6, and 7. By signing this Generator's Waste Profile Sheet, the Generator certifies the responses are true and accurate with respect to the waste stream(s) listed.

**Certification Signature** - Signature of an authorized employee of the Generator or representative of the generator if authorized in writing by the generator.

**Title** - Enter Employee's title.

**Name** - Type or Print Employee's name.

**Company Name** - Company employing the person certifying the Generator's Waste Profile Sheet.

**Date** - Enter the date this Generator's Waste Profile Sheet is signed.

**D. WMI Management's Decision**

FOR WMI USE ONLY

To be completed by WMI.

**SPSW-2 FORM**

**Signature Required**

Grid 5

**Form SPSW-2**  
**SPECIAL WASTE DISPOSAL REQUEST**  
**GENERATOR INFORMATION**

**Section I. Generator Identification:**

a. Generator Name: Commander, Navy Region Mid-Atlantic

b. Generator Address: 1510 Gilbert St, Norfolk VA, 23511-2737

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c. Generator Phone: (757)445-6703 Tim Reisch (757) 444-6890

**Section II. General Waste Profile:**

**Note:** It is the duty of all persons to dispose of their solid waste in a legal manner (Va.Code ' 10.1-1418.1.A). In addition, any person who generates a solid waste shall determine if that waste is a hazardous waste (' 6.1 of the Virginia Hazardous Waste Management Regulations (VR 672-10-1) ("VHWMR")).

a. General description of waste, including its state (e.g., solid liquid, semi-solid, gas):

Solid material that includes Soil and debris (concrete and wood) consistent with construction debris mixed with Portland cement.

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b. Amount of materials proposed for disposal:

Volume or Weight approximately 1,500

Units cubic yards

- c. Activities or processes from which the waste was generated, including process flow diagrams specifically addressing the waste stream(s), a description of the source of the waste, and a statement of whether the waste was formerly managed as a hazardous waste.

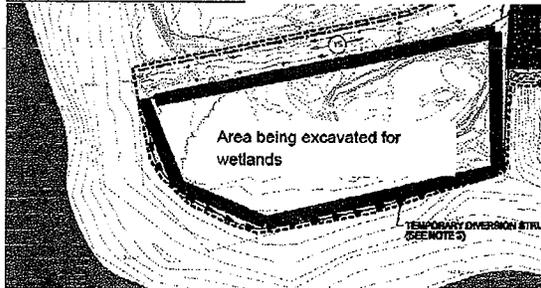
This waste material is being generated as a result of the excavation for construction of an engineered wetlands. The material was deposited originally as fill material adjacent to the toe of a former landfill operated by Norfolk Naval Shipyard (NNSY). On top of the fill a calcium hydroxide berm impoundment was built. That impoundment has been removed. The remaining fill material dimensional lumber, (wood debris) and soil mix needs to be removed to accommodate the construction of an engineered landfill.

NOTE: Attach a flow diagram and indicate any deletions due to proprietary or trade secret information. The Department cannot protect proprietary information or trade secrets.

- d. Location of generation:

The removal site is located between Paradise Creek on the southern boundary, and the northern boundary is the NNSY former Eastern Area Landfill and the Western Area Landfill. The area being excavated is on a bend in Paradise Creek : Attached map shows GRID 6

AREA SPECIFICALLY



- e. Method of transportation:

Describe the manner in which the material is being transported for disposal (e.g., bulk containers):

Bulk shipment via Dump Trucks

f. Testing results

PARAMETER	ANALYZED (METHOD)	NOT ANALYZED (REASON)	RESULTS INCLUDED
Corrosivity	SW 846, Chapter 7	N/a	See attached analysis
Ignitability	SW 846 1010	N/a	See attached analysis
TCLP (a - e) only			
a. Metals	See attached table	N/a	See attached analysis
b. Volatile Organics	See attached table	N/a	See attached analysis
c. Semi-Volatile Organics	See attached table	N/a	See attached analysis
d. Pesticides	See attached table	N/a	See attached analysis
e. Herbicides	See attached table	N/a	See attached analysis
Total Metals		TCLP	N
Volatile Organics		TCLP	N
Semi-Volatile Organics		TCLP	N
Pesticides		TCLP	N
Herbicides		TCLP	N
PCB's	SW846 8082	N/a	See attached analysis
Paint Filter Test		To be performed during removal action	N
Radioactive Waste		Previous investigation, site history	N
Asbestos		Previous investigation, site history	N
Percent Solids	EPA 160.3		w/ TCLP results
TOX		Previous investigation, site history	N
TPH <sup>1</sup>	SW 846 8015M	N/a	See attached analysis

1

TPH DRO samples are to be taken during removal prior to disposal for meeting disposal facility criteria at the frequency of 1 per 500 cubic yards material.

g. Sample location map included: Yes (xx) No ( )

Section III. Generator Certification:

I hereby certify, based upon my diligent inquiry into the activities, materials, and processes generating the materials described on this form:

1. That these materials are not classified as listed or characteristic hazardous waste governed by the Commonwealth of Virginia or the state of origin of this waste;
2. That the materials are not regulated medical waste governed by the Virginia Regulated Medical Waste Management Regulations (VR 672-40-01);
3. That the materials do not contain 50.0 parts per million or more of polychlorinated biphenyls (PCB's);
4. That the materials do not contain more than 1.0 part per billion of dioxins;  
*There is no reason to expect presence of dioxins.*
5. That the material is not a radioactive waste or possess the property of radioactivity;
6. That the materials are not prohibited or restricted from disposal in a Virginia solid waste management facility; and
7. That the analytical results, completed application and attached documentation submitted in support of this special waste disposal request are a representative, true, and accurate description of these materials.

Print Name: Crystal St. Clair-Canaïi

Title: Regional Hazardous Waste Program Manager

Signature: Crystal St. Clair-Canaïi Date: 8/31/06

Notary Statement



# **Map – Grid 6 Location**

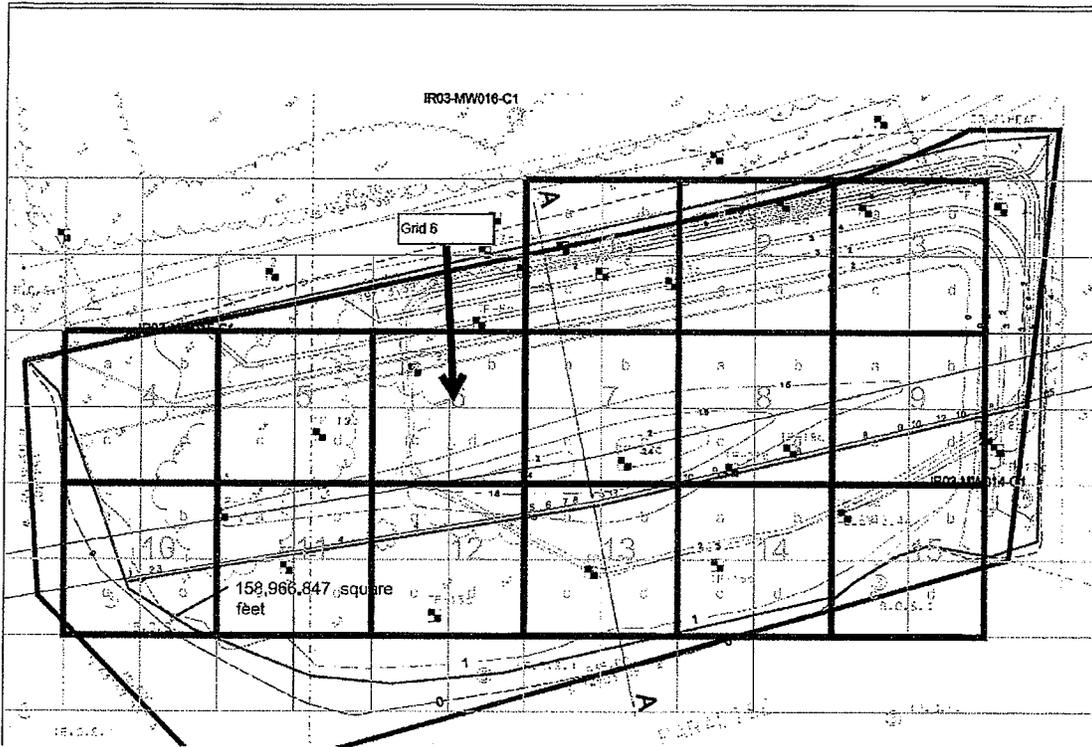
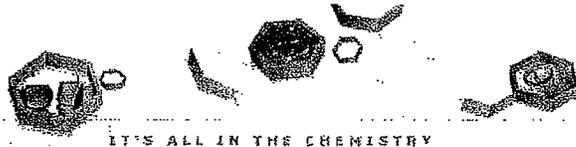


Figure 1

# **Full TCLP Results – Grid 6 Only**



IT'S ALL IN THE CHEMISTRY

06/30/06

**Technical Report for**

ANALYSIS WITHIN THIS REPORT FOR THIS WASTE APPLICATION, SAMPLES FROM GRID 10 ONLY APPLY.

**Shaw E & I, Inc.**

**Paradise Creek**

**116539**

**Accutest Job Number: F41620**

**Sampling Date: 06/20/06**



**Report to:**

**Shaw E & I, Inc.**

**natasha.sullivan@shawgrp.com**

**ATTN: Natasha Sullivan**

**Total number of pages in report: 112**



Test results contained within this data package meet the requirements of the National Environmental Laboratory Accreditation Conference and/or state specific certification programs as applicable.

*Harry Behzadi*  
**Harry Behzadi, Ph.D.**  
**Laboratory Director**

Certifications: FL (DOH E83510), NC (573), NJ (FL002), MA (FL946), IA (366), LA (03051), KS (E-10327), SC, AK  
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Accutest Laboratories

### Sample Summary

Shaw E & I, Inc.

Job No: F41620

Paradise Creek  
Project No: 116539

Sample Number	Collected Date	Time By	Received	Matrix Code	Type	Client Sample ID
F41620-1	06/20/06	10:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID04
F41620-1A	06/20/06	10:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID04
F41620-2	06/20/06	15:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID05
F41620-2A	06/20/06	15:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID05
F41620-3	06/20/06	16:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID06
F41620-3A	06/20/06	16:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID06
F41620-4	06/20/06	11:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID10
F41620-4A	06/20/06	11:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID10
F41620-5	06/20/06	13:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID11
F41620-5A	06/20/06	13:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID11
F41620-6	06/20/06	14:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID12
F41620-6A	06/20/06	14:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID12

Soil samples reported on a dry weight basis unless otherwise indicated on result page.



IT'S ALL IN THE CHEMISTRY

**Sample Results**

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**Report of Analysis**

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**Report of Analysis**

2.5  
2

<b>Client Sample ID:</b> PC-TP-116539-GRID06	<b>Date Sampled:</b> 06/20/06
<b>Lab Sample ID:</b> F41620-3	<b>Date Received:</b> 06/22/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 61.7
<b>Method:</b> SW846 8015	
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	UV022703.D	1	06/23/06	MM	n/a	n/a	GUV1317
Run #2							

Run #	Initial Weight	Final Volume	Methanol Aliquot
Run #1	5.88 g	5.0 ml	100 ul
Run #2			

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	8.67	10	5.0	mg/kg	J

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
460-00-4	4-Bromofluorobenzene	133%		62-135%
98-08-8	aaa-Trifluorotoluene	97%		65-118%

(a) Sample was received in a bulk container and preserved within 48 hours of sampling.

ND = Not detected      MDL - Method Detection Limit      J = Indicates an estimated value  
 RL = Reporting Limit      B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID06	
<b>Lab Sample ID:</b> F41620-3	<b>Date Sampled:</b> 06/20/06
<b>Matrix:</b> SO - Soil	<b>Date Received:</b> 06/22/06
<b>Method:</b> SW846 8082 SW846 3550B	<b>Percent Solids:</b> 61.7
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	ST48646.D	10	06/28/06	ME	06/26/06	OP17013	GST1419
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.3 g	10.0 ml
Run #2		

**PCB List**

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	270	130	ug/kg	
11104-28-2	Aroclor 1221	ND	270	210	ug/kg	
11141-16-5	Aroclor 1232	ND	270	270	ug/kg	
53469-21-9	Aroclor 1242	ND	270	270	ug/kg	
12672-29-6	Aroclor 1248	ND	270	270	ug/kg	
11097-69-1	Aroclor 1254 <sup>b</sup>	ND	540	540	ug/kg	
11096-82-5	Aroclor 1260 <sup>c</sup>	1380	270	130	ug/kg	J
11100-14-4	Aroclor 1268 <sup>c</sup>	509	270	130	ug/kg	J
	Total PCBs	1890	530		ug/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	118%		52-136%
2051-24-3	Decachlorobiphenyl	339% <sup>d</sup>		49-148%

- (a) All hits confirmed by dual column analysis.
- (b) Elevated reporting limits due to matrix interference.
- (c) Estimated value due to the presence of multiple overlapping Aroclor patterns.
- (d) Outside control limits due to dilution.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

**Report of Analysis**

<b>Client Sample ID:</b> PC-TP-116539-GRID06	<b>Date Sampled:</b> 06/20/06
<b>Lab Sample ID:</b> F41620-3	<b>Date Received:</b> 06/22/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 61.7
<b>Method:</b> SW846 8015 M SW846 3550B	
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	LL11100.D	4	06/29/06	VS	06/27/06	OP17034	GLL410
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.2 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28) <sup>a</sup>	446	54	32	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	77%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

2.5  
2

Client Sample ID:	PC-TP-116539-GRID06	Date Sampled:	06/20/06
Lab Sample ID:	F41620-3	Date Received:	06/22/06
Matrix:	SO - Soil	Percent Solids:	61.7
Project:	Paradise Creek		

General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Corrosivity as pH	7.6			1	06/23/06	CP	SW846 CHAP7
Cyanide Reactivity	< 2.4	2.4	mg/kg	1	06/29/06	SJL	SW846 CHAP7
Ignitability (Flashpoint) <sup>a</sup>	> 200		Deg. F	1	06/23/06	CP	SW846 1010
Solids, Percent	61.7		%	1	06/22/06	CP	EPA 160.3 M
Sulfide Reactivity	< 50	50	mg/kg	1	06/29/06	SJL	SW846 CHAP7

(a) Not ignitable

RL = Reporting Limit

Report of Analysis

Client Sample ID:	PC-TP-116539-GRID06	Date Sampled:	06/20/06
Lab Sample ID:	F41620-3A	Date Received:	06/22/06
Matrix:	SO - Soil	Percent Solids:	61.7
Method:	SW846 8260B SW846 1311		
Project:	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	C0041833.D	10	06/29/06	KW	06/27/06	OP17038	VC1691
Run #2							

Run #	Purge Volume
Run #1	5.0 ml
Run #2	

VOA TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
71-43-2	Benzene	ND	D018	0.50	0.010	0.0050	mg/l	
108-90-7	Chlorobenzene	ND	D021	100	0.020	0.0050	mg/l	
67-66-3	Chloroform	ND	D022	6.0	0.020	0.0050	mg/l	
56-23-5	Carbon tetrachloride	ND	D019	0.50	0.020	0.0050	mg/l	
75-35-4	1,1-Dichloroethylene	ND	D029	0.70	0.020	0.0050	mg/l	
107-06-2	1,2-Dichloroethane	ND	D028	0.50	0.020	0.0050	mg/l	
106-46-7	p-Dichlorobenzene	ND	D027	7.5	0.020	0.0050	mg/l	
78-93-3	Methyl ethyl ketone	ND	D035	200	0.10	0.025	mg/l	
127-18-4	Tetrachloroethylene	ND	D039	0.70	0.020	0.0050	mg/l	
79-01-6	Trichloroethylene	ND	D040	0.50	0.020	0.0050	mg/l	
75-01-4	Vinyl chloride	ND	D043	0.20	0.010	0.0050	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	107%		86-115%
2037-26-5	Toluene-D8	99%		86-112%
460-00-4	4-Bromofluorobenzene	103%		83-119%
17060-07-0	1,2-Dichloroethane-D4	103%		73-126%

ND = Not detected    MDL - Method Detection Limit    J = Indicates an estimated value  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)    B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range    N = Indicates presumptive evidence of a compound

Report of Analysis

Client Sample ID: PC-TP-116539-GRID06	Date Sampled: 06/20/06
Lab Sample ID: F41620-3A	Date Received: 06/22/06
Matrix: SO - Soil	Percent Solids: 61.7
Method: SW846 8270C SW846 3510C	
Project: Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	L032381.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	1.0 ml
Run #2		

ABN TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	D023	200	0.050	0.020	mg/l	
	3&4-Methylphenol	ND	D024	200	0.050	0.020	mg/l	
87-86-5	Pentachlorophenol	ND	D037	100	0.25	0.10	mg/l	
95-95-4	2,4,5-Trichlorophenol	ND	D041	400	0.050	0.020	mg/l	
88-06-2	2,4,6-Trichlorophenol	ND	D042	2.0	0.050	0.020	mg/l	
106-46-7	1,4-Dichlorobenzene	ND	D027	7.5	0.050	0.010	mg/l	
121-14-2	2,4-Dinitrotoluene	ND	D030	0.13	0.050	0.020	mg/l	
118-74-1	Hexachlorobenzene	ND	D032	0.13	0.050	0.010	mg/l	
87-68-3	Hexachlorobutadiene	ND	D033	0.50	0.050	0.020	mg/l	
67-72-1	Hexachloroethane	ND	D034	3.0	0.050	0.020	mg/l	
98-95-3	Nitrobenzene	ND	D036	2.0	0.050	0.010	mg/l	
110-86-1	Pyridine	ND	D038	5.0	0.10	0.030	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
367-12-4	2-Fluorophenol	43%		19-90%
4165-62-2	Phenol-d5	26%		10-68%
118-79-6	2,4,6-Tribromophenol	99%		36-137%
4165-60-0	Nitrobenzene-d5	87%		49-119%
321-60-8	2-Fluorobiphenyl	89%		45-118%
1718-51-0	Terphenyl-d14	93%		46-135%

ND = Not detected MDL - Method Detection Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)  
E = Indicates value exceeds calibration range

J = Indicates an estimated value  
B = Indicates analyte found in associated method blank  
N = Indicates presumptive evidence of a compound

Report of Analysis

Client Sample ID:	PC TP 116539 CRID06	
Lab Sample ID:	F41620-3A	Date Sampled: 06/20/06
Matrix:	SO - Soil	Date Received: 06/22/06
Method:	SW846 8081A SW846 3510C	Percent Solids: 61.7
Project:	Paradise Creek	

Run #1	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #2	TT00800.D	1	06/29/06	AA	06/28/06	OP17053	GTT35

Run #1	Initial Volume	Final Volume
Run #2	100 ml	10.0 ml

Pesticide TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	D013	0.40	0.00050	0.00020	mg/l	
12789-03-6	Chlordane	ND	D020	0.030	0.0050	0.0025	mg/l	
72-20-8	Endrin	ND	D012	0.020	0.0010	0.00040	mg/l	
76-44-8	Heptachlor	ND	D031	0.0080	0.00050	0.00020	mg/l	
1024-57-3	Heptachlor epoxide	ND	D031	0.0080	0.00050	0.00020	mg/l	
72-43-5	Methoxychlor	ND	D014	10	0.0010	0.00040	mg/l	
8001-35-2	Toxaphene	ND	D015	0.50	0.025	0.015	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	100%		60-138%
2051-24-3	Decachlorobiphenyl	95%		31-148%

ND = Not detected    MDL - Method Detection Limit    J = Indicates an estimated value  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)    B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range    N = Indicates presumptive evidence of a compound

Report of Analysis

2.6  
2

Client Sample ID:	PC-TP-116539-GRID06	
Lab Sample ID:	F41620-3A	Date Sampled: 06/20/06
Matrix:	SO - Soil	Date Received: 06/22/06
Method:	SW846 8151 SW846 1311	Percent Solids: 61.7
Project:	Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	DD57052.D	1	06/29/06	ATX	06/28/06	T:OP6063	T:GDD1067
Run #2							

Run #	Initial Volume	Final Volume
Run #1	1000 ml	10.0 ml
Run #2		

Herbicide TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
94-75-7	2,4-D	ND	D016	10	0.0015	0.0011	mg/l	
93-72-1	2,4,5-TP (Silvex)	ND	D017	1.0	0.00020	0.000060	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
19719-28-9	2,4-DCAA	117%		23-171%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

ND = Not detected    MDL - Method Detection Limit    J = Indicates an estimated value  
MCL = Maximum Contamination Level (40 CFR 261 6/96)    B = Indicates analyte found in associated method blank  
E = Indicates value exceeds calibration range    N = Indicates presumptive evidence of a compound

Report of Analysis

2.6  
2

Client Sample ID: PC-TP-116539-GRID06	Date Sampled: 06/20/06
Lab Sample ID: F41620-3A	Date Received: 06/22/06
Matrix: SO - Soil	Percent Solids: 61.7
Project: Paradise Creek	

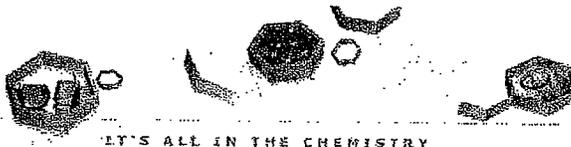
Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Arsenic <sup>a</sup>	0.0056 U	D004	5.0	0.020	0.0056	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>
Barium	3.0	D005	100	1.0	0.20	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>
Cadmium	0.15	D006	1.0	0.0050	0.00030	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>
Chromium	0.030	D007	5.0	0.010	0.00060	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>
Lead <sup>b</sup>	5.8	D008	5.0	0.50	0.017	mg/l	5	06/27/06	06/28/06	RS SW846 6010B <sup>3</sup>
Mercury	0.0010 U	D009	0.20	0.010	0.0010	mg/l	1	06/27/06	06/27/06	MS SW846 7470A <sup>1</sup>
Selenium <sup>c</sup>	0.040 U	D010	1.0	0.10	0.040	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>
Silver	0.00090 U	D011	5.0	0.010	0.00090	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>

- (1) Instrument QC Batch: MA5055
- (2) Instrument QC Batch: MA5056
- (3) Instrument QC Batch: MA5059
- (4) Prep QC Batch: MP9826
- (5) Prep QC Batch: MP9828

- (a) Elevated RL/MDL due to negative bias of Method Blank.
- (b) Elevated RL/MDL due to CRIA exceeding acceptance criteria.
- (c) Elevated RL/MDL due to positive bias of Method Blank.

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result > = MDL but < RL



### Misc. Forms

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### Custody Documents and Other Forms

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Includes the following where applicable:

- Chain of Custody



**ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION**

ACCUTEST'S JOB NUMBER: F41620 CLIENT: SHW PROJECT: Paradise Creek  
 DATE/TIME RECEIVED: 6/22/06 19:00 # OF COOLERS RECEIVED: 1 COOLER TEMPS: 2.4  
 METHOD OF DELIVERY: FEDEx UPS ACCUTEST COURIER GREYHOUND DELIVERY OTHER  
 AIRBILL NUMBERS: 85748739 8402

**COOLER INFORMATION**

- CUSTODY SEAL NOT PRESENT OR NOT INTACT
- CHAIN OF CUSTODY NOT RECEIVED (COC)
- ANALYSIS REQUESTED IS UNCLEAR OR MISSING
- SAMPLE DATES OR TIMES UNCLEAR OR MISSING
- TEMPERATURE CRITERIA NOT MET

**TRIP BLANK INFORMATION**

- TRIP BLANK NOT PROVIDED
- TRIP BLANK NOT ON COC
- TRIP BLANK INTACT
- TRIP BLANK NOT INTACT
- RECEIVED WATER TRIP BLANK
- RECEIVED SOIL TRIP BLANK

**MISC. INFORMATION**

NUMBER OF ENCORES? 0  
 NUMBER OF SOSS FIELD KITS? 0  
 NUMBER OR LAB FILTERED METALS? 0

SUMMARY OF COMMENTS: No date + time on soil jars

**SAMPLE INFORMATION**

- SAMPLE LABELS PRESENT ON ALL BOTTLES
- CORRECT NUMBER OF CONTAINERS USED
- SAMPLE RECEIVED IMPROPERLY PRESERVED
- INSUFFICIENT VOLUME FOR ANALYSIS
- TIMES ON COC DON'T MATCH LABEL
- ID'S ON COC DON'T MATCH LABEL
- VOC VIALS HAVE HEADSPACE (MACRO BUBBLES)
- BOTTLES RECEIVED BUT ANALYSIS NOT REQUESTED
- NO BOTTLES RECEIVED FOR ANALYSIS REQUESTED
- UNCLEAR FILTERING INSTRUCTIONS
- UNCLEAR COMPOSITING INSTRUCTIONS
- SAMPLE CONTAINER(S) RECEIVED BROKEN
- % SOLIDS JAR NOT RECEIVED
- SOSS FIELD KIT FROZEN WITHIN 48 HOURS

3.1



## GC/MS Volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Leachate Blank Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17038-LB	C0041830.D	10	06/29/06	KW	06/27/06	OP17038	VC1691

4.1  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Result	RL	MDL	Units	Q
71-43-2	Benzene	ND	10	5.0	ug/l	
108-90-7	Chlorobenzene	ND	20	5.0	ug/l	
67-66-3	Chloroform	ND	20	5.0	ug/l	
56-23-5	Carbon tetrachloride	ND	20	5.0	ug/l	
75-35-4	1,1-Dichloroethylene	ND	20	5.0	ug/l	
107-06-2	1,2-Dichloroethane	ND	20	5.0	ug/l	
106-46-7	p-Dichlorobenzene	ND	20	5.0	ug/l	
78-93-3	Methyl ethyl ketone	ND	100	25	ug/l	
127-18-4	Tetrachloroethylene	ND	20	5.0	ug/l	
79-01-6	Trichloroethylene	ND	20	5.0	ug/l	
75-01-4	Vinyl chloride	ND	10	5.0	ug/l	

CAS No.	Surrogate Recoveries		Limits
1868-53-7	Dibromofluoromethane	108%	86-115%
17060-07-0	1,2-Dichloroethane-D4	105%	73-126%
2037-26-5	Toluene-D8	99%	86-112%
460-00-4	4-Bromofluorobenzene	105%	83-119%

# Blank Spike Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VC1691-BS	C0041829.D	10	06/29/06	KW	n/a	n/a	VC1691

4.2  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
71-43-2	Benzene	250	279	112	80-120
108-90-7	Chlorobenzene	250	250	100	82-112
67-66-3	Chloroform	250	273	109	78-118
56-23-5	Carbon tetrachloride	250	262	105	69-137
75-35-4	1,1-Dichloroethylene	250	269	108	67-134
107-06-2	1,2-Dichloroethane	250	262	105	68-121
106-46-7	p-Dichlorobenzene	250	252	101	77-113
78-93-3	Methyl ethyl ketone	1250	1100	88	58-127
127-18-4	Tetrachloroethylene	250	273	109	75-126
79-01-6	Trichloroethylene	250	277	111	80-115
75-01-4	Vinyl chloride	250	267	107	70-151

CAS No.	Surrogate Recoveries	BSP	Limits
1868-53-7	Dibromofluoromethane	105%	86-115%
17060-07-0	1,2-Dichloroethane-D4	107%	73-126%
2037-26-5	Toluene-D8	98%	86-112%
460-00-4	4-Bromofluorobenzene	101%	83-119%

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
(a) F41620-1AMS	C0041838.D	10	06/29/06	KW	n/a	n/a	VC1691
(a) F41620-1AMSDC	C0041839.D	10	06/29/06	KW	n/a	n/a	VC1691
F41620-1A	C0041831.D	10	06/29/06	KW	06/27/06	OP17038	VC1691

4.3  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-1A ug/l	Spike Q	ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
71-43-2	Benzene	ND	250	274	110	262	105	4	72-125/7	
108-90-7	Chlorobenzene	ND	250	241	96	236	94	2	79-113/7	
67-66-3	Chloroform	ND	250	263	105	258	103	2	75-120/8	
56-23-5	Carbon tetrachloride	ND	250	247	99	252	101	2	56-145/12	
75-35-4	1,1-Dichloroethylene	ND	250	250	100	251	100	0	61-137/15	
107-06-2	1,2-Dichloroethane	ND	250	257	103	259	104	1	64-124/7	
106-46-7	p-Dichlorobenzene	ND	250	230	92	228	91	1	74-112/7	
78-93-3	Methyl ethyl ketone	ND	1250	1200	96	1210	97	1	51-128/10	
127-18-4	Tetrachloroethylene	ND	250	243	97	247	99	2	70-126/9	
79-01-6	Trichloroethylene	ND	250	266	106	256	102	4	73-117/10	
75-01-4	Vinyl chloride	ND	250	263	105	254	102	3	63-161/18	

CAS No.	Surrogate Recoveries	MS	MSD	F41620-1A	Limits
1868-53-7	Dibromofluoromethane	104%	103%	108%	86-115%
17060-07-0	1,2-Dichloroethane-D4	109%	111%	101%	73-126%
2037-26-5	Toluene-D8	97%	96%	100%	86-112%
460-00-4	4-Bromofluorobenzene	97%	97%	104%	83-119%

(a) SAMPLE NOT YET APPROVED BY LAB. DO NOT REPORT.

### Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
(a) F41620-4ADUP	C0041837.D	10	06/29/06	KW	n/a	n/a	VC1691
F41620-4A	C0041834.D	10	06/29/06	KW	06/27/06	OP17038	VC1691

4.4  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-4A DUP		RPD	Limits
		ug/l	Q ug/l		
71-43-2	Benzene	ND	ND	nc	
108-90-7	Chlorobenzene	ND	ND	nc	
67-66-3	Chloroform	ND	ND	nc	
56-23-5	Carbon tetrachloride	ND	ND	nc	
75-35-4	1,1-Dichloroethylene	ND	ND	nc	
107-06-2	1,2-Dichloroethane	ND	ND	nc	
106-46-7	p-Dichlorobenzene	ND	ND	nc	
78-93-3	Methyl ethyl ketone	ND	ND	nc	
127-18-4	Tetrachloroethylene	ND	ND	nc	
79-01-6	Trichloroethylene	ND	ND	nc	
75-01-4	Vinyl chloride	ND	ND	nc	

CAS No.	Surrogate Recoveries	DUP	F41620-4A	Limits
1868-53-7	Dibromofluoromethane	106%	106%	86-115%
17060-07-0	1,2-Dichloroethane-D4	105%	103%	73-126%
2037-26-5	Toluene-D8	100%	99%	86-112%
460-00-4	4-Bromofluorobenzene	101%	103%	83-119%

(a) SAMPLE NOT YET APPROVED BY LAB. DO NOT REPORT.



## GC/MS Semi-volatiles

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## QC Data Summaries

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### Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Leachate Blank Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17054-LB	L032377.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675

The QC reported here applies to the following samples:

Method: SW846 8270C

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Result	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	50	20	ug/l	
	3&4-Methylphenol	ND	50	20	ug/l	
87-86-5	Pentachlorophenol	ND	250	100	ug/l	
95-95-4	2,4,5-Trichlorophenol	ND	50	20	ug/l	
88-06-2	2,4,6-Trichlorophenol	ND	50	20	ug/l	
106-46-7	1,4-Dichlorobenzene	ND	50	10	ug/l	
121-14-2	2,4-Dinitrotoluene	ND	50	20	ug/l	
118-74-1	Hexachlorobenzene	ND	50	10	ug/l	
87-68-3	Hexachlorobutadiene	ND	50	20	ug/l	
67-72-1	Hexachloroethane	ND	50	20	ug/l	
98-95-3	Nitrobenzene	ND	50	10	ug/l	
110-86-1	Pyridine	ND	100	30	ug/l	

CAS No.	Surrogate Recoveries		Limits
367-12-4	2-Fluorophenol	58%	19-90%
4165-62-2	Phenol-d5	39%	10-68%
118-79-6	2,4,6-Tribromophenol	81%	36-137%
4165-60-0	Nitrobenzene-d5	75%	49-119%
321-60-8	2-Fluorobiphenyl	77%	45-118%
1718-51-0	Terphenyl-d14	81%	46-135%

5.1

5

# Blank Spike Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17054-LBS	L032376.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675

The QC reported here applies to the following samples:

Method: SW846 8270C

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
95-48-7	2-Methylphenol	500	305	61	48-90
	3&4-Methylphenol	1000	559	56	43-94
87-86-5	Pentachlorophenol	1000	784	78	62-120
95-95-4	2,4,5-Trichlorophenol	500	424	85	67-103
88-06-2	2,4,6-Trichlorophenol	500	414	83	68-104
106-46-7	1,4-Dichlorobenzene	500	366	73	46-96
121-14-2	2,4-Dinitrotoluene	500	448	90	64-107
118-74-1	Hexachlorobenzene	500	432	86	69-103
87-68-3	Hexachlorobutadiene	500	394	79	48-100
67-72-1	Hexachloroethane	500	359	72	41-98
98-95-3	Nitrobenzene	500	400	80	60-102
110-86-1	Pyridine	500	131	26	17-65

CAS No.	Surrogate Recoveries	BSP	Limits
367-12-4	2-Fluorophenol	45%	19-90%
4165-62-2	Phenol-d5	28%	10-68%
118-79-6	2,4,6-Tribromophenol	92%	36-137%
4165-60-0	Nitrobenzene-d5	84%	49-119%
321-60-8	2-Fluorobiphenyl	85%	45-118%
1718-51-0	Terphenyl-d14	89%	46-135%

52  
5

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17054-MS	L032382.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675
OP17054-MSD	L032383.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675
F41620-3A	L032381.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675

The QC reported here applies to the following samples:

Method: SW846 8270C

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-3A ug/l	Spike Q ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
95-48-7	2-Methylphenol	ND	500	298	60	321	64	7	40-102/25
	3&4-Methylphenol	ND	1000	556	56	586	59	5	39-97/24
87-86-5	Pentachlorophenol	ND	1000	826	83	857	86	4	53-128/22
95-95-4	2,4,5-Trichlorophenol	ND	500	423	85	433	87	2	56-110/19
88-06-2	2,4,6-Trichlorophenol	ND	500	418	84	430	86	3	55-112/19
106-46-7	1,4-Dichlorobenzene	ND	500	357	71	381	76	7	43-102/24
121-14-2	2,4-Dinitrotoluene	ND	500	443	89	445	89	0	60-108/18
118-74-1	Hexachlorobenzene	ND	500	449	90	464	93	3	66-106/16
87-68-3	Hexachlorobutadiene	ND	500	370	74	402	80	8	46-107/26
67-72-1	Hexachloroethane	ND	500	331	66	369	74	11	39-105/25
98-95-3	Nitrobenzene	ND	500	404	81	426	85	5	50-107/25
110-86-1	Pyridine	ND	500	118	24	139	28	16	19-77/41

CAS No.	Surrogate Recoveries	MS	MSD	F41620-3A	Limits
367-12-4	2-Fluorophenol	43%	47%	43%	19-90%
4165-62-2	Phenol-d5	27%	29%	26%	10-68%
118-79-6	2,4,6-Tribromophenol	93%	98%	99%	36-137%
4165-60-0	Nitrobenzene-d5	81%	87%	87%	49-119%
321-60-8	2-Fluorobiphenyl	85%	88%	89%	45-118%
1718-51-0	Terphenyl-d14	84%	86%	93%	46-135%

5.3

## Duplicate Summary

Page 1 of 1

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17054-DUP	L032379.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675
F41620-1A	L032378.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675

The QC reported here applies to the following samples:

Method: SW846 8270C

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-1A DUP		Q	RPD	Limits
		ug/l	Q ug/l			
95-48-7	2-Methylphenol	ND	ND		nc	
	3&4-Methylphenol	ND	ND		nc	
87-86-5	Pentachlorophenol	ND	ND		nc	
95-95-4	2,4,5-Trichlorophenol	ND	ND		nc	
88-06-2	2,4,6-Trichlorophenol	ND	ND		nc	
106-46-7	1,4-Dichlorobenzene	ND	ND		nc	
121-14-2	2,4-Dinitrotoluene	ND	ND		nc	
118-74-1	Hexachlorobenzene	ND	ND		nc	
87-68-3	Hexachlorobutadiene	ND	ND		nc	
67-72-1	Hexachloroethane	ND	ND		nc	
98-95-3	Nitrobenzene	ND	ND		nc	
110-86-1	Pyridine	ND	ND		nc	

CAS No.	Surrogate Recoveries	DUP	F41620-1A	Limits
367-12-4	2-Fluorophenol	44%	41%	19-90%
4165-62-2	Phenol-d5	27%	26%	10-68%
118-79-6	2,4,6-Tribromophenol	98%	91%	36-137%
4165-60-0	Nitrobenzene-d5	84%	81%	49-119%
321-60-8	2-Fluorobiphenyl	86%	83%	45-118%
1718-51-0	Terphenyl-d14	91%	86%	46-135%

5.4  
5



## GC Volatiles

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## QC Data Summaries

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**Includes the following where applicable:**

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

**Method Blank Summary**

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GUV1317-MB	UV022700.D1		06/23/06	MM	n/a	n/a	GUV1317

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-1, F41620-2, F41620-3, F41620-4, F41620-6

61  
6

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	5.0	2.5	mg/kg	

CAS No.	Surrogate Recoveries		Limits
460-00-4	4-Bromofluorobenzene	88%	62-135%
98-08-8	aaa-Trifluorotoluene	84%	65-118%

# Method Blank Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GUV1318-MB	UV022731.D1		06/26/06	MM	n/a	n/a	GUV1318

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-5

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	5.0	2.5	mg/kg	

CAS No.	Surrogate Recoveries		Limits
460-00-4	4-Bromofluorobenzene	103%	62-135%
98-08-8	aaa-Trifluorotoluene	91%	65-118%

61  
6

### Blank Spike Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GUV1317-BS	UV022699.D1		06/23/06	MM	n/a	n/a	GUV1317

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-1, F41620-2, F41620-3, F41620-4, F41620-6

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH-GRO (C6-C10)	20	18.0	90	66-122

CAS No.	Surrogate Recoveries	BSP	Limits
460-00-4	4-Bromofluorobenzene	105%	62-135%
98-08-8	aaa-Trifluorotoluene	101%	65-118%

62



# Blank Spike Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GUV1318-BS	UV022730.D1		06/26/06	MM	n/a	n/a	GUV1318

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-5

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH-GRO (C6-C10)	20	17.6	88	66-122

CAS No.	Surrogate Recoveries	BSP	Limits
460-00-4	4-Bromofluorobenzene	108%	62-135%
98-08-8	aaa-Trifluorotoluene	100%	65-118%

62  
6

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F41620-1MS	UV022724.D1		06/23/06	MM	n/a	n/a	GUV1317
F41620-1MSD	UV022725.D1		06/23/06	MM	n/a	n/a	GUV1317
F41620-1 <sup>a</sup>	UV022701.D1		06/23/06	MM	n/a	n/a	GUV1317

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-1, F41620-2, F41620-3, F41620-4, F41620-6

CAS No.	Compound	F41620-1 mg/kg	Spike Q mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH-GRO (C6-C10)	ND	43.6	26.9	62	35.1	80	26*	37-142/17

CAS No.	Surrogate Recoveries	MS	MSD	F41620-1	Limits
460-00-4	4-Bromofluorobenzene	55%*	113%	112%	62-135%
98-08-8	aaa-Trifluorotoluene	59%*	92%	99%	65-118%

(a) Sample was received in a bulk container but was not preserved within 48 hours of sampling.

63  
6

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F41623-1MS	UV022742.D1		06/26/06	MM	n/a	n/a	GUV1318
F41623-1MSD	UV022743.D1		06/26/06	MM	n/a	n/a	GUV1318
F41623-1	UV022734.D1		06/26/06	MM	n/a	n/a	GUV1318

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-5

CAS No.	Compound	F41623-1 mg/kg	Spike mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH-GRO (C6-C10)	ND	33.6	27.6	82	26.6	79	4	37-142/17

CAS No.	Surrogate Recoveries	MS	MSD	F41623-1	Limits
460-00-4	4-Bromofluorobenzene	105%	104%	105%	62-135%
98-08-8	aaa-Trifluorotoluene	93%	84%	91%	65-118%

63  
6



## **GC Semi-volatiles**

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## **QC Data Summaries**

**7**

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**Includes the following where applicable:**

- **Method Blank Summaries**
- **Blank Spike Summaries**
- **Matrix Spike and Duplicate Summaries**

**Method Blank Summary**

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17013-MB	ST48602.D	1	06/27/06	ME	06/26/06	OP17013	GST1418

The QC reported here applies to the following samples:

Method: SW846 8082

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	8.3	ug/kg	
11104-28-2	Aroclor 1221	ND	17	13	ug/kg	
11141-16-5	Aroclor 1232	ND	17	13	ug/kg	
53469-21-9	Aroclor 1242	ND	17	8.3	ug/kg	
12672-29-6	Aroclor 1248	ND	17	8.3	ug/kg	
11097-69-1	Aroclor 1254	ND	17	8.3	ug/kg	
11096-82-5	Aroclor 1260	ND	17	8.3	ug/kg	
11100-14-4	Aroclor 1268	ND	17	8.3	ug/kg	
	Total PCBs	ND	33		ug/kg	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	88%	52-136%
2051-24-3	Decachlorobiphenyl	107%	49-148%

7.1  
7

# Method Blank Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17013-MB	ST48638.D	1	06/28/06	ME	06/26/06	OP17013	GST1419

The QC reported here applies to the following samples:

Method: SW846 8082

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	8.3	ug/kg	
11104-28-2	Aroclor 1221	ND	17	13	ug/kg	
11141-16-5	Aroclor 1232	ND	17	13	ug/kg	
53469-21-9	Aroclor 1242	ND	17	8.3	ug/kg	
12672-29-6	Aroclor 1248	ND	17	8.3	ug/kg	
11097-69-1	Aroclor 1254	ND	17	8.3	ug/kg	
11096-82-5	Aroclor 1260	ND	17	8.3	ug/kg	
11100-14-4	Aroclor 1268	ND	17	8.3	ug/kg	
	Total PCBs	ND	33		ug/kg	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	98%	52-136%
2051-24-3	Decachlorobiphenyl	96%	49-148%

7.1  
7

## Method Blank Summary

Page 1 of 1

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17034-MB	LL11094.D	1	06/29/06	VS	06/27/06	OP17034	GLL410

The QC reported here applies to the following samples:

Method: SW846 8015 M

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries	Limits
84-15-1	o-Terphenyl	107% 57-115%

7.1  
7

# Leachate Blank Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17053-LB	TT00796.D	1	06/29/06	AA	06/28/06	OP17053	GTT35

The QC reported here applies to the following samples:

Method: SW846 8081A

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Result	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	0.50	0.20	ug/l	
12789-03-6	Chlordane	ND	5.0	2.5	ug/l	
72-20-8	Endrin	ND	1.0	0.40	ug/l	
76-44-8	Heptachlor	ND	0.50	0.20	ug/l	
1024-57-3	Heptachlor epoxide	ND	0.50	0.20	ug/l	
72-43-5	Methoxychlor	ND	1.0	0.40	ug/l	
8001-35-2	Toxaphene	ND	25	15	ug/l	

CAS No.	Surrogate Recoveries	Result	Limits
877-09-8	Tetrachloro-m-xylene	99%	60-138%
2051-24-3	Decachlorobiphenyl	93%	31-148%

72  
7

# Blank Spike Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17053-LBS	TT00795.D	1	06/29/06	AA	06/28/06	OP17053	GTT35

The QC reported here applies to the following samples:

Method: SW846 8081A

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
58-89-9	gamma-BHC (Lindane)	5	4.3	86	69-137
72-20-8	Endrin	5	5.3	106	78-134
76-44-8	Heptachlor	5	4.2	84	62-137
1024-57-3	Heptachlor epoxide	5	4.6	92	74-130
72-43-5	Methoxychlor	5	5.4	108	77-131

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	79%	60-138%
2051-24-3	Decachlorobiphenyl	96%	31-148%

7.3  
7

# Blank Spike Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17013-BS	ST48601.D	1	06/27/06	ME	06/26/06	OP17013	GST1418

The QC reported here applies to the following samples:

Method: SW846 8082

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Spike ug/kg	BSP ug/kg	BSP %	Limits
12674-11-2	Aroclor 1016	133	134	101	75-123
11096-82-5	Aroclor 1260	133	147	110	72-124

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro- <i>m</i> -xylene	102%	52-136%
2051-24-3	Decachlorobiphenyl	120%	49-148%

7.3  
7

# Blank Spike Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17034-BS	LL11093.D	1	06/29/06	VS	06/27/06	OP17034	GLL410

The QC reported here applies to the following samples:

Method: SW846 8015 M

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH (C10-C28)	33.3	26.7	80	62-114

CAS No.	Surrogate Recoveries	BSP	Limits
84-15-1	o-Terphenyl	101%	57-115%

7.3

7

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17053-MS	TT00803.D	1	06/29/06	AA	06/28/06	OP17053	GTT35
OP17053-MSD	TT00804.D	1	06/29/06	AA	06/28/06	OP17053	GTT35
F41620-5A	TT00802.D	1	06/29/06	AA	06/28/06	OP17053	GTT35

The QC reported here applies to the following samples:

Method: SW846 8081A

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-5A ug/l	Spike Q ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
58-89-9	gamma-BHC (Lindane)	ND	5	5.7	114	5.5	110	4	75-140/21
72-20-8	Endrin	ND	5	6.5	130	6.0	120	8	72-149/21
76-44-8	Heptachlor	ND	5	5.5	110	5.2	104	6	74-136/25
1024-57-3	Heptachlor epoxide	ND	5	5.6	112	5.4	108	4	75-138/21
72-43-5	Methoxychlor	ND	5	6.1	122	5.9	118	3	69-145/27

CAS No.	Surrogate Recoveries	MS	MSD	F41620-5A	Limits
877-09-8	Tetrachloro-m-xylene	100%	100%	99%	60-138%
2051-24-3	Decachlorobiphenyl	71%	69%	59%	31-148%

7.4  
7

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17013-MS	ST48656.D	1	06/28/06	ME	06/26/06	OP17013	GST1419
OP17013-MSD	ST48657.D	1	06/28/06	ME	06/26/06	OP17013	GST1419
F41636-7	ST48655.D	1	06/28/06	ME	06/26/06	OP17013	GST1419

The QC reported here applies to the following samples:

Method: SW846 8082

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	F41636-7 ug/kg	Spike Q ug/kg	MS ug/kg	MS %	MSD ug/kg	MSD %	RPD	Limits Rec/RPD
12674-11-2	Aroclor 1016	17 U	134	88.6	66	93.8	68	6	54-138/22
11096-82-5	Aroclor 1260	17 U	134	88.1	66	86.2	63	2	46-138/21

CAS No.	Surrogate Recoveries	MS	MSD	F41636-7	Limits
877-09-8	Tetrachloro-m-xylene	67%	65%	56%	52-136%
2051-24-3	Decachlorobiphenyl	59%	55%	52%	49-148%

7.4  
7

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17034-MS	LL11098.D	20	06/29/06	VS	06/27/06	OP17034	GLL410
OP17034-MSD	LL11099.D	10	06/29/06	VS	06/27/06	OP17034	GLL410
F41620-2	LL11097.D	8	06/29/06	VS	06/27/06	OP17034	GLL410

The QC reported here applies to the following samples:

Method: SW846 8015 M

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	F41620-2 mg/kg	Spike Q mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH (C10-C28)	570	47.3	1020	952* a	396	-367* a	88*	31-136/36

CAS No.	Surrogate Recoveries	MS	MSD	F41620-2	Limits
84-15-1	o-Terphenyl	0%* b	88%	86%	57-115%

(a) Outside control limits due to high level in sample relative to spike amount.

(b) Outside control limits due to dilution.

7.4  
7

## Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17053-DUP	TT00798.D	1	06/29/06	AA	06/28/06	OP17053	GTT35
F41620-1A	TT00797.D	1	06/29/06	AA	06/28/06	OP17053	GTT35

The QC reported here applies to the following samples:

Method: SW846 8081A

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-1A		Q	RPD	Limits
		ug/l	DUP Q ug/l			
58-89-9	gamma-BHC (Lindane)	ND	ND		nc	
12789-03-6	Chlordane	ND	ND		nc	
72-20-8	Endrin	ND	ND		nc	
76-44-8	Heptachlor	ND	ND		nc	
1024-57-3	Heptachlor epoxide	ND	ND		nc	
72-43-5	Methoxychlor	ND	ND		nc	

CAS No.	Surrogate Recoveries	DUP	F41620-1A	Limits
877-09-8	Tetrachloro-m-xylene	98%	100%	60-138%
2051-24-3	Decachlorobiphenyl	98%	98%	31-148%

7.5



## Metals Analysis

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## QC Data Summaries

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**Includes the following where applicable:**

- Method Blank Summaries
- Matrix Spike and Duplicate Summaries
- Blank Spike and Lab Control Sample Summaries
- Serial Dilution Summaries

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F41620  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP9826  
Matrix Type: LEACHATE

Methods: SW846 6010B  
Units: mg/l

Prep Date: 06/27/06 06/27/06 06/27/06

Metal	RL	IDL	MB raw	final	MB raw	final	MB raw	final
Aluminum	0.20	.018						
Antimony	0.0060	.0034						
Arsenic	0.020	.0028	-0.0012	<0.020(a)	-0.011	<0.020(a)	-0.012	<0.020(a)
Barium	1.0	.0004	0.00019	<1.0	0.0057	<1.0	0.014	<1.0
Beryllium	0.0050	.0004						
Cadmium	0.0050	.0002	-0.000010	<0.0050	0.0	<0.0050	0.00013	<0.0050
Calcium	5.0	.042						
Chromium	0.010	.0006	-0.000020	<0.010	0.0034	<0.010	-0.000070	<0.010
Cobalt	0.050	.0006						
Copper	0.025	.0009						
Iron	0.30	.012						
Lead	0.050	.0017	0.0013	<0.050	0.00023	<0.050	0.0024	<0.050
Magnesium	5.0	.0043						
Manganese	0.015	.0006						
Molybdenum	0.050	.0013						
Nickel	0.040	.0008						
Potassium	10	.01						
Selenium	0.10	.002	-0.00086	<0.10(b)	0.032	<0.10(b)	0.026	<0.10(b)
Silver	0.010	.0009	-0.00032	<0.010	-0.000010	<0.010	-0.00062	<0.010
Sodium	10	.5						
Thallium	0.010	.0023						
Tin	0.050	.0031						
Vanadium	0.050	.0006						
Zinc	0.10	.0013						

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
(\*) Outside of QC limits  
(anr) Analyte not requested  
(a) Elevated RL/MDL due to negative bias of Method Blank.  
(b) Elevated RL/MDL due to positive bias of Method Blank.

8.1.1

8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	F41620-1A Original DUP		RPD	QC Limits	F41620-1A Original MS		Spike/ot MPFLICP1 % Rec	QC Limits	
Aluminum									
Antimony									
Arsenic	0.0	0.0 (a)	NC	0-20	0.0	2.0 (a)	2.0	100.0	80-120
Barium	2.1	2.1	0.0	0-20	2.1	4.1	2.0	100.0	80-120
Beryllium									
Cadmium	0.058	0.058	0.0	0-20	0.058	0.11	0.050	104.0	80-120
Calcium									
Chromium	0.019	0.018	5.4	0-20	0.019	0.21	0.20	95.5	80-120
Cobalt									
Copper									
Iron									
Lead	1.6	1.6	0.0	0-20	1.6	2.1	0.50	100.0	80-120
Magnesium									
Manganese									
Molybdenum									
Nickel									
Potassium									
Selenium	0.036	0.035(b)	2.8	0-20	0.036	2.2 (b)	2.0	108.2	80-120
Silver	0.0	0.0	NC	0-20	0.0	0.058	0.050	116.0	80-120
Sodium									
Thallium									
Tin									
Vanadium									
Zinc									

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes

- (\*) Outside of QC limits
- (N) Matrix Spike Rec. outside of QC limits
- (anr) Analyte not requested
- (a) Elevated RL/MDL due to negative bias of Method Blank.
- (b) Elevated RL/MDL due to positive bias of Method Blank.

8.1.2  
8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	F41620-1A Original MSD	SpikeLot MPFLICP1 % Rec	MSD RPD	QC Limit	Original DUP RPD	QC Limits
Aluminum						
Antimony						
Arsenic	0.0	2.0 (a)	2.0	100.0	0.0	20
Barium	2.1	4.1	2.0	100.0	0.0	20
Beryllium						
Cadmium	0.058	0.11	0.050	104.0	0.0	20
Calcium						
Chromium	0.019	0.21	0.20	95.5	0.0	20
Cobalt						
Copper						
Iron						
Lead	1.6	2.1	0.50	100.0	0.0	20
Magnesium						
Manganese						
Molybdenum						
Nickel						
Potassium						
Selenium	0.036	2.2 (b)	2.0	108.2	0.0	20
Silver	0.0	0.057	0.050	114.0	1.7	20
Sodium						
Thallium						
Tin						
Vanadium						
Zinc						

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes

(\*) Outside of QC limits

(N) Matrix Spike Rec. outside of QC limits

(anr) Analyte not requested

(a) Elevated RL/MDL due to negative bias of Method Blank.

(b) Elevated RL/MDL due to positive bias of Method Blank.

8.12  
**8**

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	BSP Result	Spikelot MPFLICP1 % Rec	QC Limits	BSP Result	Spikelot MPFLICP1 % Rec	QC Limits
Aluminum						
Antimony						
Arsenic	2.0 (a)	2.0 100.0	80-120	2.0 (a)	2.0 100.0	80-120
Barium	2.0	2.0 100.0	80-120	2.0	2.0 100.0	80-120
Beryllium						
Cadmium	0.050	0.050 100.0	80-120	0.049	0.050 98.0	80-120
Calcium						
Chromium	0.21	0.20 105.0	80-120	0.20	0.20 100.0	80-120
Cobalt						
Copper						
Iron						
Lead	0.50	0.50 100.0	80-120	0.51	0.50 102.0	80-120
Magnesium						
Manganese						
Molybdenum						
Nickel						
Potassium						
Selenium	2.0 (b)	2.0 100.0	80-120	2.2 (b)	2.0 110.0	80-120
Silver	0.051	0.050 102.0	80-120	0.058	0.050 116.0	80-120
Sodium						
Thallium						
Tin						
Vanadium						
Zinc						

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested  
 (a) Elevated RL/MDL due to negative bias of Method Blank.  
 (b) Elevated RL/MDL due to positive bias of Method Blank.

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 8

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 06/27/06

Metal	BSP Result	Spikelot MPFLICP1 % Rec	QC Limits
Aluminum			
Antimony			
Arsenic	2.1 (a)	2.0 105.0	80-120
Barium	2.1	2.0 105.0	80-120
Beryllium			
Cadmium	0.050	0.050 100.0	80-120
Calcium			
Chromium	0.21	0.20 105.0	80-120
Cobalt			
Copper			
Iron			
Lead	0.50	0.50 100.0	80-120
Magnesium			
Manganese			
Molybdenum			
Nickel			
Potassium			
Selenium	2.2 (b)	2.0 110.0	80-120
Silver	0.052	0.050 104.0	80-120
Sodium			
Thallium			
Tin			
Vanadium			
Zinc			

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (arr) Analyte not requested  
 (a) Elevated RL/MDL due to negative bias of Method Blank.  
 (b) Elevated RL/MDL due to positive bias of Method Blank.

8.1.3  
**8**

SERIAL DILUTION RESULTS SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: ug/l

Prep Date: 06/27/06

Metal	F41620-1A Original	SDL 1:5	RPD	QC Limits
Aluminum				
Antimony				
Arsenic	0.00	0.00	NC	0-10
Barium	2060	2100	2.4	0-10
Beryllium				
Cadmium	58.2	61.0	4.7	0-10
Calcium				
Chromium	18.6	20.6	11.3 (a)	0-10
Cobalt				
Copper				
Iron				
Lead	1610	1680	4.6	0-10
Magnesium				
Manganese				
Molybdenum				
Nickel				
Potassium				
Selenium	36.3	35.1	3.4	0-10
Silver	0.00	0.00	NC	0-10
Sodium				
Thallium				
Tin				
Vanadium				
Zinc				

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes

(\*) Outside of QC limits

(anr) Analyte not requested

(a) Percent difference acceptable due to low initial sample concentration (< 50 times IDL).

8.1.4  
**8**

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F41620  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP9828  
Matrix Type: LEACHATE

Methods: SW846 7470A  
Units: mg/l

Prep Date: 06/27/06 06/27/06 06/27/06

Metal	RL	IDL	MB raw	final	MB raw	final	MB raw	final
Mercury	0.0010	.00008	-0.000023	<0.0010	-0.00013	<0.010	-0.00043	<0.010

Associated samples MP9828: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

8.2.1

8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9828  
 Matrix Type: LEACHATE

Methods: SW846 7470A  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	F41620-1A Original	DUP	RPD	QC Limits	F41620-1A Original MS	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.0	0.0	NC	0-20	0.0	0.032	106.7	80-120

Associated samples MP9828: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested

8.2.2  
**8**

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9828  
 Matrix Type: LEACHATE

Methods: SW846 7470A  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.0030	0.0030	100.0	80-120	0.031	0.030	103.3	80-120

Associated samples MP9828: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

8.2.3

8

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41620  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP9828  
Matrix Type: LEACHATE

Methods: SW846 7470A  
Units: mg/l

Prep Date: 06/27/06

Metal	BSP Result	Spiketot HGFLWS1	% Rec	QC Limits
Mercury	0.031	0.030	103.3	80-120

Associated samples MP9828: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

8.2.3

8



IT'S ALL IN THE CHEMISTRY

## General Chemistry

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## QC Data Summaries

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6

Includes the following where applicable:

- Method Blank and Blank Spike Summaries
- Duplicate Summaries
- Matrix Spike Summaries

METHOD BLANK AND SPIKE RESULTS SUMMARY  
GENERAL CHEMISTRY

Login Number: F41620  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

Analyte	Batch ID	RL	MB Result	Units	Spike Amount	BSP Result	BSP %Recov	QC Limits
Cyanide Reactivity	GP8051/GN21169			mg/kg	5.0	0.18	3.5	0-100%
Cyanide Reactivity	GP8051/GN21169	1.5	<1.5	mg/kg	5.0	0.31	6.2	0-100%
Sulfide Reactivity	GP8053/GN21170			mg/kg	53.7	3.0	5.6	0-100%
Sulfide Reactivity	GP8053/GN21170	50	<50	mg/kg	53.7	5.0	9.3	0-100%

Associated Samples:

Batch GP8051: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

Batch GP8053: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

9.1



DUPLICATE RESULTS SUMMARY  
GENERAL CHEMISTRY

Login Number: F41620  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

Analyte	Batch ID	QC Sample	Units	Original Result	DUP Result	RPD	QC Limits
Corrosivity as pH	GN21100	F41620-1		7.4	7.6		0-%
Ignitability (Flashpoint)	GN21105	F41620-1	Deg. F	>200	0(a)	0.0	0-38%
Solids, Percent	GN21093	F41611-1	%	86.3	86	0.3	0-30%

Associated Samples:

Batch GN21093: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

Batch GN21100: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

Batch GN21105: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

(a) Not Ignitable.

9.2

9



**Misc. Forms**

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**Custody Documents and Other Forms**

(Accutest Laboratories Gulf Coast, Inc.)

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**Includes the following where applicable:**

- Chain of Custody



# CHAIN OF CUSTODY

4405 VINELAND ROAD • SUITE C-15  
ORLANDO, FL 32811  
TEL: 407-425-6700 • FAX: 407-425-0707

ACCUTEST JOB #:  
ACCUTEST QUOTE #:

CLIENT INFORMATION		FACILITY INFORMATION				ANALYTICAL INFORMATION										MATRIX CODES										
NAME: <b>F41620</b>		PROJECT NAME: <b>Accutest SE</b>														DW - DRINKING WATER GW - GROUND WATER WW - WASTEWATER SO - SOIL SL - SLUDGE LIQ - OTHER LIQUID SOL - OTHER SOLID										
ADDRESS:		LOCATION:																								
CITY, STATE, ZIP:		PROJECT NO.:																								
SEND REPORT TO: PHONE #:		FAX #:																								
ACCUTEST SAMPLE #	FIELD ID / POINT OF COLLECTION	COLLECTION				PRESERVATION										LAB USE ONLY										
		DATE	TIME	SAMPLED BY:	MATRIX	# OF ANALYTES	PH	NOX	PHOS	AMMON	ARSEN	CADMI	COPPER	CHLOR	CHROM		CYANIDE	FLUOR	IRON	LEAD	MANG	NICKEL	SILICA	SILVER	ZINC	
	<b>F41620-1</b>	<b>06/26/06</b>	<b>10:00</b>		<b>S</b>																					
	<b>-2</b>		<b>15:00</b>																							
	<b>-3</b>		<b>16:00</b>																							
	<b>-4</b>		<b>11:00</b>																							
	<b>-5</b>		<b>13:00</b>																							
	<b>-6</b>		<b>14:00</b>																							

<input type="checkbox"/> STANDARD <input type="checkbox"/> 48 HOUR RUSH <input type="checkbox"/> 24 HOUR EMERGENCY <input type="checkbox"/> OTHER <b>06/27/06</b> <b>Stence</b>		<input checked="" type="checkbox"/> STANDARD <input type="checkbox"/> COMMERCIAL "B" <input type="checkbox"/> DISK DELIVERABLE <input type="checkbox"/> STATE FORMS <input type="checkbox"/> OTHER (SPECIFY) _____		COMMENTS/REMARKS: <b>A16C</b> <b>SEND</b>	
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**SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION, INCLUDING COURIER DELIVERY**

1. RECEIVED BY: <b>[Signature]</b> DATE/TIME: <b>06/26/06 18:00</b>	1. RECEIVED BY: <b>[Signature]</b> DATE/TIME: <b>[Signature]</b>	2. RECEIVED BY: _____ DATE/TIME: _____	2. RECEIVED BY: _____ DATE/TIME: _____
3. RECEIVED BY: _____ DATE/TIME: _____	3. RECEIVED BY: _____ DATE/TIME: _____	4. RECEIVED BY: _____ DATE/TIME: _____	4. RECEIVED BY: _____ DATE/TIME: _____
5. RECEIVED BY: _____ DATE/TIME: _____	5. RECEIVED BY: _____ DATE/TIME: _____	SEAL # _____ PRESERVE WHEN APPLICABLE <input type="checkbox"/>	ON ICE <b>NO</b> TEMPERATURE <b>32°C</b>

10.1 10

F41620: Chain of Custody  
Page 1 of 2  
Accutest Laboratories Gulf Coast, Inc.





## **GC Semi-volatiles**

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### **QC Data Summaries**

**(Accutest Laboratories Gulf Coast, Inc.)**

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**Includes the following where applicable:**

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

## Method Blank Summary

Page 1 of 1

Job Number: F41620  
Account: ALSE Accutest Laboratories Southeast, Inc.  
Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6063-MB	DD57046.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067

The QC reported here applies to the following samples:

Method: SW846 8151

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Result	RL	MDL	Units	Q
94-75-7	2,4-D	ND	1.0	0.50	ug/l	
93-72-1	2,4,5-TP (Silvex)	ND	0.20	0.15	ug/l	

CAS No.	Surrogate Recoveries		Limits
19719-28-9	2,4-DCAA	116%	23-171%

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11

## Blank Spike Summary

Page 1 of 1

Job Number: F41620  
Account: ALSE Accutest Laboratories Southeast, Inc.  
Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6063-BS	DD57047.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067

The QC reported here applies to the following samples:

Method: SW846 8151

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
94-75-7	2,4-D	2	2.3	115	44-152
93-72-1	2,4,5-TP (Silvex)	0.4	0.34	85	41-142

CAS No.	Surrogate Recoveries	BSP	Limits
19719-28-9	2,4-DCAA	125%	23-171%

112  
11

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ALSE Accutest Laboratories Southeast, Inc.  
 Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6063-MS	DD57049.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067
OP6063-MSD	DD57050.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067
F41620-1A	DD57048.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067

The QC reported here applies to the following samples:

Method: SW846 8151

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-1A ug/l	Spike Q ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
94-75-7	2,4-D	ND	2	2.6	130	2.0	100	26*	28-144/25
93-72-1	2,4,5-TP (Silvex)	ND	0.4	0.43	108	0.39	98	10	25-137/24

CAS No.	Surrogate Recoveries	MS	MSD	F41620-1A	Limits
19719-28-9	2,4-DCAA	.130%	121%	134%	23-171%

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11

# **Grid 6 Only – Summary of Full TCLP Results**

LabLink Analytical Data Report  
Paradise Creek 116539

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261 6/96)\*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time	
F41620-3	Aroclor 1016	12674-11-2	SW846 8082	ND		ug/kg	270		10	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	Aroclor 1221	11104-28-2	SW846 8082	ND		ug/kg	270		10	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	Aroclor 1232	11141-16-5	SW846 8082	ND		ug/kg	270		10	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	Aroclor 1242	53469-21-9	SW846 8082	ND		ug/kg	270		10	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	Aroclor 1248	12672-29-6	SW846 8082	ND		ug/kg	270		10	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	Aroclor 1254 (e)	11097-69-1	SW846 8082	ND		ug/kg	540		10	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	Aroclor 1260 (b)	11096-82-5	SW846 8082	1380	J	ug/kg	270		10	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	TPH (C10-C28) (c)		SW846 8015 M	446		mg/kg	54		4	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	Aroclor 1268 (b)	11100-14-4	SW846 8082	509	J	ug/kg	270		10	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	Total PCBs		SW846 8082	1890		ug/kg	530		10	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	o-Terphenyl	84-15-1	SW846 8015 M	77		%	110		4	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	Tetrachloro-m-xylene	877-09-8	SW846 8082	118		%			10	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	Decachlorobiphenyl (f)	2051-24-3	SW846 8082	339	*	%			10	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	TPH-GRO (C6-C10)		SW846 8015	8.67	J	mg/kg	10		1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	4-Bromofluorobenzene	460-00-4	SW846 8015	133		%			1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	aaa-Trifluorotoluene	98-08-8	SW846 8015	97		%			1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	Ignitability (Flashpoint) (d)		SW846 1010	>200	>	Deg. F			1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	Corrosivity as pH		SW846 CHAP7	7.6					1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	Cyanide Reactivity		SW846 CHAP7	<2.4	<	mg/kg	2.4		1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	Sulfide Reactivity		SW846 CHAP7	<50	<	mg/kg	50		1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3	Solids, Percent		EPA 160.3 M	61.7		%			1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3A	2,4-D	94-75-7	SW846 8151	ND		mg/l	0.0015	10	1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3A	2,4,5-TP (Silvex)	93-72-1	SW846 8151	ND		mg/l	0.0002		1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3A	gamma-BHC (Lindane)	58-89-9	SW846 8081A	ND		mg/l	0.0005	0.4	1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3A	Chlordane	12789-03-6	SW846 8081A	ND		mg/l	0.005	0.03	1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3A	Endrin	72-20-8	SW846 8081A	ND		mg/l	0.001	0.02	1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3A	Heptachlor	76-44-8	SW846 8081A	ND		mg/l	0.0005	0.008	1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3A	Heptachlor epoxide	1024-57-3	SW846 8081A	ND		mg/l	0.0005	0.008	1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3A	Methoxychlor	72-43-5	SW846 8081A	ND		mg/l	0.001	10	1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3A	Toxaphene	8001-35-2	SW846 8081A	ND		mg/l	0.025	0.5	1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3A	Tetrachloro-m-xylene	877-09-8	SW846 8081A	100		%			1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3A	2,4-DCAA	19719-28-9	SW846 8151	120		%			1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3A	Decachlorobiphenyl	2051-24-3	SW846 8081A	95		%			1	PC-TP-116539-GRID06	20-Jun-06	16:00	
F41620-3A	Arsenic (i)	7440-38-2	SW846 6010B	0.0056	U	mg/l	0.02		5	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Barium	7440-39-3	SW846 6010B	3		mg/l	1	100	1	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Cadmium	7440-43-9	SW846 6010B	0.15		mg/l	0.005		1	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Chromium	7440-47-3	SW846 6010B	0.03		mg/l	0.01		5	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Lead (k)	7439-92-1	SW846 6010B	5.8**		mg/l	0.5		5	5	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Mercury	7439-97-6	SW846 7470A	0.001	U	mg/l	0.01	0.2	1	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Selenium (j)	7782-49-2	SW846 6010B	0.04	U	mg/l	0.1		1	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Silver	7440-22-4	SW846 6010B	0.0009	U	mg/l	0.01		5	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	2-Methylphenol	95-48-7	SW846 8270C	ND		mg/l	0.05	200	1	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	3&4-Methylphenol		SW846 8270C	ND		mg/l	0.05	200	1	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Pentachlorophenol	87-86-5	SW846 8270C	ND		mg/l	0.25	100	1	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	2,4,5-Trichlorophenol	95-95-4	SW846 8270C	ND		mg/l	0.05	400	1	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	2,4,6-Trichlorophenol	88-06-2	SW846 8270C	ND		mg/l	0.05		2	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	1,4-Dichlorobenzene	106-46-7	SW846 8270C	ND		mg/l	0.05	7.5	1	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	2,4-Dinitrotoluene	121-14-2	SW846 8270C	ND		mg/l	0.05	0.13	1	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Hexachlorobenzene	118-74-1	SW846 8270C	ND		mg/l	0.05	0.13	1	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Hexachlorobutadiene	87-68-3	SW846 8270C	ND		mg/l	0.05	0.5	1	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Hexachloroethane	67-72-1	SW846 8270C	ND		mg/l	0.05		3	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Nitrobenzene	98-95-3	SW846 8270C	ND		mg/l	0.05		2	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Pyridine	110-86-1	SW846 8270C	ND		mg/l	0.1		5	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	2-Fluorophenol	367-12-4	SW846 8270C	43		%			1	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Phenol-d5	4165-62-2	SW846 8270C	26		%			1	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	2,4,6-Tribromophenol	118-79-6	SW846 8270C	99		%			1	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Nitrobenzene-d5	4165-60-0	SW846 8270C	87		%			1	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	2-Fluorobiphenyl	321-60-8	SW846 8270C	89		%			1	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Terphenyl-d14	1718-51-0	SW846 8270C	93		%			1	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Benzene	71-43-2	SW846 8260B	ND		mg/l	0.01	0.5	10	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Chlorobenzene	108-90-7	SW846 8260B	ND		mg/l	0.02	100	10	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Chloroform	67-66-3	SW846 8260B	ND		mg/l	0.02		6	10	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Carbon tetrachloride	56-23-5	SW846 8260B	ND		mg/l	0.02	0.5	10	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	1,1-Dichloroethylene	75-35-4	SW846 8260B	ND		mg/l	0.02	0.7	10	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	1,2-Dichloroethane	107-06-2	SW846 8260B	ND		mg/l	0.02	0.5	10	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	p-Dichlorobenzene	106-46-7	SW846 8260B	ND		mg/l	0.02	7.5	10	1	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Methyl ethyl ketone	78-93-3	SW846 8260B	ND		mg/l	0.1	200	10	1	PC-TP-116539-GRID06	20-Jun-06	16:00

LabLink Analytical Data Report  
Paradise Creek 116539

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261.6/96)\*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F41620-3A	Tetrachloroethylene	127-18-4	SW846 8260B	ND		mg/l	0.02	0.7	10	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Trichloroethylene	79-01-6	SW846 8260B	ND		mg/l	0.02	0.5	10	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Vinyl chloride	75-01-4	SW846 8260B	ND		mg/l	0.01	0.2	10	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Dibromofluoromethane	1868-53-7	SW846 8260B	107		%			10	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	Toluene-D8	2037-26-5	SW846 8260B	99		%			10	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	4-Bromofluorobenzene	460-00-4	SW846 8260B	103		%			10	PC-TP-116539-GRID06	20-Jun-06	16:00
F41620-3A	1,2-Dichloroethane-D4	17060-07-0	SW846 8260B	103		%			10	PC-TP-116539-GRID06	20-Jun-06	16:00

(b) Estimated value due to the presence of multiple overlapping Aroclor patterns.

(c) Petroleum hydrocarbon pattern extends beyond C28.

(d) Not ignitable

(e) Elevated reporting limits due to matrix interference.

(f) Outside control limits due to dilution.

(g) Result reported from PID.

(h) Outside control limits due to matrix interference.

(i) Elevated RL/MDL due to negative bias of Method Blank.

(j) Elevated RL/MDL due to positive bias of Method Blank.

(k) Elevated RL/MDL due to CRIA exceeding acceptance criteria.

**Found 2 results exceeding regulatory limits.**

**\*\* Indicates result outside regulatory limits.**

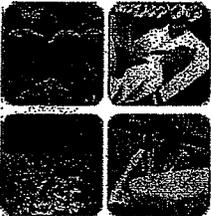
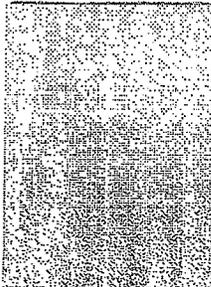
\* Regulatory limits listed in this document have been obtained from the latest version of the regulations cited and are used for advisory purposes only. Accutest assumes no responsibility for errors in regulatory documents or changes to criteria detailed in later versions of the referenced regulation. It is the responsibility of the user to verify these limits before using or reporting any data.

# **Grid 6 Additional Samples**

**TPH- (C<sub>10</sub> – C<sub>28</sub>),  
pH, and TCLP lead  
only**



08/21/06



Technical Report for

Shaw E & I, Inc.

Paradise Creek

PO#116539

Accutest Job Number: F42927

Sampling Date: 08/14/06

Report to:

Shaw E & I, Inc.  
  
natasha.sullivan@shawgrp.com  
  
ATTN: Natasha Sullivan

Total number of pages in report: 37



Test results contained within this data package meet the requirements of the National Environmental Laboratory Accreditation Conference and/or state specific certification programs as applicable.

*Harry Behzadi*  
Harry Behzadi, Ph.D.  
Laboratory Director

Certifications: FL (DOH E83510), NC (573), NJ (FL002), MA (FL946), IA (366), LA (03051), KS (E-10327), SC, AK  
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Accutest Laboratories

### Sample Summary

Shaw E & I, Inc.

Job No: F42927

Paradise Creek  
Project No: PO#116539

Sample Number	Collected		Received	Matrix		Client Sample ID
	Date	Time By		Code	Type	
F42927-1	08/14/06	07:50 BM	08/16/06	SO	Soil	PC-PB116539-GRID006A
F42927-2	08/14/06	07:52 BM	08/16/06	SO	Soil	PC-PB116539-GRID006B
F42927-3	08/14/06	07:56 BM	08/16/06	SO	Soil	PC-PB116539-GRID006C
F42927-4	08/14/06	07:58 BM	08/16/06	SO	Soil	PC-PB116539-GRID006D
F42927-5	08/14/06	08:05 BM	08/16/06	SO	Soil	PC-MIX-116539-GRID006-1
F42927-6	08/14/06	08:08 BM	08/16/06	SO	Soil	PC-MIX-116539-GRID006-2
F42927-7	08/14/06	08:12 BM	08/16/06	SO	Soil	PC-MIX-116539-GRID006-3
F42927-8	08/14/06	07:35 BM	08/16/06	SO	Soil	PC-MIX-116539-GRID011-1
F42927-9	08/14/06	07:37 BM	08/16/06	SO	Soil	PC-MIX-116539-GRID011-2
F42927-10	08/14/06	07:40 BM	08/16/06	SO	Soil	PC-MIX-116539-GRID011-3
F42927-11	08/14/06	07:43 BM	08/16/06	SO	Soil	PC-MIX-116539-GRID011-4

Soil samples reported on a dry weight basis unless otherwise indicated on result page.



**Sample Results**

**Report of Analysis**

---

Report of Analysis

2.1  
2

Client Sample ID:	PC-PB116539-GRID006A	Date Sampled:	08/14/06
Lab Sample ID:	F42927-1	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	n/a
Project:	Paradise Creek		

Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	0.0017 U	D008	5.0	0.050	0.0017	mg/l	1	08/18/06	08/18/06 RS	SW846 6010B <sup>1</sup>

(1) Instrument QC Batch: MA5180

(2) Prep QC Batch: MP10146

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result > = MDL but < RL

Report of Analysis

2.2  
2

Client Sample ID:	PC-PB116539-GRID006B	Date Sampled:	08/14/06
Lab Sample ID:	F42927-2	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	n/a
Project:	Paradise Creek		

Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	0.017B	D008	5.0	0.050	0.0017	mg/l	1	08/18/06	08/18/06 RS	SW846 6010B 1

(1) Instrument QC Batch: MA5180

(2) Prep QC Batch: MP10146

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result >= MDL but < RL

### Report of Analysis

23  
2

Client Sample ID:	PC-PB116539-GRID006C	Date Sampled:	08/14/06
Lab Sample ID:	F42927-3	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	n/a
Project:	Paradise Creek		

Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	0.0017U	D008	5.0	0.050	0.0017	mg/l	1	08/18/06	08/18/06 RS	SW846 6010B <sup>1</sup>

(1) Instrument QC Batch: MA5180

(2) Prep QC Batch: MP10146

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result >= MDL but < RL

Report of Analysis

24  
2

Client Sample ID:	PC-PB116539-GRID006D	Date Sampled:	08/14/06
Lab Sample ID:	F42927-4	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	n/a
Project:	Paradise Creek		

Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	0.015 B	D008	5.0	0.050	0.0017	mg/l	1	08/18/06	08/18/06 RS	SW846 6010B <sup>1</sup>

- (1) Instrument QC Batch: MA5180
- (2) Prep QC Batch: MP10146

---

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result >= MDL but < RL

Report of Analysis

Client Sample ID:	PC-MIX-116539-GRID006-1	Date Sampled:	08/14/06
Lab Sample ID:	F42927-5	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	60.7
Project:	Paradise Creek		

General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	60.7		%	1	08/17/06	JB	EPA 160.3 M

RL = Reporting Limit

Report of Analysis

26  
2

Client Sample ID:	PC-MIX-116539-GRID006-2		Date Sampled:	08/14/06
Lab Sample ID:	F42927-6		Date Received:	08/16/06
Matrix:	SO - Soil		Percent Solids:	78.0
Method:	SW846 8015 M SW846 3550B			
Project:	Paradise Creek			

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	ZF21022.D	10	08/17/06	VS	08/17/06	OP17572	GZF991
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.2 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28) <sup>a</sup>	273	110	64	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	62%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected    MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

Client Sample ID:	PC-MIX-116539-GRID006-2	Date Sampled:	08/14/06
Lab Sample ID:	F42927-6	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	78.0
Project:	Paradise Creek		

General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	78		%	1	08/17/06	JB	EPA 160.3 M
pH	11.3		su	1	08/21/06	SJL	SW846 9045

RL = Reporting Limit

Report of Analysis

2.7  
2

Client Sample ID:	PC-MIX-116539-GRID006-3	Date Sampled:	08/14/06
Lab Sample ID:	F42927-7	Date Received:	08/16/06
Matrix:	SO - Soil	Percent Solids:	75.0
Project:	Paradise Creek		

General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	75		%	1	08/17/06	JB	EPA 160.3 M

RL = Reporting Limit



**Misc. Forms**

**Custody Documents and Other Forms**

---

**Includes the following where applicable:**

- Chain of Custody



**ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION**

ACCUTEST'S JOB NUMBER: F42927 CLIENT: SHAW PROJECT: Paradise Creek  
 DATE/TIME RECEIVED: 8-16-06 9:00 # OF COOLERS RECEIVED: 1 COOLER TEMPS: 4.8  
 METHOD OF DELIVERY: FEDEX (UPS) ACCUTEST COURIER GREYHOUND DELIVERY OTHER  
 AIRBILL NUMBERS: 66V7 4279 2 C1

- COOLER INFORMATION**
- CUSTODY SEAL NOT PRESENT OR NOT INTACT
  - CHAIN OF CUSTODY NOT RECEIVED (COC)
  - ANALYSIS REQUESTED IS UNCLEAR OR MISSING
  - SAMPLE DATES OR TIMES UNCLEAR OR MISSING
  - TEMPERATURE CRITERIA NOT MET

- TRIP BLANK INFORMATION**
- TRIP BLANK NOT PROVIDED
  - TRIP BLANK NOT ON COC
  - TRIP BLANK INTACT
  - TRIP BLANK NOT INTACT
  - RECEIVED WATER TRIP BLANK
  - RECEIVED SOIL TRIP BLANK

**MISC. INFORMATION**

NUMBER OF ENCORES ? 0

NUMBER OF 8035 FIELD KITS ? 0

NUMBER OR LAB FILTERED METALS ? 0

SUMMARY OF COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

TECHNICIAN SIGNATURE/DATE Jmc 8-16-06 TECHNICIAN SIGNATURE/DATE \_\_\_\_\_ ASBD03/27/06

31  
3



**GC Semi-volatiles**

4

**QC Data Summaries**

---

**Includes the following where applicable:**

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Method Blank Summary

Job Number: F42927  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17572-MB	ZF21019.D	1	08/17/06	VS	08/17/06	OP17572	GZF991

4.1  
4

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42927-6, F42927-8, F42927-9, F42927-10

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries	Limits
84-15-1	o-Terphenyl	74% 57-115%

# Method Blank Summary

Job Number: F42927  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17572-MB	ZF21036.D	1	08/18/06	VS	08/17/06	OP17572	GZF992

4.1  
4

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42927-6, F42927-8, F42927-9, F42927-10

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries	Limits
84-15-1	o-Terphenyl	76% 57-115%

Method Blank Summary

Job Number: F42927  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17587-MB	LL12070.D	1	08/18/06	VS	08/18/06	OP17587	GLL450

4.1  
4

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42927-11

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries	Limits
84-15-1	o-Terphenyl	59% 57-115%

# Method Blank Summary

Job Number: F42927  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17587-MB	LL12102.D	1	08/21/06	AA	08/18/06	OP17587	GLL451

4.1  
4

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42927-11

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries	Limits
84-15-1	o-Terphenyl	57-115%

# Blank Spike Summary

Job Number: F42927  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17572-BS	ZF21018.D	1	08/17/06	VS	08/17/06	OP17572	GZF991

4.2  
4

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42927-6, F42927-8, F42927-9, F42927-10

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH (C10-C28)	33.3	27.0	81	62-114

CAS No.	Surrogate Recoveries	BSP	Limits
84-15-1	o-Terphenyl	81%	57-115%

# Blank Spike Summary

Job Number: F42927  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17587-BS	LL12069.D	1	08/18/06	VS	08/18/06	OP17587	GLL450

4.2  
4

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42927-11

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH (C10-C28)	33.3	22.2	67	62-114

CAS No.	Surr ogate Recoveries	BSP	Limits
84-15-1	o-Terphenyl	71%	57-115%

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42927  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17572-MS	ZF21023.D	10	08/17/06	VS	08/17/06	OP17572	GZF991
OP17572-MSD	ZF21024.D	10	08/17/06	VS	08/17/06	OP17572	GZF991
F42927-6	ZF21022.D	10	08/17/06	VS	08/17/06	OP17572	GZF991

4.3  
4

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42927-6, F42927-8, F42927-9, F42927-10

CAS No.	Compound	F42927-6 mg/kg	Spike Q mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH (C10-C28)	273	43.3	340	155%	314	97%	8	31-136/36

CAS No.	Surrogate Recoveries	MS	MSD	F42927-6	Limits
84-15-1	o-Terphenyl	72%	73%	62%	57-115%

(a) Outside control limits due to high level in sample relative to spike amount.

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42927  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17587-MS	LL12092.D	1	08/19/06	VS	08/18/06	OP17587	GLL450
OP17587-MSD	LL12093.D	1	08/19/06	VS	08/18/06	OP17587	GLL450
F42948-15 <sup>a</sup>	LL12091.D	1	08/19/06	VS	08/18/06	OP17587	GLL450

4.3  
4

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42927-11

CAS No.	Compound	F42948-15 mg/kg	Spike Q mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH (C10-C28)	29.7	37.2	56.8	73	52.6	62	8	31-136/36

CAS No.	Surrogate Recoveries	MS	MSD	F42948-15	Limits
84-15-1	o-Terphenyl	74%	67%	78%	57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.



## Metals Analysis

5

### QC Data Summaries

---

Includes the following where applicable:

- Method Blank Summaries
- Matrix Spike and Duplicate Summaries
- Blank Spike and Lab Control Sample Summaries
- Serial Dilution Summaries

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F42927  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP10146  
Matrix Type: LEACHATE

Methods: SW846 6010B  
Units: mg/l

Prep Date:

03/15/03

03/28/03

Metal	RL	IDL	MB raw	final	MB raw	final
Aluminum	0.20	.018				
Antimony	0.0060	.0034				
Arsenic	0.010	.0028				
Barium	1.0	.0004				
Beryllium	0.0050	.0004				
Cadmium	0.0050	.0002				
Calcium	5.0	.042				
Chromium	0.010	.0006				
Cobalt	0.050	.0006				
Copper	0.025	.0009				
Iron	0.30	.012				
Lead	0.050	.0017	0.0024	0.050	0.016	0.050
Magnesium	5.0	.0043				
Manganese	0.015	.0006				
Molybdenum	0.050	.0013				
Nickel	0.040	.0008				
Potassium	10	.01				
Selenium	0.050	.002				
Silver	0.010	.0009				
Sodium	10	.5				
Thallium	0.010	.0023				
Tin	0.050	.0031				
Vanadium	0.050	.0006				
Zinc	0.10	.0013				

Associated samples MP10146: F42927-1, F42927-2, F42927-3, F42927-4

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

5.14  
5

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42927  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10146  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date:

08/18/08

08/18/08

Metal	F42927-1 Original DUP		RPD	QC Limits	F42927-1 Original MS		Spikelot MPFLICP1 % Rec	QC Limits
Aluminum								
Antimony								
Arsenic								
Barium								
Beryllium								
Cadmium								
Calcium								
Chromium								
Cobalt								
Copper								
Iron								
Lead	0.0	0.0	NC	0-20	0.0	0.51	0.50	80-120
Magnesium								
Manganese								
Molybdenum								
Nickel								
Potassium								
Selenium								
Silver								
Sodium								
Thallium								
Tin								
Vanadium								
Zinc								

Associated samples MP10146: F42927-1, F42927-2, F42927-3, F42927-4

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested

5.12  
5

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F42927  
 Account: ITWAVAB - Shaw B & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10146  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 06/18/06 06/18/06

Metal	BSP Result	Spikelot MPFLICP1 & Rec	QC Limits	BSP Result	Spikelot MPFLICP1 & Rec	QC Limits
Aluminum						
Antimony						
Arsenic						
Barium						
Beryllium						
Cadmium						
Calcium						
Chromium						
Cobalt						
Copper						
Iron						
Lead	0.52	0.50	80-120	0.55	0.50	80-120
Magnesium						
Manganese						
Molybdenum						
Nickel						
Potassium						
Selenium						
Silver						
Sodium						
Thallium						
Tin						
Vanadium						
Zinc						

Associated samples MP10146: F42927-1, F42927-2, F42927-3, F42927-4

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

5.13  
5

SERIAL DILUTION RESULTS SUMMARY

Login Number: F42927  
 Account: ITWAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10146  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: ug/l

Prep Date: 08/18/06

Metal	F42927-1 Original SDL 1:5	RPD	QC Limits
Aluminum			
Antimony			
Arsenic			
Barium			
Beryllium			
Cadmium			
Calcium			
Chromium			
Cobalt			
Copper			
Iron			
Lead	0.00	0.00	ND 0-10
Magnesium			
Manganese			
Molybdenum			
Nickel			
Potassium			
Selenium			
Silver			
Sodium			
Thallium			
Tin			
Vanadium			
Zinc			

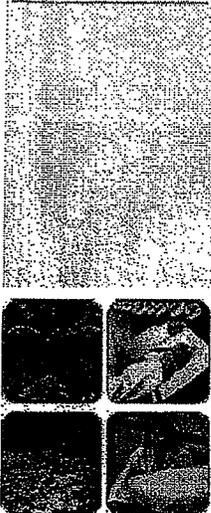
Associated samples MP10146: F42927-1, F42927-2, F42927-3, F42927-4

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

5.14  
5



ETP - ALL OTHERS CALIBRATED 08/22/06



**Technical Report for**

**Shaw E & I, Inc.**  
**Paradise Creek**  
**PO#116539**  
**Accutest Job Number: F42995**  
**Sampling Date: 08/17/06**

**Report to:**  
**Shaw E & I, Inc.**  
**natasha.sullivan@shawgrp.com**  
**ATTN: Natasha Sullivan**

**Total number of pages in report: 16**



Test results contained within this data package meet the requirements of the National Environmental Laboratory Accreditation Conference and/or state specific certification programs as applicable.

*Harry Behzadi*  
**Harry Behzadi, Ph.D.**  
**Laboratory Director**

Certifications: FL (DOH E83510), NC (573), NJ (FL002), MA (FL946), IA (366), LA (03051), KS (E-10327), SC, AK  
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Accutest Laboratories



### Sample Summary

Shaw E & I, Inc.

Job No: F42995

Paradise Creek  
Project No: PO#116539

Sample Number	Collected Date	Time By	Received	Matrix Code	Type	Client Sample ID
F42995-1	08/17/06	11:12 BM	08/18/06	SO	Soil	PC-MIX-116539-GRID006-1
F42995-2	08/17/06	11:16 BM	08/18/06	SO	Soil	PC-MIX-116539-GRID006-3

---

Soil samples reported on a dry weight basis unless otherwise indicated on result page.



**Sample Results**

**Report of Analysis**

---

Report of Analysis

2.1  
2

Client Sample ID:	PC-MIX-116539-GRID006-1	Date Sampled:	08/17/06
Lab Sample ID:	F42995-1	Date Received:	08/18/06
Matrix:	SO - Soil	Percent Solids:	77.5
Method:	SW846 8015 M SW846 3550B		
Project:	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL12135.D	10	08/21/06	AA	08/18/06	OP17587	GLL451
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.8 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	644	100	63	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	32%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected    MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

2.1  
2

Client Sample ID: PC-MIX-116539-GRID006-1.	Date Sampled: 08/17/06
Lab Sample ID: F42995-1	Date Received: 08/18/06
Matrix: SO - Soil	Percent Solids: 77.5
Project: Paradise Creek	

General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	77.5		%	1	08/21/06	JB	EPA 160.3 M
pH	10.3		su	1	08/21/06	SJL	SW846 9045

RL = Reporting Limit

Report of Analysis

2.2  
2

Client Sample ID:	PC-MIX-116539-GRID006-3	Date Sampled:	08/17/06
Lab Sample ID:	F42995-2	Date Received:	08/18/06
Matrix:	SO - Soil	Percent Solids:	77.9
Method:	SW846 8015 M SW846 3550B		
Project:	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL12136.D	10	08/21/06	AA	08/18/06	OP17587	GLL451
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.3 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	240	110	64	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	67%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

2.2  
2

Client Sample ID:	PC-MIX-116539-GRID006-3	Date Sampled:	08/17/06
Lab Sample ID:	F42995-2	Date Received:	08/18/06
Matrix:	SO - Soil	Percent Solids:	77.9
Project:	Paradise Creek		

General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	77.9		%	1	08/21/06	JB	EPA 160.3 M
pH	6.50		stt	1	08/21/06	SJL	SW846 9045

RL = Reporting Limit



Misc. Forms

Custody Documents and Other Forms

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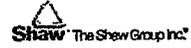
Includes the following where applicable:

- Chain of Custody

F42995

CHAIN-OF-CUSTODY RECORD

COC Number: 116539-8.17.06  
Purchase Order Number:



SHAW Environmental & Infrastructure, INC - 5700 Taurus Ave Suite 116B - Virginia Beach, VA 23465 - (757) 363 7190

Client		Project		Location		Analyst		Date		Time		Remarks	
Accutest		4400 Vineland Road Suite C-1, Orlando FL 32811		(407) 421-0700		Paradise Creek		116539		Natacha Kelley Sullivan		(410) 529-7698	
Shaw		Taylor Sword											
ID#	Sample ID	Date	Time	Temp	Method	Result	Unit	Lot	Exp	Lot	Exp	Lot	Exp
1	PCrsk116539-GRD008-1	08/17/06	1112	X	grab	2 x 4 mm		X	X				
2	PCrsk116539-GRD008-3	08/17/06	1116	X	grab	1 x 1 mm		X	X				
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													
13													
14													
15													

Retention Time: 3 day  
Sampled By: Brooke Mourah, SHAW

ID#	Sample ID	Date	Time	Temp	Method	Result	Unit	Lot	Exp	Lot	Exp	Lot	Exp
1	Brooke Mourah	8/17/2006	1600		FX								
2	FX				Jorge Lopez	8-18-06		9:00					
3													
4													

Summary Package  
Deliverables: EDD Excel  
Fax results to Natacha Sullivan (410) 529-7698

1.2

31  
3

**ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION**

ACCUTEST'S JOB NUMBER: F42995 CLIENT: SHAW PROJECT: Paradise Creek  
 DATE/TIME RECEIVED: 8-18-06 9:00 # OF COOLERS RECEIVED: 1 COOLER TEMPS: 12  
 METHOD OF DELIVERY:  FEDEX  UPS  ACCUTEST COURIER  GREYHOUND  DELIVERY  OTHER  
 AIRBILL NUMBERS: 859487402019

**COOLER INFORMATION**

- CUSTODY SEAL NOT PRESENT OR NOT INTACT
- CHAIN OF CUSTODY NOT RECEIVED (COC)
- ANALYSIS REQUESTED IS UNCLEAR OR MISSING
- SAMPLE DATES OR TIMES UNCLEAR OR MISSING
- TEMPERATURE CRITERIA NOT MET

**TRIP BLANK INFORMATION**

- TRIP BLANK NOT PROVIDED
- TRIP BLANK NOT ON COC
- TRIP BLANK INTACT
- TRIP BLANK NOT INTACT
- RECEIVED WATER TRIP BLANK
- RECEIVED SOIL TRIP BLANK

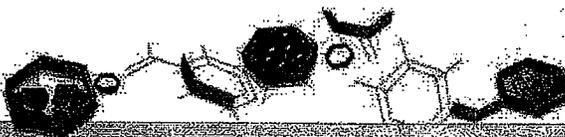
**MISC. INFORMATION**

NUMBER OF ENCORES ? 0  
 NUMBER OF 5035 FIELD KITS ? 0  
 NUMBER OF LAB FILTERED METALS ? 0

SUMMARY OF COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

TECHNICIAN SIGNATURE/DATE SMC 8-18-06 TECHNICIAN SIGNATURE/DATE \_\_\_\_\_ ASBD03/27/06

31  
3



## GC Semi-volatiles

### QC Data Summaries

---

**Includes the following where applicable:**

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Method Blank Summary

Job Number: F42995  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17587-MB	LL12070.D	1	08/18/06	VS	08/18/06	OP17587	GLL450

4.1  
4

The QC reported here applies to the following samples: Method: SW846 8015 M  
F42995-1, F42995-2

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries	Limits
84-15-1	o-Terphenyl	59% 57-115%

# Method Blank Summary

Job Number: F42995  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17587-MB	LL12102.D	1	08/21/06	AA	08/18/06	OP17587	GLL451

4.1  
4

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42995-1, F42995-2

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries	Limits
84-15-1	o-Terphenyl	57-115%

# Blank Spike Summary

Job Number: F42995  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17587-BS	LL12069.D	1	08/18/06	VS	08/18/06	OP17587	GLL450

4.2  
4

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42995-1, F42995-2

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH (C10-C28)	33.3	22.2	67%	62-114

CAS No.	Surrogate Recoveries	BSP	Limits
84-15-1	o-Terphenyl	71%	57-115%

**Matrix Spike/Matrix Spike Duplicate Summary**

Job Number: F42995  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OPI17587-MS	LL12092.D	1	08/19/06	VS	08/18/06	OP17587	GLL450
OPI17587-MSD	LL12093.D	1	08/19/06	VS	08/18/06	OP17587	GLL450
F42948-15 <sup>a</sup>	LL12091.D	1	08/19/06	VS	08/18/06	OP17587	GLL450

4.3  
4

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42995-1, F42995-2

CAS No.	Compound	F42948-15 mg/kg	Spike Q mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH (C10-C28)	29.7	37.2	56.8	73	52.6	62	8	31-136/36

CAS No.	Surrogate Recoveries	MS	MSD	F42948-15	Limits
84-15-1	o-Terphenyl	74%	67%	78%	57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

**LabLink Analytical Data Report  
Paradise Creek 116539**

**Including: TCLP Maximum Contaminant Concentrations (40 CFR 261 6/96)\***

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F42927-1	Lead	7439-92-1	SW846 6010B	0.0017	U	mg/l	0.05	5	1	PC-PB116539-GRID006A	14-Aug-06	7:50
F42927-2	Lead	7439-92-1	SW846 6010B	0.014	B	mg/l	0.05	5	1	PC-PB116539-GRID006B	14-Aug-06	7:52
F42927-3	Lead	7439-92-1	SW846 6010B	0.0017	U	mg/l	0.05	5	1	PC-PB116539-GRID006C	14-Aug-06	7:56
F42927-4	Lead	7439-92-1	SW846 6010B	0.015	B	mg/l	0.05	5	1	PC-PB116539-GRID006D	14-Aug-06	7:58
F42927-6	TPH (C10-C28) (b)		SW846 8015 M	273		mg/kg	110		10	PC-MIX-116539-GRID006-2	14-Aug-06	8:08
F42927-6	o-Terphenyl	84-15-1	SW846 8015 M	62		%	210		10	PC-MIX-116539-GRID006-2	14-Aug-06	8:08
F42927-6	pH		SW846 9045	11.3		su			1	PC-MIX-116539-GRID006-2	14-Aug-06	8:08
F42927-6	Solids, Percent		EPA 160.3 M	78		%			1	PC-MIX-116539-GRID006-2	14-Aug-06	8:08

(b) Petroleum hydrocarbon pattern extends beyond C28.

(c) Outside control limits due to dilution.

Found 0 results exceeding regulatory limits.

\*\* Indicates result outside regulatory limits.

\* Regulatory limits listed in this document have been obtained from the latest version of the regulations cited and are used for advisory purposes only. Accutest assumes no responsibility for errors in regulatory documents or changes to criteria detailed in later versions of the referenced regulation. It is the responsibility of the user to verify these limits before using or reporting any data.

**LabLink Analytical Data Report**  
**Paradise Creek 116539**

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	DF	Client ID	Collected	Time
F42995-1	TPH (C10-C28)		SW846 8015 M	644		mg/kg	100	10	PC-MIX-116539-GRID006-1	17-Aug-06	11:12
F42995-1	o-Terphenyl	84-15-1	SW846 8015 M	82		%	210	10	PC-MIX-116539-GRID006-1	17-Aug-06	11:12
F42995-1	pH		SW846 9045	10.3		su		1	PC-MIX-116539-GRID006-1	17-Aug-06	11:12
F42995-1	Solids, Percent		EPA 160.3 M	77.5		%		1	PC-MIX-116539-GRID006-1	17-Aug-06	11:12
F42995-2	TPH (C10-C28)		SW846 8015 M	540		mg/kg	110	10	PC-MIX-116539-GRID006-3	17-Aug-06	11:16
F42995-2	o-Terphenyl	84-15-1	SW846 8015 M	67		%	210	10	PC-MIX-116539-GRID006-3	17-Aug-06	11:16
F42995-2	pH		SW846 9045	11		su		1	PC-MIX-116539-GRID006-3	17-Aug-06	11:16
F42995-2	Solids, Percent		EPA 160.3 M	77.9		%		1	PC-MIX-116539-GRID006-3	17-Aug-06	11:16

# GRID 5

## WASTE PACKAGE INCLUDES:

- WM Application
- SPSW form Application
- Map
- Full TCLP results Grid 5 only
- Grid 5 TCLP results Summary
- Additional Grid 5 samples:
  - TPH – DRO
  - pH
  - TCLP – lead only

DEPARTMENT OF ENVIRONMENTAL QUALITY  
TIDEWATER REGIONAL OFFICE

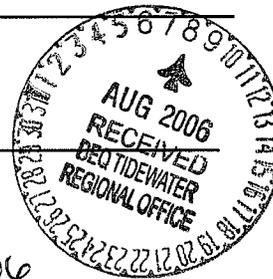
Company Name: SHAW ETI

Person delivering item: TAYLOR SWARD  
(PRINT)

Item delivered: GRID 5 PACKAGES - NNSY SPSLS - Form 1  
ANALYTICAL - FOR REVIEW & APPROVAL

Received By: Lindsey Evans  
(PRINT)

L Evans  
(Signature)



08-08-06  
(Date of Receipt)

**Waste Management Application**

**Navy Signature req'd**



**GENERATOR'S WASTE PROFILE SHEET**  
PLEASE PRINT IN INK OR TYPE

Service Agreement on File?  YES  NO  
 Hazardous  Non-Hazardous  TSCA

Profile Number: WMI \_\_\_\_\_  
 Renewal Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**A. Waste Generator Information**

1. Generator Name: Commander, Navy Region Mid-Atlantic (CNRMA) 2. SIC Code: \_\_\_\_\_  
 3. Facility Street Address: 1510 Gilbert St. 4. Phone: (757) 445-6703  
 5. Facility City: Norfolk 6. State/Province: VA  
 7. Zip/Postal Code: 23511-2737 8. Generator USEPA/Federal ID #: NOT APPLICABLE  
 9. County: \_\_\_\_\_ 10. State/Province ID #: NOT APPLICABLE  
 11. Customer Name: Capital Environmental - CNRMA 12. Customer Phone: (804) 239-0900 (757) 444-6900  
 13. Customer Contact: Matt Gemmel - TIM ROSE 14. Customer Fax: 804-798-3326 (757) 444-5820  
 15. Billing Address \_\_\_\_\_  Same as above

**B. Waste Stream Information**

1. Description  
 a. Name of Waste: Soil contaminated with Wood Debris  
 b. Process Generating Waste: Excavation

c. Color <u>gray to black</u>	d. Strong odor (describe): <u>none</u>	e. Physical state @ 70°F <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> Sludge <input type="checkbox"/> Other	f. Layers <input checked="" type="checkbox"/> Single Layer <input type="checkbox"/> Multi-layer	g. Free liquid range <u>n/a to</u> %  h. pH: Range <u>7.4 to 7.8</u>
----------------------------------	---	---	---	--

i. Liquid Flash Point:  <73°F  73-99°F  100-139°F  140-199°F  ≥ 200°F  Not applicable  
 j. Chemical Composition (List all constituents [including halogenated organics, debris, and UHC's] present in any concentration and submit representative analysis):

Constituents	Concentration Range	Constituents	Concentration Range
<u>See attached analytical</u>			

**TOTAL COMPOSITION MUST EQUAL OR EXCEED 100%**

Check all that apply:  
 k.  Oxidizer  Pyrophoric  Explosive  Radioactive  
 Carcinogen  Infectious  Shock Sensitive  Water Reactive  
 l. Does the waste represented by this profile contain any of the carcinogens which require OSHA notification? (list in Section B.1.j).....  YES  NO  
 m. Does the waste represented by this profile contain dioxins? (list in Section B.1.j).....  YES  NO  
 n. Does the waste represented by this profile contain asbestos?.....  YES  NO  
 If yes.....  friable  non-friable  
 o. Does the waste represented by this profile contain benzene?.....  YES  NO  
 If yes, concentration \_\_\_\_\_ ppm  
 Is the waste subject to the benzene waste operations NESHAP?.....  YES  NO  
 p. Is the waste subject to RCRA Subpart CC controls?.....  YES  NO  
 If yes, volatile organic concentration \_\_\_\_\_ ppmw  
 q. Does the waste contain any Class I or Class II ozone-depleting substances?.....  YES  NO  
 r. Does the waste contain debris? (list in Section B.1.j).....  YES  NO

2. Quantity of Waste  
 Estimated Annual Volume ~1500 cy  Tons  Yards  Drums  Other (specify) \_\_\_\_\_

3. Shipping Information  
 a. Packaging:  
 Bulk Solid; Type/Size: dump trucks  Bulk Liquid; Type/Size: \_\_\_\_\_  
 Drum; Type; Size: \_\_\_\_\_  Other: \_\_\_\_\_  
 b. Shipping Frequency: Units truck loads Per:  Month  Quarter  Year  One time  Other  
 c. Is this a U.S. Department of Transportation (USDOT) Hazardous Material? (If no, skip d, e, and f).....  YES  NO



**GENERATOR'S WASTE PROFILE SHEET** Profile Number: WMI  
PLEASE PRINT IN INK OR TYPE

- d. Reportable Quantity (lbs.; kgs.): \_\_\_\_\_ e. Hazard Class/ID #: \_\_\_\_\_  
 f. USDOT Shipping Name: \_\_\_\_\_  
 g. Personal Protective Equipment Requirements: \_\_\_\_\_  
 h. Transporter/Transfer Station: \_\_\_\_\_

**C. Generator's Certification** (Please check appropriate responses, sign, and date below.)

1. Is this a USEPA hazardous waste (40 CFR Part 261)? If the answer is no, skip to 2.  YES  NO
  - a. If yes, identify ALL USEPA listed and characteristic waste code numbers (D, F, K, P, U) \_\_\_\_\_
  - b. If a characteristic hazardous waste, do underlying hazardous constituents (UHCs) apply? (if yes, list in Section B.1.j)  YES  NO
  - c. Does this waste contain debris? (if yes, list size and type in Chemical Composition - B.1.)  YES  NO
2. Is this a state hazardous waste? Identify ALL state hazardous waste codes \_\_\_\_\_  YES  NO
3. Is the waste from a CERCLA (40 CFR 300, Appendix B) or state mandated clean-up? If yes, attach Record of Decision (ROD), 104/106 or 122 order or court order that governs site clean-up activity. For state mandated clean-up, provide relevant documentation.  YES  NO
4. Does the waste represented by this waste profile sheet contain radioactive material, or is disposal regulated by the Nuclear Regulatory Commission?  YES  NO
5. Does the waste represented by this waste profile sheet contain concentrations of Polychlorinated Biphenyls (PCBs) regulated by 40 CFR 761? (if yes, list in Chemical Composition - B.1.j)  YES  NO
  - a. If yes, were the PCBs imported into the U.S.?  YES  NO
6. Do the waste profile sheet and all attachments contain true and accurate descriptions of the waste material, and has all relevant information within the possession of the Generator regarding known or suspected hazards pertaining to the waste been disclosed to the Contractor?  YES  NO
7. Will all changes which occur in the character of the waste be identified by the Generator and disclosed to the Contractor prior to providing the waste to the Contractor?  YES  NO

Check here if a Certificate of Destruction or Disposal is required.

Any sample submitted is representative as defined in 40 CFR 261 - Appendix I or by using an equivalent method. I authorize WMI to obtain a sample from any waste shipment for purposes of recertification. If this certification is made by a broker, the undersigned signs as authorized agent of the generator and has confirmed the information contained in this Profile Sheet from information provided by the generator and additional information as it has determined to be reasonably necessary. If approved for management, contractor has all the necessary permits and licenses for the waste that has been characterized and identified by this approved profile.

Certification Signature: *Timothy A. Reisch* Title: Env Engineer / Project Manager  
 Name (Type or Print): TIMOTHY A. REISCH Company Name: USNAVY; NAVFAC Date: 1-7-2006  
 Check if additional information is attached. Indicate the number of attached pages \_\_\_\_\_

D. WMI Management's Decision	FOR WMI USE ONLY
1. Management Method <input type="checkbox"/> Landfill <input type="checkbox"/> Non-hazardous Solidification <input type="checkbox"/> Bioremediation <input type="checkbox"/> Incineration <input type="checkbox"/> Hazardous Stabilization <input type="checkbox"/> Other (Specify) _____	
2. Proposed Ultimate Management Facility: _____	
3. Precautions, Special Handling Procedures, or Limitation on Approval: _____ _____ _____	
Special Waste Decision.....	<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved
Salesperson's Signature: _____	Date: _____
Division Approval Signature (Optional): _____	Date: _____
Special Waste Approvals Person Signature: _____	Date: _____



## GENERATOR'S WASTE PROFILE SHEET

PLEASE PRINT IN INK OR TYPE

### Instructions

Information on this form is used to determine if the waste may be transported, treated, stored or disposed in a legal, safe, and environmentally sound manner. This information will be maintained in strict confidence. Answers must be provided for sections A, B, and C and must be printed in ink or typed. A response of "NONE" or "NA" (not applicable) can be made if appropriate. If additional space is needed, indicate on the form that additional information is attached, and attach the information to Generator's Waste Profile Sheet. If you have questions concerning this form, please contact the Contractor's sales representative.

#### A. Waste Generator Information

1. **Generator Name** - Enter the name of the facility where the waste is generated.
2. **SIC Code** - Enter the four digit Standard Industrial Classification Code for the facility where the waste is generated.
3. **Facility Street Address** - Enter the street address (not P.O. Box) of the facility where the waste is generated.
4. **Phone** - Enter Generator's area code and phone number.
5. **Facility City** - Enter the city where the waste is generated.
6. **State/Province** - Enter the state or province where the waste is generated.
7. **Zip/Postal Code** - Enter the generating facility's zip or postal code.
8. **Generator USEPA/Federal ID #** - Enter the identification number issued by the USEPA, Canadian, or Mexican Federal Agency to the facility generating the waste (if applicable).
9. **County** - Enter the county where the waste is generated.
10. **State/Province ID #** - Enter the identification number issued by the state or province to the facility generating the waste (if applicable).
11. **Customer Name** - Entity that the Contractor is directly working with regarding the represented waste stream. If the same as the Generator, mark "Same as Above".
12. **Customer Phone** - Enter technical contact's area code and telephone number.
13. **Customer Contact** - Enter the name of the person who can answer technical questions about the waste.
14. **Customer Fax** - Area code and facsimile number for the customer.
15. **Billing Address** - Address where bill for services should be sent.

#### B. Waste Stream Information

- 1.a. **Name of Waste** - Enter a name generally descriptive of this waste (e.g., paint sludge, fluorescent bulbs).
- 1.b. **Process Generating Waste** - Describe the process generating the waste in detail. List the specific process/operation or source that generates the waste (e.g., incineration of municipal refuse, asbestos removal, wastewater treatment, building maintenance).  
At a minimum, the Generator should answer the following questions in determining the process generating the waste.
  - What chemicals are stored and/or used at the facility?
  - Is the waste generated from the production/manufacturing of any of the following industries: wood preservation; inorganic pigments; organic pigments; pesticides; explosives; petroleum refining; iron and steel, copper, lead or zinc production?
  - Is the waste a result from degreasing, solvent parts cleaning, recovery/reclaiming of solvents (bottoms), wastewater treatment (sludges), or electroplating?
- 1.c. **Color** - Describe the color of the waste (e.g., blue, transparent, varies).
- 1.d. **Strong odor** - **DO NOT SMELL THE WASTE!** If the waste has a known odor, then describe (e.g., acrid, pungent, solvent, sweet).
- 1.e. **Physical state @ 70°F** - If the four boxes provided do not apply, a descriptive phrase may be entered after "Other" (e.g., multi-phase).
- 1.f. **Layers** - Single Layer means the waste is homogenous. Multi-layer means the waste is comprised of two or more layers (e.g., oil/water/sludge).
- 1.g. **Free liquid range** - Range (in percent by volume) of free liquids in the waste.
- 1.h. **pH Range** - Indicate the pH range.
- 1.i. **Liquid Flash Point** - Indicate the flash point obtained using the appropriate test method.
- 1.j. **Chemical Composition** - List all organic and/or inorganic components of the waste using chemical names. If trade names are used, attach Material Safety Data Sheets or other documents that adequately describe the composition of the waste. For each component, estimate the range (in percent) in which the component is present.
- 1.k. Check all that apply.
  - 1.l. Identify any element, chemical compound, or mixture in concentration of 0.1 percent or greater that is considered a carcinogen or potential carcinogen pursuant to OSHA.
  - 1.m. Indicate if the waste contains any dioxins (list in Section B.1.j).
  - 1.n. Indicate if the waste contains asbestos. Indicate if the asbestos is friable.
  - 1.o. Indicate if the waste contains benzene, the level in ppm, and whether it is subject to the benzene NESHAP.
  - 1.p. Indicate if the waste is subject to RCRA Subpart CC control. In addition, indicate the volatile organic concentration, if known, in parts per million weight.
  - 1.q. Indicate if the waste contains any Class I or Class II ozone-depleting controlled substances.
  - 1.r. Indicate if the waste contains debris (list size and type in B.1.j).
2. **Quantity of Waste** - Approximate volume in tons, yards, or other (e.g., drums, gallons) that will be received by the ultimate management facility. This volume amount is not intended for use in complying with state and/or permit restrictions.
- 3.a. **Packaging** - Choose the appropriate option or "other" along with a description.
- 3.b. **Shipping Frequency** - Choose the appropriate option or "other" along with a description.
- 3.c. **Is this a U.S. Department of Transportation (USDOT) hazardous material?** - Choose the appropriate response: yes or no.
- 3.d. **Reportable Quantity (lbs.; kgs.)** - If the answer to 3.c. is yes, enter the Reportable Quantity (RQ) established by 40 CFR 302.4 or equivalent Canadian or Mexican regulation for this waste. Indicate the appropriate units for the RQ.
- 3.e. **Hazard Class/ID #** - If the answer to 3.c. is yes, indicate the proper USDOT hazard class and identification number.
- 3.f. **USDOT Shipping Name** - IF the answer to 3.c. is yes, enter the proper USDOT shipping name for the waste.
- 3.g. **Personal Protective Equipment Requirements** - All personal protective equipment necessary to safely manage the waste stream.
- 3.h. **Transporter/Transfer Station** - Transporter and/or transfer station name.



## GENERATOR'S WASTE PROFILE SHEET

PLEASE PRINT IN INK OR TYPE

### C. Generator's Certification (Please check appropriate responses, sign, and date below.)

Indicate the appropriate response to questions/statements 1, 2, 3, 4, 5, 6, and 7. By signing this Generator's Waste Profile Sheet, the Generator certifies the responses are true and accurate with respect to the waste stream(s) listed.

**Certification Signature** - Signature of an authorized employee of the Generator or representative of the generator if authorized in writing by the generator.

**Title** - Enter Employee's title.

**Name** - Type or Print Employee's name.

**Company Name** - Company employing the person certifying the Generator's Waste Profile Sheet.

**Date** - Enter the date this Generator's Waste Profile Sheet is signed.

### D. WMI Management's Decision

FOR WMI USE ONLY

To be completed by WMI.

**SBW2**

**Signature Required**

**Form SPSW-2**  
**SPECIAL WASTE DISPOSAL REQUEST**  
**GENERATOR INFORMATION**

**Section I. Generator Identification:**

a. Generator Name: Commander, Navy Region Mid-Atlantic

b. Generator Address: 1510 Gilbert St, Norfolk VA, 23511-2737

-----

-----

c. Generator Phone: (757)445-6703 Tim Reisch (757) 444-6890

**Section II. General Waste Profile:**

Note: It is the duty of all persons to dispose of their solid waste in a legal manner (Va.Code ' 10.1-1418.1.A). In addition, any person who generates a solid waste shall determine if that waste is a hazardous waste (' 6.1 of the Virginia Hazardous Waste Management Regulations (VR 672-10-1) ("VHWMR")).

a. General description of waste, including its state (e.g., solid liquid, semi-solid, gas):

Solid material that includes Soil and debris (concrete and wood) consistent with

construction debris. -----

-----

b. Amount of materials proposed for disposal:

Volume or Weight approximately 1,500

Units cubic yards

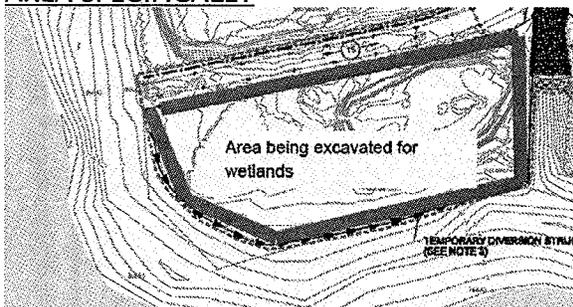
- c. Activities or processes from which the waste was generated, including process flow diagrams specifically addressing the waste stream(s), a description of the source of the waste, and a statement of whether the waste was formerly managed as a hazardous waste.

This waste material is being generated as a result of the excavation for construction of an engineered wetlands. The material was deposited originally as fill material adjacent to the toe of a former landfill operated by Norfolk Naval Shipyard (NNSY). On top of the fill a calcium hydroxide berm impoundment was built. That impoundment has been removed. The remaining fill material dimensional lumber, (wood debris) and soil mix needs to be removed to accommodate the construction of an engineered landfill.

NOTE: Attach a flow diagram and indicate any deletions due to proprietary or trade secret information. The Department cannot protect proprietary information or trade secrets.

- d. Location of generation:

The removal site is located between Paradise Creek on the southern boundary, and the northern boundary is the NNSY former Eastern Area Landfill and the Western Area Landfill. The area being excavated is on a bend in Paradise Creek : Attached map shows GRID 5 AREA SPECIFICALLY



- e. Method of transportation:

Describe the manner in which the material is being transported for disposal (e.g., bulk containers):

Bulk shipment via Dump Trucks

f. Testing results

PARAMETER	ANALYZED (METHOD)	NOT ANALYZED (REASON)	RESULTS INCLUDED
Corrosivity	SW 846, Chapter 7	N/a	See attached analysis
Ignitability	SW 846 1010	N/a	See attached analysis
TCLP (a - e) only			
a. Metals	See attached table	N/a	See attached analysis
b. Volatile Organics	See attached table	N/a	See attached analysis
c. Semi-Volatile Organics	See attached table	N/a	See attached analysis
d. Pesticides	See attached table	N/a	See attached analysis
e. Herbicides	See attached table	N/a	See attached analysis
Total Metals		TCLP	N
Volatile Organics		TCLP	N
Semi-Volatile Organics		TCLP	N
Pesticides		TCLP	N
Herbicides		TCLP	N
PCB's	SW846 8082	N/a	See attached analysis
Paint Filter Test		To be performed during removal action	N
Radioactive Waste		Previous investigation, site history	N
Asbestos		Previous investigation, site history	N
Percent Solids	EPA 160.3		w/ TCLP results
TOX		Previous investigation, site history	N
TPH <sup>1</sup>	SW 846 8015M	N/a	See attached analysis

g. Sample location map included: Yes (xx) No ( )

1

TPH DRO samples are to be taken during removal prior to disposal for meeting disposal facility criteria at the frequency of 1 per 500 cubic yards material.

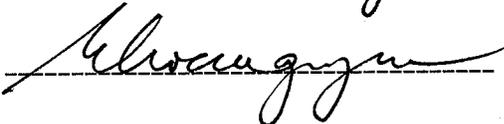
Section III. Generator Certification:

I hereby certify, based upon my diligent inquiry into the activities, materials, and processes generating the materials described on this form:

1. That these materials are not classified as listed or characteristic hazardous waste governed by the Commonwealth of Virginia or the state of origin of this waste;
2. That the materials are not regulated medical waste governed by the Virginia Regulated Medical Waste Management Regulations (VR 672-40-01);
3. That the materials do not contain 50.0 parts per million or more of polychlorinated biphenyls (PCB's);
4. That the materials do not contain more than 1.0 part per billion of dioxins;  
*THERE IS NO REASON TO EXPECT PRESENCE OF DIOXINS*
5. That the material is not a radioactive waste or possess the property of radioactivity;
6. That the materials are not prohibited or restricted from disposal in a Virginia solid waste management facility; and
7. That the analytical results, completed application and attached documentation submitted in support of this special waste disposal request are a representative, true, and accurate description of these materials.

Print Name: KHOA NGUYEN

Title: Waste Program Manager

Signature:  Date: 7 August 2006

Notary Statement

*See Attached Acknowledgment*

State of VERMONT

County of NORTH

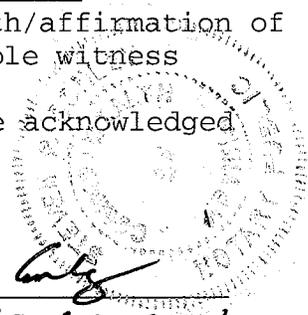
On 7 August, 2006, Khoa Nguyen  
personally appeared before me,

\_\_\_\_ who is personally known to me  
 whose identity I proved on the basis of  
his VA. Driver's License  
\_\_\_\_ whose identity I proved on the oath/affirmation of  
\_\_\_\_, a credible witness

to be the signer of the above document, and  she acknowledged  
that  she signed it.

Steve P. Galt

Notary Public *Commission Expires 30 Dec 08*



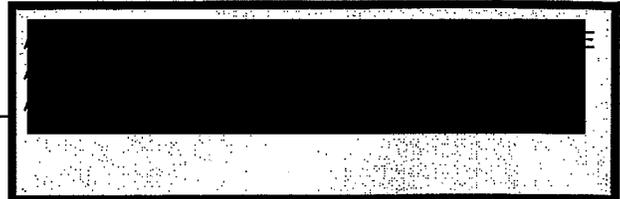




IT'S ALL IN THE CHEMISTRY

06/30/06

**Technical Report for**



**Shaw E & I, Inc.**

**Paradise Creek**

**116539**

**Accutest Job Number: F41620**

**Sampling Date: 06/20/06**



**Report to:**

**Shaw E & I, Inc.**

**natasha.sullivan@shawgrp.com**

**ATTN: Natasha Sullivan**

**Total number of pages in report: 112**



Test results contained within this data package meet the requirements of the National Environmental Laboratory Accreditation Conference and/or state specific certification programs as applicable.

*Harry Behzadi*  
**Harry Behzadi, Ph.D.**  
**Laboratory Director**

Certifications: FL (DOH E83510), NC (573), NJ (FL002), MA (FL946), IA (366), LA (03051), KS (E-10327), SC, AK  
This report shall not be reproduced, except in its entirety, without the written approval of Accutest Laboratories.

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### Sample Summary

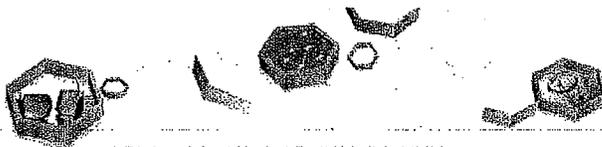
Shaw E & I, Inc.

Job No: F41620

Paradise Creek  
Project No: 116539

Sample Number	Collected Date	Time By	Received	Matrix Code	Type	Client Sample ID
F41620-1	06/20/06	10:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID04
F41620-1A	06/20/06	10:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID04
F41620-2	06/20/06	15:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID05
F41620-2A	06/20/06	15:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID05
F41620-3	06/20/06	16:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID06
F41620-3A	06/20/06	16:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID06
F41620-4	06/20/06	11:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID10
F41620-4A	06/20/06	11:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID10
F41620-5	06/20/06	13:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID11
F41620-5A	06/20/06	13:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID11
F41620-6	06/20/06	14:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID12
F41620-6A	06/20/06	14:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID12

Soil samples reported on a dry weight basis unless otherwise indicated on result page.



IT'S ALL IN THE CHEMISTRY

### Sample Results

---

### Report of Analysis

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Report of Analysis

2.3  
2

Client Sample ID:	PC-TP-116539-GRID05	Date Sampled:	06/20/06
Lab Sample ID:	F41620-2	Date Received:	06/22/06
Matrix:	SO - Soil	Percent Solids:	69.6
Method:	SW846 8015		
Project:	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	UV022702.D	1	06/23/06	MM	n/a	n/a	GUV1317
Run #2							

Run #	Initial Weight	Final Volume	Methanol Aliquot
Run #1	5.36 g	5.0 ml	100 ul
Run #2			

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	8.9	4.4	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
460-00-4	4-Bromofluorobenzene	115%		62-135%		
98-08-8	aaa-Trifluorotoluene	92%		65-118%		

(a) Sample was received in a bulk container and preserved within 48 hours of sampling.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

2.3  
2

Client Sample ID:	PC-TP-116539-GRID05	Date Sampled:	06/20/06
Lab Sample ID:	F41620-2	Date Received:	06/22/06
Matrix:	SO - Soil	Percent Solids:	69.6
Method:	SW846 8082 SW846 3550B		
Project:	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	ST48645.D	4	06/28/06	ME	06/26/06	OP17013	GST1419
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.5 g	10.0 ml
Run #2		

PCB List

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	94	47	ug/kg	
11104-28-2	Aroclor 1221	ND	94	75	ug/kg	
11141-16-5	Aroclor 1232	ND	94	94	ug/kg	
53469-21-9	Aroclor 1242	ND	94	94	ug/kg	
12672-29-6	Aroclor 1248	ND	94	94	ug/kg	
11097-69-1	Aroclor 1254	ND	94	94	ug/kg	
11096-82-5	Aroclor 1260 <sup>b</sup>	391	94	47	ug/kg	J
11100-14-4	Aroclor 1268 <sup>b</sup>	185	94	47	ug/kg	J
	Total PCBs	577	190		ug/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	83%		52-136%
2051-24-3	Decachlorobiphenyl	146%		49-148%

(a) All hits confirmed by dual column analysis.

(b) Estimated value due to the presence of multiple overlapping Aroclor patterns.

ND = Not detected    MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

2.3  
2

Client Sample ID:	PC-TP-116539-GRID05	Date Sampled:	06/20/06
Lab Sample ID:	F41620-2	Date Received:	06/22/06
Matrix:	SO - Soil	Percent Solids:	69.6
Method:	SW846 8015 M SW846 3550B		
Project:	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	LL11097.D	8	06/29/06	VS	06/27/06	OP17034	GLL410
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.2 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28) <sup>a</sup>	570	95	57	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	86%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit      J = Indicates an estimated value  
 RL = Reporting Limit      B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

Report of Analysis

2.3  
2

Client Sample ID: PC-TP-116539-GRID05	Date Sampled: 06/20/06
Lab Sample ID: F41620-2	Date Received: 06/22/06
Matrix: SO - Soil	Percent Solids: 69.6
Project: Paradise Creek	

General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Corrosivity as pH	7.4			1	06/23/06	CP	SW846 CHAP7
Cyanide Reactivity	< 2.2	2.2	mg/kg	1	06/29/06	SJL	SW846 CHAP7
Ignitability (Flashpoint) <sup>a</sup>	> 200		Deg. F	1	06/23/06	CP	SW846 1010
Solids, Percent	69.6		%	1	06/22/06	CP	EPA 160.3 M
Sulfide Reactivity	< 50	50	mg/kg	1	06/29/06	SJL	SW846 CHAP7

(a) Not ignitable

RL = Reporting Limit

Report of Analysis

2.4  
2

Client Sample ID:	PC-TP-116539-GRID05	Date Sampled:	06/20/06
Lab Sample ID:	F41620-2A	Date Received:	06/22/06
Matrix:	SO - Soil	Percent Solids:	69.6
Method:	SW846 8260B SW846 1311		
Project:	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	C0041832.D	10	06/29/06	KW	06/27/06	OP17038	VC1691
Run #2							

Run #	Purge Volume
Run #1	5.0 ml
Run #2	

VOA TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
71-43-2	Benzene	ND	D018	0.50	0.010	0.0050	mg/l	
108-90-7	Chlorobenzene	ND	D021	100	0.020	0.0050	mg/l	
67-66-3	Chloroform	ND	D022	6.0	0.020	0.0050	mg/l	
56-23-5	Carbon tetrachloride	ND	D019	0.50	0.020	0.0050	mg/l	
75-35-4	1,1-Dichloroethylene	ND	D029	0.70	0.020	0.0050	mg/l	
107-06-2	1,2-Dichloroethane	ND	D028	0.50	0.020	0.0050	mg/l	
106-46-7	p-Dichlorobenzene	ND	D027	7.5	0.020	0.0050	mg/l	
78-93-3	Methyl ethyl ketone	ND	D035	200	0.10	0.025	mg/l	
127-18-4	Tetrachloroethylene	ND	D039	0.70	0.020	0.0050	mg/l	
79-01-6	Trichloroethylene	ND	D040	0.50	0.020	0.0050	mg/l	
75-01-4	Vinyl chloride	ND	D043	0.20	0.010	0.0050	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	105%		86-115%
2037-26-5	Toluene-D8	101%		86-112%
460-00-4	4-Bromofluorobenzene	105%		83-119%
17060-07-0	1,2-Dichloroethane-D4	104%		73-126%

ND = Not detected MDL - Method Detection Limit  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

2.4  
2

Client Sample ID:	PC-TP-116539-GRID05	Date Sampled:	06/20/06
Lab Sample ID:	F41620-2A	Date Received:	06/22/06
Matrix:	SO - Soil	Percent Solids:	69.6
Method:	SW846 8270C SW846 3510C		
Project:	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	L032380.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	1.0 ml
Run #2		

ABN TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	D023	200	0.050	0.020	mg/l	
	3&4-Methylphenol	ND	D024	200	0.050	0.020	mg/l	
87-86-5	Pentachlorophenol	ND	D037	100	0.25	0.10	mg/l	
95-95-4	2,4,5-Trichlorophenol	ND	D041	400	0.050	0.020	mg/l	
88-06-2	2,4,6-Trichlorophenol	ND	D042	2.0	0.050	0.020	mg/l	
106-46-7	1,4-Dichlorobenzene	ND	D027	7.5	0.050	0.010	mg/l	
121-14-2	2,4-Dinitrotoluene	ND	D030	0.13	0.050	0.020	mg/l	
118-74-1	Hexachlorobenzene	ND	D032	0.13	0.050	0.010	mg/l	
87-68-3	Hexachlorobutadiene	ND	D033	0.50	0.050	0.020	mg/l	
67-72-1	Hexachloroethane	ND	D034	3.0	0.050	0.020	mg/l	
98-95-3	Nitrobenzene	ND	D036	2.0	0.050	0.010	mg/l	
110-86-1	Pyridine	ND	D038	5.0	0.10	0.030	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
367-12-4	2-Fluorophenol	37%		19-90%
4165-62-2	Phenol-d5	23%		10-68%
118-79-6	2,4,6-Tribromophenol	89%		36-137%
4165-60-0	Nitrobenzene-d5	76%		49-119%
321-60-8	2-Fluorobiphenyl	80%		45-118%
1718-51-0	Terphenyl-d14	85%		46-135%

ND = Not detected MDL - Method Detection Limit  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

2.4  
2

Client Sample ID:	PC-TP-116539-GRID05	Date Sampled:	06/20/06
Lab Sample ID:	F41620-2A	Date Received:	06/22/06
Matrix:	SO - Soil	Percent Solids:	69.6
Method:	SW846 8081A SW846 3510C		
Project:	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	TT00799.D	1	06/29/06	AA	06/28/06	OP17053	GTT35
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

Pesticide TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	D013	0.40	0.00050	0.00020	mg/l	
12789-03-6	Chlordane	ND	D020	0.030	0.0050	0.0025	mg/l	
72-20-8	Endrin	ND	D012	0.020	0.0010	0.00040	mg/l	
76-44-8	Heptachlor	ND	D031	0.0080	0.00050	0.00020	mg/l	
1024-57-3	Heptachlor epoxide	ND	D031	0.0080	0.00050	0.00020	mg/l	
72-43-5	Methoxychlor	ND	D014	10	0.0010	0.00040	mg/l	
8001-35-2	Toxaphene	ND	D015	0.50	0.025	0.015	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	94%		60-138%
2051-24-3	Decachlorobiphenyl	96%		31-148%

ND = Not detected MDL - Method Detection Limit  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

2.4  
2

Client Sample ID:	PC-TP-116539-GRID05	Date Sampled:	06/20/06
Lab Sample ID:	F41620-2A	Date Received:	06/22/06
Matrix:	SO - Soil	Percent Solids:	69.6
Method:	SW846 8151 SW846 1311		
Project:	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	DD57051.D	1	06/29/06	ATX	06/28/06	T:OP6063	T:GDD1067
Run #2							

Run #	Initial Volume	Final Volume
Run #1	1000 ml	10.0 ml
Run #2		

Herbicide TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
94-75-7	2,4-D	ND	D016	10	0.0015	0.0011	mg/l	
93-72-1	2,4,5-TP (Silvex)	ND	D017	1.0	0.00020	0.000060	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
19719-28-9	2,4-DCAA	128%		23-171%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

ND = Not detected    MDL - Method Detection Limit    J = Indicates an estimated value  
MCL = Maximum Contamination Level (40 CFR 261 6/96)    B = Indicates analyte found in associated method blank  
E = Indicates value exceeds calibration range    N = Indicates presumptive evidence of a compound

Report of Analysis

24  
2

Client Sample ID: PC-TP-116539-GRID05	Date Sampled: 06/20/06
Lab Sample ID: F41620-2A	Date Received: 06/22/06
Matrix: SO - Soil	Percent Solids: 69.6
Project: Paradise Creek	

Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Arsenic <sup>a</sup>	0.0056 U	D004	5.0	0.020	0.0056	mg/l	1	06/27/06	06/27/06 RS	SW846 6010B <sup>2</sup>
Barium	3.0	D005	100	1.0	0.20	mg/l	1	06/27/06	06/27/06 RS	SW846 6010B <sup>2</sup>
Cadmium	0.044	D006	1.0	0.0050	0.00030	mg/l	1	06/27/06	06/27/06 RS	SW846 6010B <sup>2</sup>
Chromium	0.019	D007	5.0	0.010	0.00060	mg/l	1	06/27/06	06/27/06 RS	SW846 6010B <sup>2</sup>
Lead	2.6	D008	5.0	0.050	0.0017	mg/l	1	06/27/06	06/27/06 RS	SW846 6010B <sup>2</sup>
Mercury	0.0010 U	D009	0.20	0.010	0.0010	mg/l	1	06/27/06	06/27/06 MS	SW846 7470A <sup>1</sup>
Selenium <sup>b</sup>	0.040 U	D010	1.0	0.10	0.040	mg/l	1	06/27/06	06/27/06 RS	SW846 6010B <sup>2</sup>
Silver	0.00090 U	D011	5.0	0.010	0.00090	mg/l	1	06/27/06	06/27/06 RS	SW846 6010B <sup>2</sup>

- (1) Instrument QC Batch: MA5055
- (2) Instrument QC Batch: MA5056
- (3) Prep QC Batch: MP9826
- (4) Prep QC Batch: MP9828

- (a) Elevated RL/MDL due to negative bias of Method Blank.
- (b) Elevated RL/MDL due to positive bias of Method Blank.

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result > = MDL but < RL



## Misc. Forms

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## Custody Documents and Other Forms

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Includes the following where applicable:

- Chain of Custody

# F41620

**CHAIN-OF-CUSTODY RECORD**

COC Number: 116539-6.20.06  
Purchase Order Number:

The Shaw Group Inc.

**SHAW Environmental & Infrastructure, INC. - 5700 Thurston Ave Suite 116B - Virginia Beach, VA 23455 - (757) 363-7190**

Lab Location		Lab Reference #		Analysis Desired																	
Accutest		4409 Vineland Road Suite C-1, Orlando FL 32811 (407)426-6700																			
Project Name		Sample ID																			
Paradise Creek		Disposal Samples																			
Project #		Project Manager																			
116539		Natasha Kelley Sullivan (410)528-7598																			
Client		Project Manager																			
Shaw		Taylor Sword																			
Item No.	Sample Location	Date	Time	Lat	Long	Sample Description	Number of Containers	Full TOL + Net SW-546	PCB SW-546 8082	TPH DROMERO SW-546 8018											
1	PC-TP-116539-GRD04	06/20/06	1000			X Hard Pan/Wood Debris Soil	3 x 8 ounce, 2 x 4 ounce soil jar	X	X	X											
2	PC-TP-116539-GRD06	06/20/06	1500			X Hard Pan/Wood Debris Soil	3 x 8 ounce, 2 x 4 ounce soil jar	X	X	X											
3	PC-TP-116539-GRD08	06/20/06	1600			X Hard Pan/Wood Debris Soil	3 x 8 ounce, 2 x 4 ounce soil jar	X	X	X											
4	PC-TP-116539-GRD10	06/20/06	1100			X Hard Pan/Wood Debris Soil	3 x 8 ounce, 2 x 4 ounce soil jar	X	X	X											
5	PC-TP-116539-GRD11	06/20/06	1300			X Hard Pan/Wood Debris Soil	3 x 8 ounce, 2 x 4 ounce soil jar	X	X	X											
6	PC-TP-116539-GRD12	06/20/06	1400			X Hard Pan/Wood Debris Soil	3 x 8 ounce, 2 x 4 ounce soil jar	X	X	X											
7																					
8																					
9																					
10																					

Turnaround Time Required:	Sampled By:	Comments:	Laboratory Referral No.:
X 7 Day TAT	Brooke Mourain, SHAW		

Transfer Number	Transfer's Reimparted By	Date	Time	Transfer's Accepted By	Date	Time	Remarks
1	Brooke Mourain	6/21/06	1500	FX			<b>Summary Package</b> Deliverables: EDD Excel -- Fax results to Natasha Sullivan (410) 528-7599
2	FX						
3				Jorge Corral	6/22/06	19:00	
4							

2.4

**ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION**

ACCUTEST'S JOB NUMBER: F41620 CLIENT: SHAW PROJECT: Paradise Creek  
 DATE/TIME RECEIVED: 6/22/06 19:00 # OF COOLERS RECEIVED: 1 COOLER TEMPS: 2.4  
 METHOD OF DELIVERY: FEDEX UPS ACCUTEST COURIER GREYHOUND DELIVERY OTHER  
 AIRBILL NUMBERS: 857487398402

**COOLER INFORMATION**

- CUSTODY SEAL NOT PRESENT OR NOT INTACT
- CHAIN OF CUSTODY NOT RECEIVED (COC)
- ANALYSIS REQUESTED IS UNCLEAR OR MISSING
- SAMPLE DATES OR TIMES UNCLEAR OR MISSING
- TEMPERATURE CRITERIA NOT MET

**TRIP BLANK INFORMATION**

- TRIP BLANK NOT PROVIDED
- TRIP BLANK NOT ON COC
- TRIP BLANK INTACT
- TRIP BLANK NOT INTACT
- RECEIVED WATER TRIP BLANK
- RECEIVED SOIL TRIP BLANK

**MISC. INFORMATION**

NUMBER OF ENCORES? 0  
 NUMBER OF 5035 FIELD KITS? 0  
 NUMBER OR LAB FILTERED METALS? 0

SUMMARY OF COMMENTS: No date + time on soil jars.

**SAMPLE INFORMATION**

- SAMPLE LABELS PRESENT ON ALL BOTTLES
- CORRECT NUMBER OF CONTAINERS USED
- SAMPLE RECEIVED IMPROPERLY PRESERVED
- INSUFFICIENT VOLUME FOR ANALYSIS
- TIMES ON COC DONT MATCH LABEL
- ID'S ON COC DONT MATCH LABEL
- VOC VIALS HAVE HEADSPACE (MACRO BUBBLES)
- BOTTLES RECEIVED BUT ANALYSIS NOT REQUESTED
- NO BOTTLES RECEIVED FOR ANALYSIS REQUESTED
- UNCLEAR FILTERING INSTRUCTIONS
- UNCLEAR COMPOSITING INSTRUCTIONS
- SAMPLE CONTAINER(S) RECEIVED BROKEN
- % SOLIDS JAR NOT RECEIVED
- 5035 FIELD KIT FROZEN WITHIN 48 HOURS

31  
3



## GC/MS Volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Leachate Blank Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17038-LB	C0041830.D	10	06/29/06	KW	06/27/06	OP17038	VC1691

4.1  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Result	RL	MDL	Units	Q
71-43-2	Benzene	ND	10	5.0	ug/l	
108-90-7	Chlorobenzene	ND	20	5.0	ug/l	
67-66-3	Chloroform	ND	20	5.0	ug/l	
56-23-5	Carbon tetrachloride	ND	20	5.0	ug/l	
75-35-4	1,1-Dichloroethylene	ND	20	5.0	ug/l	
107-06-2	1,2-Dichloroethane	ND	20	5.0	ug/l	
106-46-7	p-Dichlorobenzene	ND	20	5.0	ug/l	
78-93-3	Methyl ethyl ketone	ND	100	25	ug/l	
127-18-4	Tetrachloroethylene	ND	20	5.0	ug/l	
79-01-6	Trichloroethylene	ND	20	5.0	ug/l	
75-01-4	Vinyl chloride	ND	10	5.0	ug/l	

CAS No.	Surrogate Recoveries	Limits	
1868-53-7	Dibromofluoromethane	108%	86-115%
17060-07-0	1,2-Dichloroethane-D4	105%	73-126%
2037-26-5	Toluene-D8	99%	86-112%
460-00-4	4-Bromofluorobenzene	105%	83-119%

# Blank Spike Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VC1691-BS	C0041829.D	10	06/29/06	KW	n/a	n/a	VC1691

4.2  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
71-43-2	Benzene	250	279	112	80-120
108-90-7	Chlorobenzene	250	250	100	82-112
67-66-3	Chloroform	250	273	109	78-118
56-23-5	Carbon tetrachloride	250	262	105	69-137
75-35-4	1,1-Dichloroethylene	250	269	108	67-134
107-06-2	1,2-Dichloroethane	250	262	105	68-121
106-46-7	p-Dichlorobenzene	250	252	101	77-113
78-93-3	Methyl ethyl ketone	1250	1100	88	58-127
127-18-4	Tetrachloroethylene	250	273	109	75-126
79-01-6	Trichloroethylene	250	277	111	80-115
75-01-4	Vinyl chloride	250	267	107	70-151

CAS No.	Surrogate Recoveries	BSP	Limits
1868-53-7	Dibromofluoromethane	105%	86-115%
17060-07-0	1,2-Dichloroethane-D4	107%	73-126%
2037-26-5	Toluene-D8	98%	86-112%
460-00-4	4-Bromofluorobenzene	101%	83-119%

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
(a) F41620-1AMS	C0041838.D	10	06/29/06	KW	n/a	n/a	VC1691
(a) F41620-1AMSD	C0041839.D	10	06/29/06	KW	n/a	n/a	VC1691
F41620-1A	C0041831.D	10	06/29/06	KW	06/27/06	OP17038	VC1691

The QC reported here applies to the following samples:

Method: SW846 8260B

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-1A ug/l	Spike Q ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
71-43-2	Benzene	ND	250	274	110	262	105	4	72-125/7
108-90-7	Chlorobenzene	ND	250	241	96	236	94	2	79-113/7
67-66-3	Chloroform	ND	250	263	105	258	103	2	75-120/8
56-23-5	Carbon tetrachloride	ND	250	247	99	252	101	2	56-145/12
75-35-4	1,1-Dichloroethylene	ND	250	250	100	251	100	0	61-137/15
107-06-2	1,2-Dichloroethane	ND	250	257	103	259	104	1	64-124/7
106-46-7	p-Dichlorobenzene	ND	250	230	92	228	91	1	74-112/7
78-93-3	Methyl ethyl ketone	ND	1250	1200	96	1210	97	1	51-128/10
127-18-4	Tetrachloroethylene	ND	250	243	97	247	99	2	70-126/9
79-01-6	Trichloroethylene	ND	250	266	106	256	102	4	73-117/10
75-01-4	Vinyl chloride	ND	250	263	105	254	102	3	63-161/18

CAS No.	Surrogate Recoveries	MS	MSD	F41620-1A	Limits
1868-53-7	Dibromofluoromethane	104%	103%	108%	86-115%
17060-07-0	1,2-Dichloroethane-D4	109%	111%	101%	73-126%
2037-26-5	Toluene-D8	97%	96%	100%	86-112%
460-00-4	4-Bromofluorobenzene	97%	97%	104%	83-119%

(a) SAMPLE NOT YET APPROVED BY LAB. DO NOT REPORT.

4.3  
4

# Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
(a) F41620-4ADUP	C0041837.D	10	06/29/06	KW	n/a	n/a	VC1691
F41620-4A	C0041834.D	10	06/29/06	KW	06/27/06	OP17038	VC1691

4.4  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-4A DUP		Q	RPD	Limits
		ug/l	Q ug/l			
71-43-2	Benzene	ND	ND		nc	
108-90-7	Chlorobenzene	ND	ND		nc	
67-66-3	Chloroform	ND	ND		nc	
56-23-5	Carbon tetrachloride	ND	ND		nc	
75-35-4	1,1-Dichloroethylene	ND	ND		nc	
107-06-2	1,2-Dichloroethane	ND	ND		nc	
106-46-7	p-Dichlorobenzene	ND	ND		nc	
78-93-3	Methyl ethyl ketone	ND	ND		nc	
127-18-4	Tetrachloroethylene	ND	ND		nc	
79-01-6	Trichloroethylene	ND	ND		nc	
75-01-4	Vinyl chloride	ND	ND		nc	

CAS No.	Surrogate Recoveries	DUP	F41620-4A	Limits
1868-53-7	Dibromofluoromethane	106%	106%	86-115%
17060-07-0	1,2-Dichloroethane-D4	105%	103%	73-126%
2037-26-5	Toluene-D8	100%	99%	86-112%
460-00-4	4-Bromofluorobenzene	101%	103%	83-119%

(a) SAMPLE NOT YET APPROVED BY LAB. DO NOT REPORT.



## GC/MS Semi-volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Leachate Blank Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17054-LB	L032377.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675

The QC reported here applies to the following samples:

Method: SW846 8270C

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Result	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	50	20	ug/l	
	3&4-Methylphenol	ND	50	20	ug/l	
87-86-5	Pentachlorophenol	ND	250	100	ug/l	
95-95-4	2,4,5-Trichlorophenol	ND	50	20	ug/l	
88-06-2	2,4,6-Trichlorophenol	ND	50	20	ug/l	
106-46-7	1,4-Dichlorobenzene	ND	50	10	ug/l	
121-14-2	2,4-Dinitrotoluene	ND	50	20	ug/l	
118-74-1	Hexachlorobenzene	ND	50	10	ug/l	
87-68-3	Hexachlorobutadiene	ND	50	20	ug/l	
67-72-1	Hexachloroethane	ND	50	20	ug/l	
98-95-3	Nitrobenzene	ND	50	10	ug/l	
110-86-1	Pyridine	ND	100	30	ug/l	

CAS No.	Surrogate Recoveries	Limits	
367-12-4	2-Fluorophenol	58%	19-90%
4165-62-2	Phenol-d5	39%	10-68%
118-79-6	2,4,6-Tribromophenol	81%	36-137%
4165-60-0	Nitrobenzene-d5	75%	49-119%
321-60-8	2-Fluorobiphenyl	77%	45-118%
1718-51-0	Terphenyl-d14	81%	46-135%

5.1  
5

# Blank Spike Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17054-LBS	L032376.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675

The QC reported here applies to the following samples:

Method: SW846 8270C

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
95-48-7	2-Methylphenol	500	305	61	48-90
	3&4-Methylphenol	1000	559	56	43-94
87-86-5	Pentachlorophenol	1000	784	78	62-120
95-95-4	2,4,5-Trichlorophenol	500	424	85	67-103
88-06-2	2,4,6-Trichlorophenol	500	414	83	68-104
106-46-7	1,4-Dichlorobenzene	500	366	73	46-96
121-14-2	2,4-Dinitrotoluene	500	448	90	64-107
118-74-1	Hexachlorobenzene	500	432	86	69-103
87-68-3	Hexachlorobutadiene	500	394	79	48-100
67-72-1	Hexachloroethane	500	359	72	41-98
98-95-3	Nitrobenzene	500	400	80	60-102
110-86-1	Pyridine	500	131	26	17-65

CAS No.	Surrogate Recoveries	BSP	Limits
367-12-4	2-Fluorophenol	45%	19-90%
4165-62-2	Phenol-d5	28%	10-68%
118-79-6	2,4,6-Tribromophenol	92%	36-137%
4165-60-0	Nitrobenzene-d5	84%	49-119%
321-60-8	2-Fluorobiphenyl	85%	45-118%
1718-51-0	Terphenyl-d14	89%	46-135%

5.2  
5

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17054-MS	L032382.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675
OP17054-MSD	L032383.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675
F41620-3A	L032381.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675

The QC reported here applies to the following samples:

Method: SW846 8270C

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-3A ug/l	Spike Q	ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
95-48-7	2-Methylphenol	ND	500	298	60	321	64	7	40-102/25	
	3&4-Methylphenol	ND	1000	556	56	586	59	5	39-97/24	
87-86-5	Pentachlorophenol	ND	1000	826	83	857	86	4	53-128/22	
95-95-4	2,4,5-Trichlorophenol	ND	500	423	85	433	87	2	56-110/19	
88-06-2	2,4,6-Trichlorophenol	ND	500	418	84	430	86	3	55-112/19	
106-46-7	1,4-Dichlorobenzene	ND	500	357	71	381	76	7	43-102/24	
121-14-2	2,4-Dinitrotoluene	ND	500	443	89	445	89	0	60-108/18	
118-74-1	Hexachlorobenzene	ND	500	449	90	464	93	3	66-106/16	
87-68-3	Hexachlorobutadiene	ND	500	370	74	402	80	8	46-107/26	
67-72-1	Hexachloroethane	ND	500	331	66	369	74	11	39-105/25	
98-95-3	Nitrobenzene	ND	500	404	81	426	85	5	50-107/25	
110-86-1	Pyridine	ND	500	118	24	139	28	16	19-77/41	

CAS No.	Surrogate Recoveries	MS	MSD	F41620-3A	Limits
367-12-4	2-Fluorophenol	43%	47%	43%	19-90%
4165-62-2	Phenol-d5	27%	29%	26%	10-68%
118-79-6	2,4,6-Tribromophenol	93%	98%	99%	36-137%
4165-60-0	Nitrobenzene-d5	81%	87%	87%	49-119%
321-60-8	2-Fluorobiphenyl	85%	88%	89%	45-118%
1718-51-0	Terphenyl-d14	84%	86%	93%	46-135%

# Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17054-DUP	L032379.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675
F41620-1A	L032378.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675

The QC reported here applies to the following samples:

Method: SW846 8270C

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-1A		Q	RPD	Limits
		ug/l	DUP Q ug/l			
95-48-7	2-Methylphenol	ND	ND		nc	
	3&4-Methylphenol	ND	ND		nc	
87-86-5	Pentachlorophenol	ND	ND		nc	
95-95-4	2,4,5-Trichlorophenol	ND	ND		nc	
88-06-2	2,4,6-Trichlorophenol	ND	ND		nc	
106-46-7	1,4-Dichlorobenzene	ND	ND		nc	
121-14-2	2,4-Dinitrotoluene	ND	ND		nc	
118-74-1	Hexachlorobenzene	ND	ND		nc	
87-68-3	Hexachlorobutadiene	ND	ND		nc	
67-72-1	Hexachloroethane	ND	ND		nc	
98-95-3	Nitrobenzene	ND	ND		nc	
110-86-1	Pyridine	ND	ND		nc	

CAS No.	Surrogate Recoveries	DUP	F41620-1A	Limits
367-12-4	2-Fluorophenol	44%	41%	19-90%
4165-62-2	Phenol-d5	27%	26%	10-68%
118-79-6	2,4,6-Tribromophenol	98%	91%	36-137%
4165-60-0	Nitrobenzene-d5	84%	81%	49-119%
321-60-8	2-Fluorobiphenyl	86%	83%	45-118%
1718-51-0	Terphenyl-d14	91%	86%	46-135%

5.4  
5



## GC Volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Method Blank Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GUV1317-MB	UV022700.D1		06/23/06	MM	n/a	n/a	GUV1317

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-1, F41620-2, F41620-3, F41620-4, F41620-6

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	5.0	2.5	mg/kg	

CAS No.	Surrogate Recoveries		Limits
460-00-4	4-Bromofluorobenzene	88%	62-135%
98-08-8	aaa-Trifluorotoluene	84%	65-118%

61  
6

# Method Blank Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GUV1318-MB	UV022731.D1		06/26/06	MM	n/a	n/a	GUV1318

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-5

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	5.0	2.5	mg/kg	

CAS No.	Surrogate Recoveries	Limits
460-00-4	4-Bromofluorobenzene	103% 62-135%
98-08-8	aaa-Trifluorotoluene	91% 65-118%

6.1



# Blank Spike Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GUV1317-BS	UV022699.D1		06/23/06	MM	n/a	n/a	GUV1317

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-1, F41620-2, F41620-3, F41620-4, F41620-6

62  
6

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH-GRO (C6-C10)	20	18.0	90	66-122

CAS No.	Surrogate Recoveries	BSP	Limits
460-00-4	4-Bromofluorobenzene	105%	62-135%
98-08-8	aaa-Trifluorotoluene	101%	65-118%

# Blank Spike Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GUV1318-BS	UV022730.D1		06/26/06	MM	n/a	n/a	GUV1318

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-5

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH-GRO (C6-C10)	20	17.6	88	66-122

CAS No.	Surrogate Recoveries	BSP	Limits
460-00-4	4-Bromofluorobenzene	108%	62-135%
98-08-8	aaa-Trifluorotoluene	100%	65-118%

62

6

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F41620-1MS	UV022724.D1		06/23/06	MM	n/a	n/a	GUV1317
F41620-1MSD	UV022725.D1		06/23/06	MM	n/a	n/a	GUV1317
F41620-1 <sup>a</sup>	UV022701.D1		06/23/06	MM	n/a	n/a	GUV1317

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-1, F41620-2, F41620-3, F41620-4, F41620-6

CAS No.	Compound	F41620-1 mg/kg	Spike Q	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH-GRO (C6-C10)	ND	43.6	26.9	62	35.1	80	26*	37-142/17

CAS No.	Surrogate Recoveries	MS	MSD	F41620-1	Limits
460-00-4	4-Bromofluorobenzene	55%*	113%	112%	62-135%
98-08-8	aaa-Trifluorotoluene	59%*	92%	99%	65-118%

(a) Sample was received in a bulk container but was not preserved within 48 hours of sampling.

63

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F41623-1MS	UV022742.D1		06/26/06	MM	n/a	n/a	GUV1318
F41623-1MSD	UV022743.D1		06/26/06	MM	n/a	n/a	GUV1318
F41623-1	UV022734.D1		06/26/06	MM	n/a	n/a	GUV1318

The QC reported here applies to the following samples:

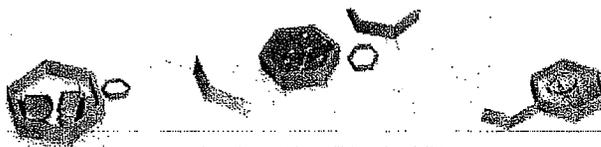
Method: SW846 8015

F41620-5

CAS No.	Compound	F41623-1 mg/kg	Spike Q	mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH-GRO (C6-C10)	ND		33.6	27.6	82	26.6	79	4	37-142/17

CAS No.	Surrogate Recoveries	MS	MSD	F41623-1	Limits
460-00-4	4-Bromofluorobenzene	105%	104%	105%	62-135%
98-08-8	aaa-Trifluorotoluene	93%	84%	91%	65-118%

63  
6



## GC Semi-volatiles

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## QC Data Summaries

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7

Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Method Blank Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17013-MB	ST48602.D	1	06/27/06	ME	06/26/06	OP17013	GST1418

The QC reported here applies to the following samples:

Method: SW846 8082

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	8.3	ug/kg	
11104-28-2	Aroclor 1221	ND	17	13	ug/kg	
11141-16-5	Aroclor 1232	ND	17	13	ug/kg	
53469-21-9	Aroclor 1242	ND	17	8.3	ug/kg	
12672-29-6	Aroclor 1248	ND	17	8.3	ug/kg	
11097-69-1	Aroclor 1254	ND	17	8.3	ug/kg	
11096-82-5	Aroclor 1260	ND	17	8.3	ug/kg	
11100-14-4	Aroclor 1268	ND	17	8.3	ug/kg	
	Total PCBs	ND	33		ug/kg	

CAS No.	Surrogate Recoveries	Limits	
877-09-8	Tetrachloro-m-xylene	88%	52-136%
2051-24-3	Decachlorobiphenyl	107%	49-148%

7.1  
7

# Method Blank Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17013-MB	ST48638.D	1	06/28/06	ME	06/26/06	OP17013	GST1419

The QC reported here applies to the following samples:

Method: SW846 8082

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	8.3	ug/kg	
11104-28-2	Aroclor 1221	ND	17	13	ug/kg	
11141-16-5	Aroclor 1232	ND	17	13	ug/kg	
53469-21-9	Aroclor 1242	ND	17	8.3	ug/kg	
12672-29-6	Aroclor 1248	ND	17	8.3	ug/kg	
11097-69-1	Aroclor 1254	ND	17	8.3	ug/kg	
11096-82-5	Aroclor 1260	ND	17	8.3	ug/kg	
11100-14-4	Aroclor 1268	ND	17	8.3	ug/kg	
	Total PCBs	ND	33		ug/kg	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	98%	52-136%
2051-24-3	Decachlorobiphenyl	96%	49-148%

7.1  
7

# Method Blank Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17034-MB	LL11094.D	1	06/29/06	VS	06/27/06	OP17034	GLL410

The QC reported here applies to the following samples:

Method: SW846 8015 M

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries		Limits
84-15-1	o-Terphenyl	107%	57-115%

7.1  
7

# Leachate Blank Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17053-LB	TT00796.D	1	06/29/06	AA	06/28/06	OP17053	GTT35

The QC reported here applies to the following samples:

Method: SW846 8081A

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Result	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	0.50	0.20	ug/l	
12789-03-6	Chlordane	ND	5.0	2.5	ug/l	
72-20-8	Endrin	ND	1.0	0.40	ug/l	
76-44-8	Heptachlor	ND	0.50	0.20	ug/l	
1024-57-3	Heptachlor epoxide	ND	0.50	0.20	ug/l	
72-43-5	Methoxychlor	ND	1.0	0.40	ug/l	
8001-35-2	Toxaphene	ND	25	15	ug/l	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	99%	60-138%
2051-24-3	Decachlorobiphenyl	93%	31-148%

72  
7

# Blank Spike Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17053-LBS	TT00795.D	1	06/29/06	AA	06/28/06	OP17053	GTT35

The QC reported here applies to the following samples:

Method: SW846 8081A

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
58-89-9	gamma-BHC (Lindane)	5	4.3	86	69-137
72-20-8	Endrin	5	5.3	106	78-134
76-44-8	Heptachlor	5	4.2	84	62-137
1024-57-3	Heptachlor epoxide	5	4.6	92	74-130
72-43-5	Methoxychlor	5	5.4	108	77-131

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	79%	60-138%
2051-24-3	Decachlorobiphenyl	96%	31-148%

7.3  
7

# Blank Spike Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17013-BS	ST48601.D	1	06/27/06	ME	06/26/06	OP17013	GST1418

The QC reported here applies to the following samples:

Method: SW846 8082

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Spike ug/kg	BSP ug/kg	BSP %	Limits
12674-11-2	Aroclor 1016	133	134	101	75-123
11096-82-5	Aroclor 1260	133	147	110	72-124

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	102%	52-136%
2051-24-3	Decachlorobiphenyl	120%	49-148%

7.3  
7

# Blank Spike Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17034-BS	LL11093.D	1	06/29/06	VS	06/27/06	OP17034	GLL410

The QC reported here applies to the following samples:

Method: SW846 8015 M

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH (C10-C28)	33.3	26.7	80	62-114

CAS No.	Surrogate Recoveries	BSP	Limits
84-15-1	o-Terphenyl	101%	57-115%

73  
7

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17053-MS	TT00803.D	1	06/29/06	AA	06/28/06	OP17053	GTT35
OP17053-MSD	TT00804.D	1	06/29/06	AA	06/28/06	OP17053	GTT35
F41620-5A	TT00802.D	1	06/29/06	AA	06/28/06	OP17053	GTT35

The QC reported here applies to the following samples:

Method: SW846 8081A

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-5A ug/l	Spike Q ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
58-89-9	gamma-BHC (Lindane)	ND	5	5.7	114	5.5	110	4	75-140/21
72-20-8	Endrin	ND	5	6.5	130	6.0	120	8	72-149/21
76-44-8	Heptachlor	ND	5	5.5	110	5.2	104	6	74-136/25
1024-57-3	Heptachlor epoxide	ND	5	5.6	112	5.4	108	4	75-138/21
72-43-5	Methoxychlor	ND	5	6.1	122	5.9	118	3	69-145/27

CAS No.	Surrogate Recoveries	MS	MSD	F41620-5A	Limits
877-09-8	Tetrachloro-m-xylene	100%	100%	99%	60-138%
2051-24-3	Decachlorobiphenyl	71%	69%	59%	31-148%

7.4  
7

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17013-MS	ST48656.D	1	06/28/06	ME	06/26/06	OP17013	GST1419
OP17013-MSD	ST48657.D	1	06/28/06	ME	06/26/06	OP17013	GST1419
F41636-7	ST48655.D	1	06/28/06	ME	06/26/06	OP17013	GST1419

The QC reported here applies to the following samples:

Method: SW846 8082

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	F41636-7 ug/kg	Spike Q	ug/kg	MS ug/kg	MS %	MSD ug/kg	MSD %	RPD	Limits Rec/RPD
12674-11-2	Aroclor 1016	17 U	134	88.6	66	93.8	68	6	54-138/22	
11096-82-5	Aroclor 1260	17 U	134	88.1	66	86.2	63	2	46-138/21	

CAS No.	Surrogate Recoveries	MS	MSD	F41636-7	Limits
877-09-8	Tetrachloro-m-xylene	67%	65%	56%	52-136%
2051-24-3	Decachlorobiphenyl	59%	55%	52%	49-148%

7.4  
7

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17034-MS	LL11098.D	20	06/29/06	VS	06/27/06	OP17034	GLL410
OP17034-MSD	LL11099.D	10	06/29/06	VS	06/27/06	OP17034	GLL410
F41620-2	LL11097.D	8	06/29/06	VS	06/27/06	OP17034	GLL410

The QC reported here applies to the following samples:

Method: SW846 8015 M

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	F41620-2 mg/kg	Spike Q	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH (C10-C28)	570	47.3	1020	952* a	396	367* a	88*	31-136/36

CAS No.	Surrogate Recoveries	MS	MSD	F41620-2	Limits
84-15-1	o-Terphenyl	0%* b	88%	86%	57-115%

(a) Outside control limits due to high level in sample relative to spike amount.

(b) Outside control limits due to dilution.

7.4  
7

# Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17053-DUP	TT00798.D	1	06/29/06	AA	06/28/06	OP17053	GTT35
F41620-1A	TT00797.D	1	06/29/06	AA	06/28/06	OP17053	GTT35

The QC reported here applies to the following samples:

Method: SW846 8081A

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-1A		Q	RPD	Limits
		ug/l	DUP Q ug/l			
58-89-9	gamma-BHC (Lindane)	ND	ND		nc	
12789-03-6	Chlordane	ND	ND		nc	
72-20-8	Endrin	ND	ND		nc	
76-44-8	Heptachlor	ND	ND		nc	
1024-57-3	Heptachlor epoxide	ND	ND		nc	
72-43-5	Methoxychlor	ND	ND		nc	

CAS No.	Surrogate Recoveries	DUP	F41620-1A	Limits
877-09-8	Tetrachloro-m-xylene	98%	100%	60-138%
2051-24-3	Decachlorobiphenyl	98%	98%	31-148%

7.5  
7



## Metals Analysis

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## QC Data Summaries



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### Includes the following where applicable:

- Method Blank Summaries
- Matrix Spike and Duplicate Summaries
- Blank Spike and Lab Control Sample Summaries
- Serial Dilution Summaries

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F41620  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP9826  
Matrix Type: LEACHATE

Methods: SW846 6010B  
Units: mg/l

Prep Date: 06/27/06 06/27/06 06/27/06

Metal	RL	IDL	MB raw	final	MB raw	final	MB raw	final
Aluminum	0.20	.018						
Antimony	0.0060	.0034						
Arsenic	0.020	.0028	-0.0012	<0.020(a)	-0.011	<0.020(a)	-0.012	<0.020(a)
Barium	1.0	.0004	0.00019	<1.0	0.0057	<1.0	0.014	<1.0
Beryllium	0.0050	.0004						
Cadmium	0.0050	.0002	-0.000010	<0.0050	0.0	<0.0050	0.00013	<0.0050
Calcium	5.0	.042						
Chromium	0.010	.0006	-0.000020	<0.010	0.0034	<0.010	-0.000070	<0.010
Cobalt	0.050	.0006						
Copper	0.025	.0009						
Iron	0.30	.012						
Lead	0.050	.0017	0.0013	<0.050	0.00023	<0.050	0.0024	<0.050
Magnesium	5.0	.0043						
Manganese	0.015	.0006						
Molybdenum	0.050	.0013						
Nickel	0.040	.0008						
Potassium	10	.01						
Selenium	0.10	.002	-0.00086	<0.10(b)	0.032	<0.10(b)	0.026	<0.10(b)
Silver	0.010	.0009	-0.00032	<0.010	-0.000010	<0.010	-0.00062	<0.010
Sodium	10	.5						
Thallium	0.010	.0023						
Tin	0.050	.0031						
Vanadium	0.050	.0006						
Zinc	0.10	.0013						

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested  
(a) Elevated RL/MDL due to negative bias of Method Blank.  
(b) Elevated RL/MDL due to positive bias of Method Blank.

8.1.1  
8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	F41620-1A Original	DUP	RPD	QC Limits	F41620-1A Original MS	Spikelot MPFLICP1 % Rec	QC Limits
Aluminum							
Antimony							
Arsenic	0.0	0.0 (a)	NC	0-20	0.0	2.0 (a)	100.0 80-120
Barium	2.1	2.1	0.0	0-20	2.1	4.1	2.0 100.0 80-120
Beryllium							
Cadmium	0.058	0.058	0.0	0-20	0.058	0.11	0.050 104.0 80-120
Calcium							
Chromium	0.019	0.018	5.4	0-20	0.019	0.21	0.20 95.5 80-120
Cobalt							
Copper							
Iron							
Lead	1.6	1.6	0.0	0-20	1.6	2.1	0.50 100.0 80-120
Magnesium							
Manganese							
Molybdenum							
Nickel							
Potassium							
Selenium	0.036	0.035(b)	2.8	0-20	0.036	2.2 (b)	2.0 108.2 80-120
Silver	0.0	0.0	NC	0-20	0.0	0.058	0.050 116.0 80-120
Sodium							
Thallium							
Tin							
Vanadium							
Zinc							

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested  
 (a) Elevated RL/MDL due to negative bias of Method Blank.  
 (b) Elevated RL/MDL due to positive bias of Method Blank.

8.12  
**8**

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	F41620-1A Original	MSD	SpikeLot MPFLICP1	% Rec	MSD RPD	QC Limit	Original	DUP	RPD	QC Limits
Aluminum										
Antimony										
Arsenic	0.0	2.0 (a)	2.0	100.0	0.0	20				
Barium	2.1	4.1	2.0	100.0	0.0	20				
Beryllium										
Cadmium	0.058	0.11	0.050	104.0	0.0	20				
Calcium										
Chromium	0.019	0.21	0.20	95.5	0.0	20				
Cobalt										
Copper										
Iron										
Lead	1.6	2.1	0.50	100.0	0.0	20				
Magnesium										
Manganese										
Molybdenum										
Nickel										
Potassium										
Selenium	0.036	2.2 (b)	2.0	108.2	0.0	20				
Silver	0.0	0.057	0.050	114.0	1.7	20				
Sodium										
Thallium										
Tin										
Vanadium										
Zinc										

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested  
 (a) Elevated RL/MDL due to negative bias of Method Blank.  
 (b) Elevated RL/MDL due to positive bias of Method Blank.

8.1.2

8

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	BSP Result	Spikelet MPFLICP1 % Rec	QC Limits	BSP Result	Spikelet MPFLICP1 % Rec	QC Limits
Aluminum						
Antimony						
Arsenic	2.0 (a)	2.0 100.0	80-120	2.0 (a)	2.0 100.0	80-120
Barium	2.0	2.0 100.0	80-120	2.0	2.0 100.0	80-120
Beryllium						
Cadmium	0.050	0.050 100.0	80-120	0.049	0.050 98.0	80-120
Calcium						
Chromium	0.21	0.20 105.0	80-120	0.20	0.20 100.0	80-120
Cobalt						
Copper						
Iron						
Lead	0.50	0.50 100.0	80-120	0.51	0.50 102.0	80-120
Magnesium						
Manganese						
Molybdenum						
Nickel						
Potassium						
Selenium	2.0 (b)	2.0 100.0	80-120	2.2 (b)	2.0 110.0	80-120
Silver	0.051	0.050 102.0	80-120	0.058	0.050 116.0	80-120
Sodium						
Thallium						
Tin						
Vanadium						
Zinc						

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested  
 (a) Elevated RL/MDL due to negative bias of Method Blank.  
 (b) Elevated RL/MDL due to positive bias of Method Blank.

8.1.3  
**8**

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 06/27/06

Metal	BSP Result	Spike/lot MPFLICP1 % Rec	QC Limits
Aluminum			
Antimony			
Arsenic	2.1 (a)	2.0 105.0	80-120
Barium	2.1	2.0 105.0	80-120
Beryllium			
Cadmium	0.050	0.050 100.0	80-120
Calcium			
Chromium	0.21	0.20 105.0	80-120
Cobalt			
Copper			
Iron			
Lead	0.50	0.50 100.0	80-120
Magnesium			
Manganese			
Molybdenum			
Nickel			
Potassium			
Selenium	2.2 (b)	2.0 110.0	80-120
Silver	0.052	0.050 104.0	80-120
Sodium			
Thallium			
Tin			
Vanadium			
Zinc			

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes

(\*) Outside of QC limits

(anr) Analyte not requested

(a) Elevated RL/MDL due to negative bias of Method Blank.

(b) Elevated RL/MDL due to positive bias of Method Blank.

8.1.3  
**8**

SERIAL DILUTION RESULTS SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: ug/l

Prep Date: 06/27/06

Metal	F41620-1A Original	SDL 1:5	RPD	QC Limits
Aluminum				
Antimony				
Arsenic	0.00	0.00	NC	0-10
Barium	2060	2100	2.4	0-10
Beryllium				
Cadmium	58.2	61.0	4.7	0-10
Calcium				
Chromium	18.6	20.6	11.3 (a)	0-10
Cobalt				
Copper				
Iron				
Lead	1610	1680	4.6	0-10
Magnesium				
Manganese				
Molybdenum				
Nickel				
Potassium				
Selenium	36.3	35.1	3.4	0-10
Silver	0.00	0.00	NC	0-10
Sodium				
Thallium				
Tin				
Vanadium				
Zinc				

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes

(\*) Outside of QC limits

(anr) Analyte not requested

(a) Percent difference acceptable due to low initial sample concentration (< 50 times IDL).

8.1.4  
**8**

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F41620  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP9828  
Matrix Type: LEACHATE

Methods: SW846 7470A  
Units: mg/l

Prep Date: 06/27/06 06/27/06 06/27/06

Metal	RL	IDL	MB raw	final	MB raw	final	MB raw	final
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Mercury 0.0010 .00008 -0.000023<0.0010 -0.00013 <0.010 -0.00043 <0.010

Associated samples MP9828: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

8.2.1

8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9828  
 Matrix Type: LEACHATE

Methods: SW846 7470A  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	F41620-1A Original	DUP	RPD	QC Limits	F41620-1A Original MS	Spike lot	HGFLWS1	% Rec	QC Limits
Mercury	0.0	0.0	NC	0-20	0.0	0.032	0.030	106.7	80-120

Associated samples MP9828: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested

8.2.2  
 8

**SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY**

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9828  
 Matrix Type: LEACHATE

Methods: SW846 7470A  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.0030	0.0030	100.0	80-120	0.031	0.030	103.3	80-120

Associated samples MP9828: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

8.2.3

8

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41620  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP9828  
Matrix Type: LEACHATE

Methods: SW846 7470A  
Units: mg/l

Prep Date: 06/27/06

Metal	BSP Result	SpikeLot HGFLWS1	% Rec	QC Limits
Mercury	0.031	0.030	103.3	80-120

Associated samples MP9828: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

823

8



## General Chemistry

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank and Blank Spike Summaries
- Duplicate Summaries
- Matrix Spike Summaries



METHOD BLANK AND SPIKE RESULTS SUMMARY  
GENERAL CHEMISTRY

Login Number: F41620  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

Analyte	Batch ID	RL	MB Result	Units	Spike Amount	BSP Result	BSP %Recov	QC Limits
Cyanide Reactivity	GP8051/GN21169			mg/kg	5.0	0.18	3.5	0-100%
Cyanide Reactivity	GP8051/GN21169	1.5	<1.5	mg/kg	5.0	0.31	6.2	0-100%
Sulfide Reactivity	GP8053/GN21170			mg/kg	53.7	3.0	5.6	0-100%
Sulfide Reactivity	GP8053/GN21170	50	<50	mg/kg	53.7	5.0	9.3	0-100%

Associated Samples:

Batch GP8051: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6  
Batch GP8053: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

9.1



**DUPLICATE RESULTS SUMMARY  
GENERAL CHEMISTRY**

Login Number: F41620  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

Analyte	Batch ID	QC Sample	Units	Original Result	DUP Result	RPD	QC Limits
Corrosivity as pH	GN21100	F41620-1		7.4	7.6		0-%
Ignitability (Flashpoint)	GN21105	F41620-1	Deg. F	>200	0(a)	0.0	0-38%
Solids, Percent	GN21093	F41611-1	%	86.3	86	0.3	0-30%

Associated Samples:

Batch GN21093: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

Batch GN21100: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

Batch GN21105: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

(a) Not ignitable.

9.2

9



## Misc. Forms

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### Custody Documents and Other Forms

(Accutest Laboratories Gulf Coast, Inc.)

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Includes the following where applicable:

- Chain of Custody



# CHAIN OF CUSTODY

4405 VINELAND ROAD • SUITE C-15  
ORLANDO, FL 32811  
TEL: 407-425-6700 • FAX: 407-425-0707

ACCUTEST JOB #:  
ACCUTEST QUOTE #:

CLIENT INFORMATION		FACILITY INFORMATION				ANALYTICAL INFORMATION				MATRIX CODES	
NAME: <u>F41620</u>		PROJECT NAME: <u>Accutest SF</u>				ANALYTICAL INFORMATION				DW - DRINKING WATER GW - GROUND WATER WW - WASTE WATER SO - SOIL SL - SLUDGE OL - OIL LO - OTHER LIQUID SOL - OTHER SOLID	
ADDRESS:		LOCATION:									
CITY, STATE ZIP:		PROJECT NO.:									
SEND REPORT TO: PHONE #:		FAX #:									
ACCUTEST SAMPLE #	FIELD ID / POINT OF COLLECTION	COLLECTION			MATRIX	# OF BOTTLES	PRESERVATION				LAB USE ONLY
		DATE	TIME	SAMPLED BY:			ACI	INCH	RING	INCH	
	<u>F41620-1</u>	<u>06/26/06</u>	<u>10:00</u>		<u>S</u>						
	<u>-2</u>		<u>15:00</u>								
	<u>-3</u>		<u>16:00</u>								
	<u>-4</u>		<u>11:00</u>								
	<u>-5</u>		<u>13:00</u>								
	<u>-6</u>		<u>14:00</u>								
<input type="checkbox"/> STANDARD <input type="checkbox"/> 48 HOUR RUSH <input type="checkbox"/> 24 HOUR EMERGENCY <input type="checkbox"/> OTHER <u>06/29/06</u> <u>Please</u> EMERGENCY OR RUSH IS FAX DATA UNLESS PREVIOUSLY APPROVED		<input checked="" type="checkbox"/> STANDARD <input type="checkbox"/> COMMERCIAL "B" <input type="checkbox"/> DISK DELIVERABLE <input type="checkbox"/> STATE FORMS <input type="checkbox"/> OTHER (SPECIFY) _____				COMMENTS/REMARKS: <u>A16C</u> <u>READ</u>					
SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION, INCLUDING COURIER DELIVERY											
RELINQUISHED BY: <u>[Signature]</u>	DATE TIME: <u>06/29/06-1830</u>	RECEIVED BY: <u>1. [Signature]</u>	RECEIVED BY: <u>2. [Signature]</u>	RELINQUISHED BY:	DATE TIME:	RECEIVED BY: <u>3. [Signature]</u>	RECEIVED BY: <u>4. [Signature]</u>	RELINQUISHED BY:	DATE TIME:	RECEIVED BY:	RECEIVED BY:
RELINQUISHED BY:	DATE TIME:	RECEIVED BY:	RECEIVED BY:	RELINQUISHED BY:	DATE TIME:	RECEIVED BY:	RECEIVED BY:	RELINQUISHED BY:	DATE TIME:	RECEIVED BY:	RECEIVED BY:
RELINQUISHED BY:	DATE TIME:	RECEIVED BY:	RECEIVED BY:	SEAL #	PRESERVE WHERE APPLICABLE <input type="checkbox"/>	ON ICE <input checked="" type="checkbox"/>	TEMPERATURE <u>32c</u>				

10.1 10

F41620: Chain of Custody

Page 1 of 2

Accutest Laboratories Gulf Coast, Inc.



SAMPLE RECEIPT LOG

JOB #: F41620 DATE/TIME RECEIVED: 6/24/06 INITIALS: BAJ

Table with columns: SAMPLE or FIELD ID, BOTTLE #, DATE SAMPLED, MATRIX, VOLUME, LOCATION, PRESERV., PH. Row 1: 1-6, 1, 6/24/06, SO, 40±, IP, 1,2,3,4,5,6 U, <, >12, NA.

Condition/Variance (Circle "Y" for yes and "N" for no or NA. If "N" is circled, see variance for explanation): 1. Sample received in undamaged condition. 2. Sample received with proper pH. 3. Sample volume sufficient for analysis. 4. Chain of Custody matches sample IDs and analysis on containers. 5. Custody seal received intact and tamper not evident on cooler. 6. Custody seal received intact and tamper not evident on bottles.

LOCATION: W: Walk-in VR: Volatile Refrig. SUB: Subcontract EF: Encore Freezer PRESERVATIVES: 1: None 2: HCL 3: HNO3 4: H2SO4 5: NAOH 6: Other

pH of waters checked excluding volatiles pH of solids N/A Delivery method: Courier Tracking#: 1ed. 04 COOLER TEMP: 32C COOLER TEMP: 32C

Method of sample disposal: (circle one) Accutest disposal Hold Return to Client Form: SM012, Rev.12/14/04, OAO



## GC Semi-volatiles

### QC Data Summaries

(Accutest Laboratories Gulf Coast, Inc.)

Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

## Method Blank Summary

Page 1 of 1

Job Number: F41620  
Account: ALSE Accutest Laboratories Southeast, Inc.  
Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6063-MB	DD57046.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067

The QC reported here applies to the following samples:

Method: SW846 8151

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Result	RL	MDL	Units	Q
94-75-7	2,4-D	ND	1.0	0.50	ug/l	
93-72-1	2,4,5-TP (Silvex)	ND	0.20	0.15	ug/l	

CAS No.	Surrogate Recoveries	Limits
19719-28-9	2,4-DCAA	116% 23-171%

11.1

11

# Blank Spike Summary

Job Number: F41620  
Account: ALSE Accutest Laboratories Southeast, Inc.  
Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6063-BS	DD57047.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067

The QC reported here applies to the following samples:

Method: SW846 8151

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
94-75-7	2,4-D	2	2.3	115	44-152
93-72-1	2,4,5-TP (Silvex)	0.4	0.34	85	41-142

CAS No.	Surrogate Recoveries	BSP	Limits
19719-28-9	2,4-DCAA	125%	23-171%

112  
11

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ALSE Accutest Laboratories Southeast, Inc.  
 Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6063-MS	DD57049.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067
OP6063-MSD	DD57050.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067
F41620-1A	DD57048.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067

The QC reported here applies to the following samples:

Method: SW846 8151

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-1A ug/l	Spike Q ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
94-75-7	2,4-D	ND	2	2.6	130	2.0	100	26*	28-144/25
93-72-1	2,4,5-TP (Silvex)	ND	0.4	0.43	108	0.39	98	10	25-137/24

CAS No.	Surrogate Recoveries	MS	MSD	F41620-1A	Limits
19719-28-9	2,4-DCAA	130%	121%	134%	23-171%

11.3  
11

LabLink Analytical Data Report  
Paradise Creek 116539

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261.6/96)\*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F41620-2	Aroclor 1016	12674-11-2	SW846 8082	ND		ug/kg	94		4	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	Aroclor 1221	11104-28-2	SW846 8082	ND		ug/kg	94		4	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	Aroclor 1232	11141-16-5	SW846 8082	ND		ug/kg	94		4	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	Aroclor 1242	53469-21-9	SW846 8082	ND		ug/kg	94		4	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	Aroclor 1248	12672-29-6	SW846 8082	ND		ug/kg	94		4	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	Aroclor 1254	11097-69-1	SW846 8082	ND		ug/kg	94		4	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	Aroclor 1260 (b)	11096-82-5	SW846 8082	391	J	ug/kg	94		4	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	TPH (C10-C28) (c)		SW846 8015 M	570		mg/kg	95		8	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	Aroclor 1268 (b)	11100-14-4	SW846 8082	185	J	ug/kg	94		4	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	Total PCBs		SW846 8082	577		ug/kg	190		4	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	o-Terphenyl	84-15-1	SW846 8015 M	86		%	190		8	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	Tetrachloro-m-xylene	877-09-8	SW846 8082	83		%			4	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	Decachlorobiphenyl	2051-24-3	SW846 8082	146		%			4	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	TPH-GRO (C6-C10)		SW846 8015	ND		mg/kg	8.9		1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	4-Bromofluorobenzene	460-00-4	SW846 8015	115		%			1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	aaa-Trifluorotoluene	98-08-8	SW846 8015	92		%			1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	Ignitability (Flashpoint) (d)		SW846 1010	>200	>	Deg. F			1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	Corrosivity as pH		SW846 CHAP7	7.4					1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	Cyanide Reactivity		SW846 CHAP7	<2.2	<	mg/kg	2.2		1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	Sulfide Reactivity		SW846 CHAP7	<50	<	mg/kg	50		1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2	Solids, Percent		EPA 160.3 M	69.6		%			1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	2,4-D	94-75-7	SW846 8151	ND		mg/l	0.0015	10	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	2,4,5-TP (Silvex)	93-72-1	SW846 8151	ND		mg/l	0.0002	1	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	gamma-BHC (Lindane)	58-89-9	SW846 8081A	ND		mg/l	0.0005	0.4	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Chlordane	12789-03-6	SW846 8081A	ND		mg/l	0.005	0.03	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Endrin	72-20-8	SW846 8081A	ND		mg/l	0.001	0.02	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Heptachlor	76-44-8	SW846 8081A	ND		mg/l	0.0005	0.008	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Heptachlor epoxide	1024-57-3	SW846 8081A	ND		mg/l	0.0005	0.008	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Methoxychlor	72-43-5	SW846 8081A	ND		mg/l	0.001	10	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Toxaphene	8001-35-2	SW846 8081A	ND		mg/l	0.025	0.5	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Tetrachloro-m-xylene	877-09-8	SW846 8081A	94		%			1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	2,4-DCAA	19719-28-9	SW846 8151	130		%			1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Decachlorobiphenyl	2051-24-3	SW846 8081A	96		%			1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Arsenic (i)	7440-38-2	SW846 6010B	0.0056	U	mg/l	0.02	5	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Barium	7440-39-3	SW846 6010B	3		mg/l	1	100	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Cadmium	7440-43-9	SW846 6010B	0.044		mg/l	0.005	1	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Chromium	7440-47-3	SW846 6010B	0.019		mg/l	0.01	5	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Lead	7439-92-1	SW846 6010B	2.6		mg/l	0.05	5	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Mercury	7439-97-6	SW846 7470A	0.001	U	mg/l	0.01	0.2	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Selenium (j)	7782-49-2	SW846 6010B	0.04	U	mg/l	0.1	1	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Silver	7440-22-4	SW846 6010B	0.0009	U	mg/l	0.01	5	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	2-Methylphenol	95-48-7	SW846 8270C	ND		mg/l	0.05	200	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	3&4-Methylphenol		SW846 8270C	ND		mg/l	0.05	200	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Pentachlorophenol	87-86-5	SW846 8270C	ND		mg/l	0.25	100	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	2,4,5-Trichlorophenol	95-95-4	SW846 8270C	ND		mg/l	0.05	400	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	2,4,6-Trichlorophenol	88-06-2	SW846 8270C	ND		mg/l	0.05	2	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	1,4-Dichlorobenzene	106-46-7	SW846 8270C	ND		mg/l	0.05	7.5	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	2,4-Dinitrotoluene	121-14-2	SW846 8270C	ND		mg/l	0.05	0.13	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Hexachlorobenzene	118-74-1	SW846 8270C	ND		mg/l	0.05	0.13	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Hexachlorobutadiene	87-68-3	SW846 8270C	ND		mg/l	0.05	0.5	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Hexachloroethane	67-72-1	SW846 8270C	ND		mg/l	0.05	3	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Nitrobenzene	98-95-3	SW846 8270C	ND		mg/l	0.05	2	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Pyridine	110-86-1	SW846 8270C	ND		mg/l	0.1	5	1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	2-Fluorophenol	367-12-4	SW846 8270C	37		%			1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Phenol-d5	4165-62-2	SW846 8270C	23		%			1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	2,4,6-Tribromophenol	118-79-6	SW846 8270C	89		%			1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Nitrobenzene-d5	4165-60-0	SW846 8270C	76		%			1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	2-Fluorobiphenyl	321-60-8	SW846 8270C	80		%			1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Terphenyl-d14	1718-51-0	SW846 8270C	85		%			1	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Benzene	71-43-2	SW846 8260B	ND		mg/l	0.01	0.5	10	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Chlorobenzene	108-90-7	SW846 8260B	ND		mg/l	0.02	100	10	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Chloroform	67-66-3	SW846 8260B	ND		mg/l	0.02	6	10	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Carbon tetrachloride	56-23-5	SW846 8260B	ND		mg/l	0.02	0.5	10	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	1,1-Dichloroethylene	75-35-4	SW846 8260B	ND		mg/l	0.02	0.7	10	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	1,2-Dichloroethane	107-06-2	SW846 8260B	ND		mg/l	0.02	0.5	10	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	p-Dichlorobenzene	106-46-7	SW846 8260B	ND		mg/l	0.02	7.5	10	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Methyl ethyl ketone	78-93-3	SW846 8260B	ND		mg/l	0.1	200	10	PC-TP-116539-GRID05	20-Jun-06	15:00

**LabLink Analytical Data Report  
Paradise Creek 116539**

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261.6/96)\*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F41620-2A	Tetrachloroethylene	127-18-4	SW846 8260B	ND		mg/l	0.02	0.7	10	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Trichloroethylene	79-01-6	SW846 8260B	ND		mg/l	0.02	0.5	10	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Vinyl chloride	75-01-4	SW846 8260B	ND		mg/l	0.01	0.2	10	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Dibromofluoromethane	1868-53-7	SW846 8260B	105		%			10	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	Toluene-D8	2037-26-5	SW846 8260B	101		%			10	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	4-Bromofluorobenzene	460-00-4	SW846 8260B	105		%			10	PC-TP-116539-GRID05	20-Jun-06	15:00
F41620-2A	1,2-Dichloroethane-D4	17060-07-0	SW846 8260B	104		%			10	PC-TP-116539-GRID05	20-Jun-06	15:00

(b) Estimated value due to the presence of multiple overlapping Aroclor patterns.

(c) Petroleum hydrocarbon pattern extends beyond C28.

(d) Not ignitable

(e) Elevated reporting limits due to matrix interference.

(f) Outside control limits due to dilution.

(g) Result reported from PID.

(h) Outside control limits due to matrix interference.

(i) Elevated RL/MDL due to negative bias of Method Blank.

(j) Elevated RL/MDL due to positive bias of Method Blank.

(k) Elevated RL/MDL due to CRIA exceeding acceptance criteria.

*Found 2 results exceeding regulatory limits.*

*\*\* Indicates result outside regulatory limits.*

\* Regulatory limits listed in this document have been obtained from the latest version of the regulations cited and are used for advisory purposes only. Accutest assumes no responsibility for errors in regulatory documents or changes to criteria detailed in later versions of the referenced regulation. It is the responsibility of the user to verify these limits before using or reporting any data.



IT'S ALL IN THE CHEMISTRY

07/31/06



## Technical Report for

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Shaw E & I, Inc.

Paradise Creek

116539

Accutest Job Number: F42450

Sampling Date: 07/25/06

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Report to:

Shaw E & I, Inc.

natasha.sullivan@shawgrp.com

ATTN: Natasha Sullivan

Total number of pages in report: 28



Test results contained within this data package meet the requirements of the National Environmental Laboratory Accreditation Conference and/or state specific certification programs as applicable.

  
Harry Behzadi, Ph.D.  
Laboratory Director

Certifications: FL (DOH E83510), NC (573), NJ (FL002), MA (FL946), IA (366), LA (03051), KS (E-10327), SC, AK  
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Accutest Laboratories



### Sample Summary

Shaw E & I, Inc.

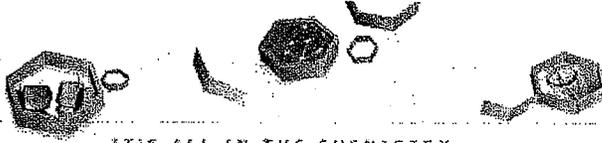
Job No: F42450

Paradise Creek  
Project No: 116539

Sample Number	Collected Date	Time By	Received	Matrix Code Type	Client Sample ID
F42450-1	07/25/06	13:00 BM	07/26/06	SO Soil	PC-SP-116539-GRID05A
F42450-2	07/25/06	13:05 BM	07/26/06	SO Soil	PC-SP-116539-GRID05B

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Soil samples reported on a dry weight basis unless otherwise indicated on result page.



IT'S ALL IN THE CHEMISTRY

**Sample Results**

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**Report of Analysis**

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## Report of Analysis

2.1  
2

<b>Client Sample ID:</b> PC-SP-116539-GRID05A	<b>Date Sampled:</b> 07/25/06
<b>Lab Sample ID:</b> F42450-1	<b>Date Received:</b> 07/26/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 66.4
<b>Method:</b> SW846 8015 M SW846 3550B	
<b>Project:</b> Paradise Creek	

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	ZF20873.D	5	07/28/06	ME	07/26/06	OP17361	GZF978
Run #2							

	Initial Weight	Final Volume
Run #1	32.4 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	565	58	35	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	85%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

# Report of Analysis

2.1  
2

<b>Client Sample ID:</b> PC-SP-116539-GRID05A	<b>Date Sampled:</b> 07/25/06
<b>Lab Sample ID:</b> F42450-1	<b>Date Received:</b> 07/26/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 66.4
<b>Project:</b> Paradise Creek	

## Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead <sup>a</sup>	1.5	D008	5.0	0.50	0.0020	mg/l	1	07/28/06	07/29/06	ATX SW846 6010B <sup>1</sup>

(1) Instrument QC Batch: T:MA2506

(2) Prep QC Batch: T:MP5055

(a) Analysis performed at Accutest Laboratories, Houston, TX.

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result > = MDL but < RL

# Report of Analysis

2.1  
2

<b>Client Sample ID:</b> PC-SP-116539-GRID05A	<b>Date Sampled:</b> 07/25/06
<b>Lab Sample ID:</b> F42450-1	<b>Date Received:</b> 07/26/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 66.4
<b>Project:</b> Paradise Creek	

## General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	66.4		%	1	07/28/06	EM	EPA 160.3 M
pH	7.8		su	1	07/27/06	CP	SW846 9045

RL = Reporting Limit

**Report of Analysis**

<b>Client Sample ID:</b>	PC-SP-116539-GRID05B	<b>Date Sampled:</b>	07/25/06
<b>Lab Sample ID:</b>	F42450-2	<b>Date Received:</b>	07/26/06
<b>Matrix:</b>	SO - Soil	<b>Percent Solids:</b>	66.1
<b>Method:</b>	SW846 8015 M SW846 3550B		
<b>Project:</b>	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	ZF20874.D	5	07/28/06	ME	07/26/06	OP17361	GZF978
Run #2							

Run #	Initial Weight	Final Volume
Run #1	31.5 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	417	60	36	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	73%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

2.2  
2

<b>Client Sample ID:</b> PC-SP-116539-GRID05B	<b>Date Sampled:</b> 07/25/06
<b>Lab Sample ID:</b> F42450-2	<b>Date Received:</b> 07/26/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 66.1
<b>Project:</b> Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead <sup>a</sup>	0.79	D008	5.0	0.50	0.0020	mg/l	1	07/28/06	07/29/06	ATX SW846 6010B <sup>1</sup>

(1) Instrument QC Batch: T:MA2506

(2) Prep QC Batch: T:MP5055

(a) Analysis performed at Accutest Laboratories, Houston, TX.

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result > = MDL but < RL

# Report of Analysis

2.2  
2

<b>Client Sample ID:</b> PC-SP-116539-GRID05B	<b>Date Sampled:</b> 07/25/06
<b>Lab Sample ID:</b> F42450-2	<b>Date Received:</b> 07/26/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 66.1
<b>Project:</b> Paradise Creek	

## General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	66.1		%	1	07/28/06	EM	EPA 160.3 M
pH	7.7		su	1	07/27/06	CP	SW846 9045

RL = Reporting Limit



## Misc. Forms

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## Custody Documents and Other Forms

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Includes the following where applicable:

- Chain of Custody



ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION

ACCUTEST'S JOB NUMBER: F42450 CLIENT: Shaw PROJECT: Paradise Creek  
DATE/TIME RECEIVED: 7/29/06 9:30 # OF COOLERS RECEIVED: 1 COOLER TEMPS: 28  
METHOD OF DELIVERY: FEDEX UPS ACCUTEST COURIER GREYHOUND DELIVERY OTHER  
AIRBILL NUMBERS: 2266474201 9877 6772

COOLER INFORMATION

- CUSTODY SEAL NOT PRESENT OR NOT INTACT
- CHAIN OF CUSTODY NOT RECEIVED (COC)
- ANALYSIS REQUESTED IS UNCLEAR OR MISSING
- SAMPLE DATES OR TIMES UNCLEAR OR MISSING
- TEMPERATURE CRITERIA NOT MET

TRIP BLANK INFORMATION

- TRIP BLANK NOT PROVIDED
- TRIP BLANK NOT ON COC
- TRIP BLANK INTACT
- TRIP BLANK NOT INTACT
- RECEIVED WATER TRIP BLANK
- RECEIVED SOIL TRIP BLANK

MISC. INFORMATION

NUMBER OF ENCORES ? X  
NUMBER OF 5035 FIELD KITS ? X  
NUMBER OR LAB FILTERED METALS ? X

SUMMARY OF COMMENTS:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TECHNICIAN SIGNATURE/DATE [Signature] 7/29/06 TECHNICIAN SIGNATURE/DATE \_\_\_\_\_

ASBD03/27/06

31  
3



## GC Semi-volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Method Blank Summary

**Job Number:** F42450  
**Account:** ITVAVAB Shaw E & I, Inc.  
**Project:** Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17361-MB	ZF20870.D	1	07/28/06	ME	07/26/06	OP17361	GZF978

4.1  
4

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42450-1, F42450-2

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries		Limits
84-15-1	o-Terphenyl	86%	57-115%

# Method Blank Summary

Job Number: F42450  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17361-MB	ZF20882.D	1	07/28/06	AA	07/26/06	OP17361	GZF979

4.1  
4

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42450-1, F42450-2

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries		Limits
84-15-1	o-Terphenyl	83%	57-115%

# Blank Spike Summary

**Job Number:** F42450  
**Account:** ITVAVAB Shaw E & I, Inc.  
**Project:** Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17361-BS	ZF20869.D	1	07/28/06	ME	07/26/06	OP17361	GZF978

4.2  
4

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42450-1, F42450-2

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH (C10-C28)	33.3	25.6	77	62-114

CAS No.	Surrogate Recoveries	BSP	Limits
84-15-1	o-Terphenyl	87%	57-115%

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42450  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17361-MS	ZF20876.D	5	07/28/06	ME	07/26/06	OP17361	GZF978
OP17361-MSD	ZF20877.D	5	07/28/06	ME	07/26/06	OP17361	GZF978
F42455-1 <sup>a</sup>	ZF20885.D	2	07/28/06	AA	07/26/06	OP17361	GZF979

4.3  
4

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42450-1, F42450-2

CAS No.	Compound	F42455-1 mg/kg	Spike Q	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH (C10-C28)	53.4	41	179	306*	138	206*	26	31-136/36

CAS No.	Surrogate Recoveries	MS	MSD	F42455-1	Limits
84-15-1	o-Terphenyl	90%	79%	75%	57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.



## Misc. Forms

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### Custody Documents and Other Forms

(Accutest Laboratories Gulf Coast, Inc.)

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Includes the following where applicable:

- Chain of Custody



# CHAIN OF CUSTODY

4405 VINELAND ROAD • SUITE C-15  
ORLANDO, FL 32811  
TEL: 407-425-6700 • FAX: 407-425-0707

ACCUTEST JOB #:  
ACCUTEST QUOTE #:

CLIENT INFORMATION			FACILITY INFORMATION				ANALYTICAL INFORMATION						MATRIX CODES					
NAME: <i>Accutest Southeast</i>			PROJECT NAME: <i>F42450</i>										DW - DRINKING WATER GW - GROUND WATER WW - WASTE WATER SO - SOIL SL - SLUDGE OI - OIL LIQ - OTHER LIQUID SOL - OTHER SOLID					
ADDRESS:			LOCATION:															
CITY, STATE ZIP:			PROJECT NO.:															
SEND REPORT TO: PHONE #:			FAX #:				<div style="float: right; writing-mode: vertical-rl; transform: rotate(180deg);">             TCR PB           </div>											
ACCUTEST SAMPLE #	FIELD ID / POINT OF COLLECTION	COLLECTION			MATRIX	# OF BOTTLES							PRESERVATION					LAB USE ONLY
		DATE	TIME	SAMPLED BY:									HGT	INH	INHOS	INHOSN	INHOSNE	
	<i>F42450-1</i>	<i>07/25/06</i>	<i>1300</i>	<i>-</i>	<i>S</i>	<i>1</i>												
	<i>-2</i>	<i>6</i>	<i>1305</i>	<i>-</i>	<i>S</i>	<i>1</i>												
<input type="checkbox"/> STANDARD <input type="checkbox"/> 48 HOUR RUSH <input type="checkbox"/> 24 HOUR EMERGENCY <input type="checkbox"/> OTHER <i>Mokey</i> EMERGENCY OR RUSH IS FAX DATA UNLESS PREVIOUSLY APPROVED			<input checked="" type="checkbox"/> STANDARD <input type="checkbox"/> COMMERCIAL "B" <input type="checkbox"/> DISK DELIVERABLE <input type="checkbox"/> STATE FORMS <input type="checkbox"/> OTHER (SPECIFY) _____				COMMENTS/REMARKS: <i>ALC</i> <i>ALC → Pen Email</i> <i>ALC 7/25/06 14:47:25</i>											
SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION, INCLUDING COURIER DELIVERY																		
RELINQUISHED BY SAMPLER:	DATE TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE TIME:	RECEIVED BY:													
<i>1. [Signature]</i>	<i>7-26-06</i>	<i>1.</i>	<i>2.</i>		<i>2.</i>													
RELINQUISHED BY:	DATE TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE TIME:	RECEIVED BY:													
<i>3.</i>		<i>3.</i>	<i>4.</i>		<i>4.</i>													
RELINQUISHED BY:	DATE TIME:	RECEIVED BY:	SEAL #	PRESERVE WHERE APPLICABLE	ON ICE	TEMPERATURE												
<i>5.</i>	<i>7/26/06 10:50</i>	<i>U. Rodney</i>		<input type="checkbox"/>	<input type="checkbox"/>	<i>5.6 C</i>												

5.1  
5

F42450: Chain of Custody  
Page 1 of 3  
Accutest Laboratories Gulf Coast, Inc.



F42450

From: Origin ID: (407)425-6700  
Randy Shields  
Accutest Labs Southeast  
4405 Vineland Rd  
Suite C-7  
Orlando, FL 32811

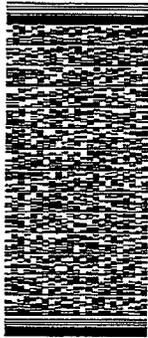
Ship Date: 26JUL06  
Ship Time: 9:15  
System#: 62289781NETZ300  
Account#: 5



Delivery Address Bar Code

SHIP TO: (713)956-6327  
BILL RECIPIENT

Sample Management  
Accutest Laboratories Gulf Coast  
10165 Harwin Drive  
Suite 150  
Houston, TX 77036



PRIORITY OVERNIGHT

TRK# 7928 0614 9725 FORM 0001  
IAH A2

77036 -TX-US

XH JGQA



THU

Deliver By:  
27JUL06

Shipping Label: Your shipment is complete

1. Use the "Print" feature from your browser to send this page to your laser or inkjet printer.
  2. Fold the printed page along the horizontal line.
  3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.
- Warning: Use only the printed original label for shipping. Using a photocopy of this label for shipping purposes is fraudulent and could result in additional billing charges, along with the cancellation of your FedEx account number.
- Use of this system constitutes your agreement to the service conditions in the current FedEx Service Guide, available on fedex.com. FedEx will not be responsible for any claim in excess of \$100 per package, whether the claim is for loss, damage, delay, misdelivery, or information. Service Guide apply. Your right to recover from FedEx for any loss, including intrinsic value of the package, loss of sales, income interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental, consequential, or special is limited to the greater of \$100 or the authorized declared value. Recovery cannot exceed actual documented loss. Maximum for items of extraordinary value is \$500, e.g. jewelry, precious metals, negotiable instruments and other items listed in our Service Guide. Written claims must be filed within strict time limits, see current FedEx Service Guide.

[https://www.fedex.com/cgi-bin/ship\\_it/unity/1BaWY3DdR3C4Zv2CcSv9AcSs2FaYv8GIW...](https://www.fedex.com/cgi-bin/ship_it/unity/1BaWY3DdR3C4Zv2CcSv9AcSs2FaYv8GIW...) 7/26/06

5  
5.1



## Metals Analysis

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### QC Data Summaries

(Accutest Laboratories Gulf Coast, Inc.)

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Includes the following where applicable:

- Method Blank Summaries
- Matrix Spike and Duplicate Summaries
- Blank Spike and Lab Control Sample Summaries
- Serial Dilution Summaries



BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F42450  
Account: ALSE - Accutest Laboratories Southeast, Inc.  
Project: ITVAVAB: Paradise Creek

QC Batch ID: MP5055  
Matrix Type: LEACHATE

Methods: SW846 6010B  
Units: mg/l

Prep Date: 07/28/06

Metal	RL	IDL	MB raw	final
Aluminum	0.20	.0042		
Antimony	0.20	.0026		
Arsenic	0.50	.0018	anr	
Barium	1.0	.0003	anr	
Beryllium	0.0050	.0001		
Boron	0.10	.0009		
Cadmium	0.0050	.0002	anr	
Calcium	5.0	.024		
Chromium	0.010	.0008	anr	
Cobalt	0.050	.0004		
Copper	0.025	.0027		
Iron	0.10	.012		
Lead	0.50	.0014	0.16	<0.50
Magnesium	5.0	.003		
Manganese	0.015	.0012		
Molybdenum	0.0050	.0008		
Nickel	0.040	.0006		
Potassium	5.0			
Selenium	0.50	.0015	anr	
Silver	0.010	.0004		
Sodium	5.0	.14		
Strontium	0.010			
Thallium	0.20	.0033		
Tin	0.010			
Titanium	0.010	.0038		
Vanadium	0.050	.0005		
Zinc	0.10	.0021		

Associated samples MP5055: F42450-1, F42450-2

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

611  
6

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42450  
 Account: ALSE - Accutest Laboratories Southeast, Inc.  
 Project: ITVAVAB: Paradise Creek

QC Batch ID: MP5055  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 07/28/06 07/28/06

Metal	F42450-1 Original	DUP	RPD	QC Limits	F42450-1 Original MS	Spikelot MPITCLP1	% Rec	QC Limits
Aluminum								
Antimony								
Arsenic	anr							
Barium	anr							
Beryllium								
Boron								
Cadmium	anr							
Calcium								
Chromium	anr							
Cobalt								
Copper								
Iron								
Lead	1.5	1.5	0.0	0-20	1.5	3.7	2.0	110.0 75-125
Magnesium								
Manganese								
Molybdenum								
Nickel								
Potassium								
Selenium	anr							
Silver								
Sodium								
Strontium								
Thallium								
Tin								
Titanium								
Vanadium								
Zinc								

Associated samples MP5055: F42450-1, F42450-2

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested

612  
 6

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42450  
 Account: ALSE - Accutest Laboratories Southeast, Inc.  
 Project: ITVAVAB: Paradise Creek

QC Batch ID: MP5055  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 07/28/06

Metal	F42450-1 Original MSD	SpikeLot MPITCLP1 % Rec	MSD RPD	QC Limit
-------	--------------------------	----------------------------	------------	-------------

Aluminum				
Antimony				
Arsenic	anr			
Barium	anr			
Beryllium				
Boron				
Cadmium	anr			
Calcium				
Chromium	anr			
Cobalt				
Copper				
Iron				
Lead	1.5	3.8	2.0	115.0 2.7
Magnesium				
Manganese				
Molybdenum				
Nickel				
Potassium				
Selenium	anr			
Silver				
Sodium				
Strontium				
Thallium				
Tin				
Titanium				
Vanadium				
Zinc				

Associated samples MP5055: F42450-1, F42450-2

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested

6.1.2  


SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F42450  
 Account: ALSE - Accutest Laboratories Southeast, Inc.  
 Project: ITVAVAB: Paradise Creek

QC Batch ID: MP5055  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 07/28/06

Metal	BSP Result	Spikelot MPITCLP1 % Rec	QC Limits
-------	---------------	----------------------------	--------------

Aluminum				
Antimony				
Arsenic	anr			
Barium	anr			
Beryllium				
Boron				
Cadmium	anr			
Calcium				
Chromium	anr			
Cobalt				
Copper				
Iron				
Lead	2.3	2.0	115.0	80-120
Magnesium				
Manganese				
Molybdenum				
Nickel				
Potassium				
Selenium	anr			
Silver				
Sodium				
Strontium				
Thallium				
Tin				
Titanium				
Vanadium				
Zinc				

Associated samples MP5055: F42450-1, F42450-2

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

613



SERIAL DILUTION RESULTS SUMMARY

Login Number: F42450  
Account: ALSE - Accutest Laboratories Southeast, Inc.  
Project: ITVAVAB: Paradise Creek

QC Batch ID: MP5055  
Matrix Type: LEACHATE

Methods: SW846 6010B  
Units: ug/l

Prep Date: 07/28/06

Metal	F42450-1 Original SDL 1:5	RPD	QC Limits
-------	------------------------------	-----	--------------

Aluminum  
Antimony  
Arsenic            anr  
Barium            anr  
Beryllium  
Boron  
Cadmium           anr  
Calcium  
Chromium          anr  
Cobalt  
Copper  
Iron  
Lead              1500      1550      3.2      0-10  
Magnesium  
Manganese  
Molybdenum  
Nickel  
Potassium  
Selenium          anr  
Silver  
Sodium  
Strontium  
Thallium  
Tin  
Titanium  
Vanadium  
Zinc

Associated samples MP5055: F42450-1, F42450-2

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

6.14  
6

# GRID 12, 13, 14

## WASTE PACKAGE INCLUDES:

- WM Application
- SPSW form Application
- Map
- Full TCLP results Grid 12, 13, 14 only
- Grid 12, 13, 14 TCLP results Summary
- Additional Grid 12, 13, 14 samples:
  - TPH – DRO
  - pH
  - TCLP – lead only

DEPARTMENT OF ENVIRONMENTAL QUALITY  
TIDEWATER REGIONAL OFFICE

Company Name: SIFAW ENVIRONMENTAL

Person delivering item: TAYLOR SWORD

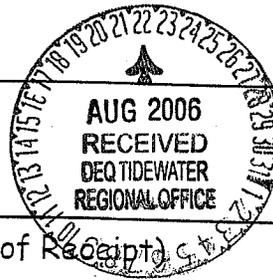
Item delivered: (PRINT)  
6 BID PACKAGES 12-13-14, SPSW-2 Form  
w/ SIGNATURES

Received By: \_\_\_\_\_

(PRINT)

L. Kramer

(Signature)



(Date of Receipt)

## **Waste Management Application**

**Navy Signature req'd**

# Waste Management Application



## GENERATOR'S WASTE PROFILE SHEET

PLEASE PRINT IN INK OR TYPE

### Instructions

Information on this form is used to determine if the waste may be transported, treated, stored or disposed in a legal, safe, and environmentally sound manner. This information will be maintained in strict confidence. Answers must be provided for sections A, B, and C and must be printed in ink or typed. A response of "NONE" or "NA" (not applicable) can be made if appropriate. If additional space is needed, indicate on the form that additional information is attached, and attach the information to Generator's Waste Profile Sheet. If you have questions concerning this form, please contact the Contractor's sales representative.

#### A. Waste Generator Information

1. **Generator Name** - Enter the name of the facility where the waste is generated.
2. **SIC Code** - Enter the four digit Standard Industrial Classification Code for the facility where the waste is generated.
3. **Facility Street Address** - Enter the street address (not P.O. Box) of the facility where the waste is generated.
4. **Phone** - Enter Generator's area code and phone number.
5. **Facility City** - Enter the city where the waste is generated.
6. **State/Province** - Enter the state or province where the waste is generated.
7. **Zip/Postal Code** - Enter the generating facility's zip or postal code.
8. **Generator USEPA/Federal ID #** - Enter the identification number issued by the USEPA, Canadian, or Mexican Federal Agency to the facility generating the waste (if applicable).
9. **County** - Enter the county where the waste is generated.
10. **State/Province ID #** - Enter the identification number issued by the state or province to the facility generating the waste (if applicable).
11. **Customer Name** - Entity that the Contractor is directly working with regarding the represented waste stream. If the same as the Generator, mark "Same as Above".
12. **Customer Phone** - Enter technical contact's area code and telephone number.
13. **Customer Contact** - Enter the name of the person who can answer technical questions about the waste.
14. **Customer Fax** - Area code and facsimile number for the customer.
15. **Billing Address** - Address where bill for services should be sent.

#### B. Waste Stream Information

- 1.a. **Name of Waste** - Enter a name generally descriptive of this waste (e.g., paint sludge, fluorescent bulbs).
- 1.b. **Process Generating Waste** - Describe the process generating the waste in detail. List the specific process/operation or source that generates the waste (e.g., incineration of municipal refuse, asbestos removal, wastewater treatment, building maintenance).

At a minimum, the Generator should answer the following questions in determining the process generating the waste.

  - What chemicals are stored and/or used at the facility?
  - Is the waste generated from the production/manufacturing of any of the following industries: wood preservation; inorganic pigments; organic pigments; pesticides; explosives; petroleum refining; iron and steel, copper, lead or zinc production?
  - Is the waste a result from degreasing, solvent parts cleaning, recovery/reclaiming of solvents (bottoms), wastewater treatment (sludges), or electroplating?
- 1.c. **Color** - Describe the color of the waste (e.g., blue, transparent, varies).
- 1.d. **Strong odor** - **DO NOT SMELL THE WASTE!** If the waste has a known odor, then describe (e.g., acrid, pungent, solvent, sweet).
- 1.e. **Physical state @ 70°F** - If the four boxes provided do not apply, a descriptive phrase may be entered after "Other" (e.g., multi-phase).
- 1.f. **Layers** - Single Layer means the waste is homogenous. Multi-layer means the waste is comprised of two or more layers (e.g., oil/water/sludge).
- 1.g. **Free liquid range** - Range (in percent by volume) of free liquids in the waste.
- 1.h. **pH Range** - Indicate the pH range.
- 1.i. **Liquid Flash Point** - Indicate the flash point obtained using the appropriate test method.
- 1.j. **Chemical Composition** - List all organic and/or inorganic components of the waste using chemical names. If trade names are used, attach Material Safety Data Sheets or other documents that adequately describe the composition of the waste. For each component, estimate the range (in percent) in which the component is present.
- 1.k. Check all that apply.
  - 1.l. Identify any element, chemical compound, or mixture in concentration of 0.1 percent or greater that is considered a carcinogen or potential carcinogen pursuant to OSHA.
  - 1.m. Indicate if the waste contains any dioxins (list in Section B.1.j).
  - 1.n. Indicate if the waste contains asbestos. Indicate if the asbestos is friable.
  - 1.o. Indicate if the waste contains benzene, the level in ppm, and whether it is subject to the benzene NESHAP.
  - 1.p. Indicate if the waste is subject to RCRA Subpart CC control. In addition, indicate the volatile organic concentration, if known, in parts per million weight.
  - 1.q. Indicate if the waste contains any Class I or Class II ozone-depleting controlled substances.
  - 1.r. Indicate if the waste contains debris (list size and type in B.1.j).
2. **Quantity of Waste** - Approximate volume in tons, yards, or other (e.g., drums, gallons) that will be received by the ultimate management facility. This volume amount is not intended for use in complying with state and/or permit restrictions.
- 3.a. **Packaging** - Choose the appropriate option or "other" along with a description.
- 3.b. **Shipping Frequency** - Choose the appropriate option or "other" along with a description.
- 3.c. **Is this a U.S. Department of Transportation (USDOT) hazardous material?** - Choose the appropriate response: yes or no.
- 3.d. **Reportable Quantity (lbs.; kgs.)** - If the answer to 3.c. is yes, enter the Reportable Quantity (RQ) established by 40 CFR 302.4 or equivalent Canadian or Mexican regulation for this waste. Indicate the appropriate units for the RQ.
- 3.e. **Hazard Class/ID #** - If the answer to 3.c. is yes, indicate the proper USDOT hazard class and identification number.
- 3.f. **USDOT Shipping Name** - IF the answer to 3.c. is yes, enter the proper USDOT shipping name for the waste.
- 3.g. **Personal Protective Equipment Requirements** - All personal protective equipment necessary to safely manage the waste stream.
- 3.h. **Transporter/Transfer Station** - Transporter and/or transfer station name.



**GENERATOR'S WASTE PROFILE SHEET**  
PLEASE PRINT IN INK OR TYPE

**C. Generator's Certification** (Please check appropriate responses, sign, and date below.)

Indicate the appropriate response to questions/statements 1, 2, 3, 4, 5, 6, and 7. By signing this Generator's Waste Profile Sheet, the Generator certifies the responses are true and accurate with respect to the waste stream(s) listed.

**Certification Signature** - Signature of an authorized employee of the Generator or representative of the generator if authorized in writing by the generator.

**Title** - Enter Employee's title.

**Name** - Type or Print Employee's name.

**Company Name** - Company employing the person certifying the Generator's Waste Profile Sheet.

**Date** - Enter the date this Generator's Waste Profile Sheet is signed.

**D. WMI Management's Decision**

**FOR WMI USE ONLY**

To be completed by WMI.



**GENERATOR'S WASTE PROFILE SHEET**  
PLEASE PRINT IN INK OR TYPE

Service Agreement on File?  YES  NO  
 Hazardous  Non-Hazardous  TSCA

Profile Number: WMI \_\_\_\_\_  
 Renewal Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**A. Waste Generator Information**

1. Generator Name: Commander, Navy Region Mid-Atlantic (CNRMA) 2. SIC Code: \_\_\_\_\_  
 3. Facility Street Address: 1510 Gilbert St, 4. Phone: (757) 445-6703 757-444-0990 445-6703  
 5. Facility City: Norfolk 6. State/Province: VA  
 7. Zip/Postal Code: 23511-2737 8. Generator USEPA/Federal ID #: NOT APPLICABLE  
 9. County: \_\_\_\_\_ 10. State/Province ID #: NOT APPLICABLE  
 11. Customer Name: Capital Environmental NAVY 12. Customer Phone: (804) 239-0968 757-444-6800  
 13. Customer Contact: Matt Gemmer TIM REISCH 14. Customer Fax: 804-798-3326 757-444-5822  
 15. Billing Address  Same as above

**B. Waste Stream Information**

**1. Description**

a. Name of Waste: Soil contaminated with Wood Debris  
 b. Process Generating Waste: Excavation

c. Color <u>gray to black</u>	d. Strong odor (describe): <u>none</u>	e. Physical state @ 70°F <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> Sludge <input type="checkbox"/> Other	f. Layers <input checked="" type="checkbox"/> Single Layer <input type="checkbox"/> Multi-layer	g. Free liquid range <u>n/a to %</u> h. pH: Range <u>7.4 to 7.8</u>
----------------------------------	---	---	---	--

i. Liquid Flash Point:  <73°F  73-99°F  100-139°F  140-199°F  ≥ 200°F  Not applicable  
 j. Chemical Composition (List all constituents [including halogenated organics, debris, and UHC's] present in any concentration and submit representative analysis):

Constituents	Concentration Range	Constituents	Concentration Range
<u>See attached analytical</u>			

**TOTAL COMPOSITION MUST EQUAL OR EXCEED 100%**

Check all that apply:

k.  Oxidizer  Pyrophoric  Explosive  Radioactive  
 Carcinogen  Infectious  Shock Sensitive  Water Reactive

l. Does the waste represented by this profile contain any of the carcinogens which require OSHA notification? (list in Section B.1.j).....  YES  NO  
 m. Does the waste represented by this profile contain dioxins? (list in Section B.1.j).....  YES  NO  
 n. Does the waste represented by this profile contain asbestos?.....  YES  NO  
 If yes.....  friable  non-friable  
 o. Does the waste represented by this profile contain benzene?.....  YES  NO  
 If yes, concentration \_\_\_\_\_ ppm  
 Is the waste subject to the benzene waste operations NESHAP?.....  YES  NO  
 p. Is the waste subject to RCRA Subpart CC controls?.....  YES  NO  
 If yes, volatile organic concentration \_\_\_\_\_ ppmw  
 q. Does the waste contain any Class I or Class II ozone-depleting substances?.....  YES  NO  
 r. Does the waste contain debris? (list in Section B.1.j).....  YES  NO

**2. Quantity of Waste**

Estimated Annual Volume ~4500 cy  Tons  Yards  Drums  Other (specify) \_\_\_\_\_

**3. Shipping Information**

a. Packaging:  
 Bulk Solid; Type/Size: dump trucks  Bulk Liquid; Type/Size: \_\_\_\_\_  
 Drum; Type; Size: \_\_\_\_\_  Other: \_\_\_\_\_  
 b. Shipping Frequency: Units truck loads Per:  Month  Quarter  Year  One time  Other \_\_\_\_\_  
 c. Is this a U.S. Department of Transportation (USDOT) Hazardous Material? (If no, skip d, e, and f).....  YES  NO



**GENERATOR'S WASTE PROFILE SHEET** Profile Number: WMI  
PLEASE PRINT IN INK OR TYPE

d. Reportable Quantity (lbs.; kgs.): \_\_\_\_\_ e. Hazard Class/ID #: \_\_\_\_\_  
f. USDOT Shipping Name: \_\_\_\_\_  
g. Personal Protective Equipment Requirements: \_\_\_\_\_  
h. Transporter/Transfer Station: \_\_\_\_\_

**C. Generator's Certification (Please check appropriate responses, sign, and date below.)**

- 1. Is this a USEPA hazardous waste (40 CFR Part 261)? If the answer is no, skip to 2.....  YES  NO
  - a. If yes, identify ALL USEPA listed and characteristic waste code numbers (D, F, K, P, U) \_\_\_\_\_
  - b. If a characteristic hazardous waste, do underlying hazardous constituents (UHCs) apply? (if yes, list in Section B.1.j).....  YES  NO
  - c. Does this waste contain debris? (if yes, list size and type in Chemical Composition - B.1.).....  YES  NO
- 2. Is this a state hazardous waste?.....  YES  NO  
Identify ALL state hazardous waste codes \_\_\_\_\_
- 3. Is the waste from a CERCLA (40 CFR 300, Appendix B) or state mandated clean-up?.....  YES  NO  
If yes, attach Record of Decision (ROD), 104/106 or 122 order or court order that governs site clean-up activity. For state mandated clean-up, provide relevant documentation.
- 4. Does the waste represented by this waste profile sheet contain radioactive material, or is disposal regulated by the Nuclear Regulatory Commission?.....  YES  NO
- 5. Does the waste represented by this waste profile sheet contain concentrations of Polychlorinated Biphenyls (PCBs) regulated by 40 CFR 761? (if yes, list in Chemical Composition - B.1.j).....  YES  NO
  - a. If yes, were the PCBs imported into the U.S.?.....  YES  NO
- 6. Do the waste profile sheet and all attachments contain true and accurate descriptions of the waste material, and has all relevant information within the possession of the Generator regarding known or suspected hazards pertaining to the waste been disclosed to the Contractor?.....  YES  NO
- 7. Will all changes which occur in the character of the waste be identified by the Generator and disclosed to the Contractor prior to providing the waste to the Contractor?.....  YES  NO

Check here if a Certificate of Destruction or Disposal is required.

Any sample submitted is representative as defined in 40 CFR 261 - Appendix I or by using an equivalent method. I authorize WMI to obtain a sample from any waste shipment for purposes of recertification. If this certification is made by a broker, the undersigned signs as authorized agent of the generator and has confirmed the information contained in this Profile Sheet from information provided by the generator and additional information as it has determined to be reasonably necessary. If approved for management, Contractor has all the necessary permits and licenses for the waste that has been characterized and identified by this approved profile.

Certification Signature: [Signature] Title: Env. Engineer/Project Manager  
Name (Type or Print): JIMOTHAN A. BELKA Company Name: NAUFAC Date: 11 Aug 2006  
 Check if additional information is attached. Indicate the number of attached pages \_\_\_\_\_

D. WMI Management's Decision		FOR WMI USE ONLY	
1.	Management Method <input type="checkbox"/> Landfill <input type="checkbox"/> Non-hazardous Solidification <input type="checkbox"/> Bioremediation <input type="checkbox"/> Incineration <input type="checkbox"/> Hazardous Stabilization <input type="checkbox"/> Other (Specify) _____		
2.	Proposed Ultimate Management Facility: _____		
3.	Precautions, Special Handling Procedures, or Limitation on Approval: _____ _____		
Special Waste Decision.....		<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved
Salesperson's Signature: _____		Date: _____	
Division Approval Signature (Optional): _____		Date: _____	
Special Waste Approvals Person Signature: _____		Date: _____	

**SPSW-2 FORM**

**Signature Required**

Grid 5

**Form SPSW-2**  
**SPECIAL WASTE DISPOSAL REQUEST**  
**GENERATOR INFORMATION**

Section I. Generator Identification:

a. Generator Name: Commander, Navy Region Mid-Atlantic

b. Generator Address: 1510 Gilbert St, Norfolk VA, 23511-2737

-----

-----

c. Generator Phone: (757)445-6703 Tim Reisch (757) 444-6890

Section II. General Waste Profile:

Note: It is the duty of all persons to dispose of their solid waste in a legal manner (Va.Code ' 10.1-1418.1.A). In addition, any person who generates a solid waste shall determine if that waste is a hazardous waste (' 6.1 of the Virginia Hazardous Waste Management Regulations (VR 672-10-1) ("VHWMR")).

a. General description of waste, including its state (e.g., solid liquid, semi-solid, gas):

Solid material that includes Soil and debris (concrete and wood) consistent with construction debris. -----

-----

b. Amount of materials proposed for disposal:

Volume or Weight approximately 4,500

Units cubic yards

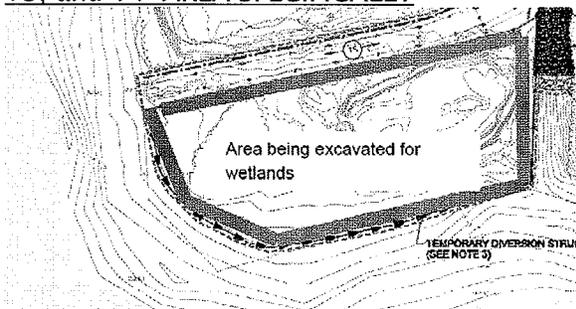
- c. Activities or processes from which the waste was generated, including process flow diagrams specifically addressing the waste stream(s), a description of the source of the waste, and a statement of whether the waste was formerly managed as a hazardous waste.

This waste material is being generated as a result of the excavation for construction of an engineered wetlands. The material was deposited originally as fill material adjacent to the toe of a former landfill operated by Norfolk Naval Shipyard (NNSY). On top of the fill a calcium hydroxide berm impoundment was built. That impoundment has been removed. The remaining fill material dimensional lumber, (wood debris) and soil mix needs to be removed to accommodate the construction of an engineered landfill.

NOTE: Attach a flow diagram and indicate any deletions due to proprietary or trade secret information. The Department cannot protect proprietary information or trade secrets.

- d. Location of generation:

The removal site is located between Paradise Creek on the southern boundary, and the northern boundary is the NNSY former Eastern Area Landfill and the Western Area Landfill. The area being excavated is on a bend in Paradise Creek : Attached map shows GRID 12, 13, and 14 AREA SPECIFICALLY



- e. Method of transportation:

Describe the manner in which the material is being transported for disposal (e.g., bulk containers):

Bulk shipment via Dump Trucks

f. Testing results

PARAMETER	ANALYZED (METHOD)	NOT ANALYZED (REASON)	RESULTS INCLUDED
Corrosivity	SW 846, Chapter 7	N/a	See attached analysis
Ignitability	SW 846 1010	N/a	See attached analysis
TCLP (a - e) only			
a. Metals	See attached table	N/a	See attached analysis
b. Volatile Organics	See attached table	N/a	See attached analysis
c. Semi-Volatile Organics	See attached table	N/a	See attached analysis
d. Pesticides	See attached table	N/a	See attached analysis
e. Herbicides	See attached table	N/a	See attached analysis
Total Metals		TCLP	N
Volatile Organics		TCLP	N
Semi-Volatile Organics		TCLP	N
Pesticides		TCLP	N
Herbicides		TCLP	N
PCB's	SW846 8082	N/a	See attached analysis
Paint Filter Test		To be performed during removal action	N
Radioactive Waste		Previous investigation, site history	N
Asbestos		Previous investigation, site history	N
Percent Solids	EPA 160.3		w/ TCLP results
TOX		Previous investigation, site history	N
TPH <sup>1</sup>	SW 846 8015M	N/a	See attached analysis

g. Sample location map included: Yes (xx) No ( )

<sup>1</sup>

TPH DRO samples are to be taken during removal prior to disposal for meeting disposal facility criteria at the frequency of 1 per 500 cubic yards material.

Section III. Generator Certification:

I hereby certify, based upon my diligent inquiry into the activities, materials, and processes generating the materials described on this form:

1. That these materials are not classified as listed or characteristic hazardous waste governed by the Commonwealth of Virginia or the state of origin of this waste;
2. That the materials are not regulated medical waste governed by the Virginia Regulated Medical Waste Management Regulations (VR 672-40-01);
3. That the materials do not contain 50.0 parts per million or more of polychlorinated biphenyls (PCB's);
4. That the materials do not contain more than 1.0 part per billion of dioxins;  
*There is no reason to expect presence of dioxins.*
5. That the material is not a radioactive waste or possess the property of radioactivity;
6. That the materials are not prohibited or restricted from disposal in a Virginia solid waste management facility; and
7. That the analytical results, completed application and attached documentation submitted in support of this special waste disposal request are a representative, true, and accurate description of these materials.

Print Name: Crystal St. Clair-Canaïi

Title: Regional Hazardous Waste Program Manager

Signature: Crystal St. Clair-Canaïi Date: 8/22/06

Notary Statement See Attachment

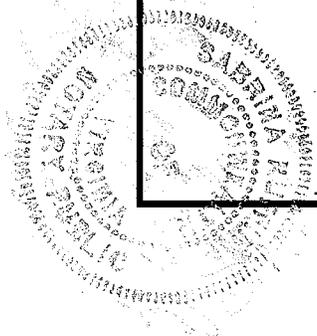
State of Virginia

County of Norfolk

On 22 August, 2006, Crystal StClair-Canali  
personally appeared before me,

who is personally known to me  
 whose identity I proved on the basis of  
Civilian identification  
 whose identity I proved on the oath/affirmation of  
\_\_\_\_\_, a credible witness

to be the signer of the above document, and he/she acknowledged  
that he/she signed it.



Sabrina Ruffin  
Notary Public  
Sabrina Ruffin

December 31, 2008 exp

**Map –  
Grid 12, 13, 14  
Locations**

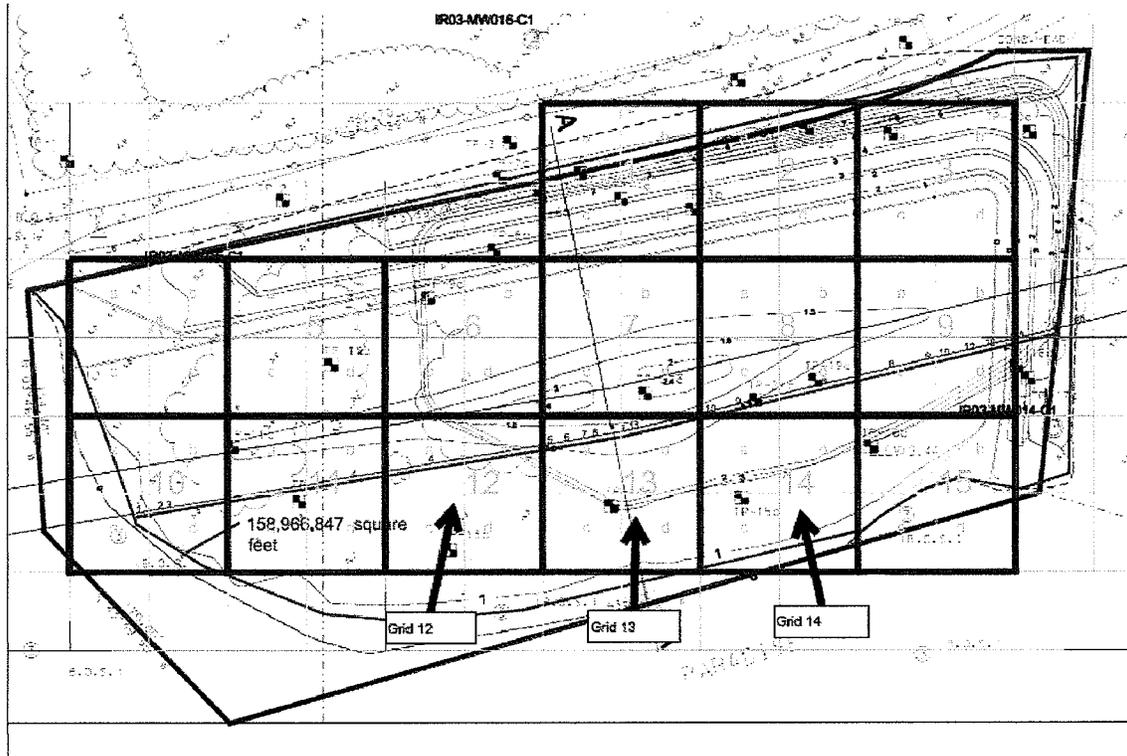


Figure 1

# **Full TCLP Results – Grids 12, 13, 14 Only**



IT'S ALL IN THE CHEMISTRY

06/30/06

Technical Report for

ANALYSIS WITHIN THIS REPORT FOR THIS WASTE APPLICATION, SAMPLES FROM GRID 10 ONLY APPLY.

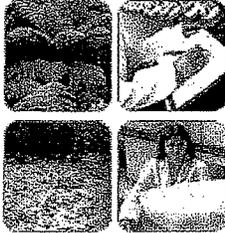
Shaw E & I, Inc.

Paradise Creek

116539

Accutest Job Number: F41620

Sampling Date: 06/20/06



Report to:

Shaw E & I, Inc.

natasha.sullivan@shawgrp.com

ATTN: Natasha Sullivan

Total number of pages in report: 112



Test results contained within this data package meet the requirements of the National Environmental Laboratory Accreditation Conference and/or state specific certification programs as applicable.

*Harry Behzadi*  
Harry Behzadi, Ph.D.  
Laboratory Director

Certifications: FL (DOH E83510), NC (573), NJ (FL002), MA (FL946), IA (366), LA (03051), KS (E-10327), SC, AK  
This report shall not be reproduced, except in its entirety, without the written approval of Accutest Laboratories.

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Accutest Laboratories



## Sample Summary

Shaw E & I, Inc.

Job No: F41620

Paradise Creek  
Project No: 116539

Sample Number	Collected Date	Time By	Received	Matrix Code	Type	Client Sample ID
F41620-1	06/20/06	10:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID04
F41620-1A	06/20/06	10:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID04
F41620-2	06/20/06	15:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID05
F41620-2A	06/20/06	15:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID05
F41620-3	06/20/06	16:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID06
F41620-3A	06/20/06	16:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID06
F41620-4	06/20/06	11:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID10
F41620-4A	06/20/06	11:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID10
F41620-5	06/20/06	13:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID11
F41620-5A	06/20/06	13:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID11
F41620-6	06/20/06	14:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID12
F41620-6A	06/20/06	14:00 BM	06/22/06	SO	Soil	PC-TP-116539-GRID12

Soil samples reported on a dry weight basis unless otherwise indicated on result page.



IT'S ALL IN THE CHEMISTRY

## Sample Results

---

## Report of Analysis

---

Report of Analysis

2.11  
2

Client Sample ID:	PC-TP-116539-GRID12	Date Sampled:	06/20/06
Lab Sample ID:	F41620-6	Date Received:	06/22/06
Matrix:	SO - Soil	Percent Solids:	78.9
Method:	SW846 8015		
Project:	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	UV022706.D	1	06/23/06	MM	n/a	n/a	GUV1317
Run #2							

Run #	Initial Weight	Final Volume	Methanol Aliquot
Run #1	4.90 g	5.0 ml	100 ul
Run #2			

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	6.92	7.8	3.9	mg/kg	J

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
460-00-4	4-Bromofluorobenzene	123%		62-135%
98-08-8	aaa-Trifluorotoluene	82%		65-118%

(a) Sample was received in a bulk container and preserved within 48 hours of sampling.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

Client Sample ID:	PC-TP-116539-GRID12	Date Sampled:	06/20/06
Lab Sample ID:	F41620-6	Date Received:	06/22/06
Matrix:	SO - Soil	Percent Solids:	78.9
Method:	SW846 8082 SW846 3550B		
Project:	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	ST48644.D	10	06/28/06	ME	06/26/06	OP17013	GST1419
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.5 g	10.0 ml
Run #2		

PCB List

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	210	100	ug/kg	
11104-28-2	Aroclor 1221	ND	210	170	ug/kg	
11141-16-5	Aroclor 1232	ND	210	170	ug/kg	
53469-21-9	Aroclor 1242	ND	210	100	ug/kg	
12672-29-6	Aroclor 1248	ND	210	210	ug/kg	
11097-69-1	Aroclor 1254	ND	210	210	ug/kg	
11096-82-5	Aroclor 1260 <sup>b</sup>	999	210	100	ug/kg	J
11100-14-4	Aroclor 1268 <sup>b</sup>	512	210	100	ug/kg	J
	Total PCBs	1510	420		ug/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	66%		52-136%
2051-24-3	Decachlorobiphenyl	106%		49-148%

(a) All hits confirmed by dual column analysis.

(b) Estimated value due to the presence of multiple overlapping Aroclor patterns.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

211  
2

Client Sample ID:	PC-TP-116539-GRID12	Date Sampled:	06/20/06
Lab Sample ID:	F41620-6	Date Received:	06/22/06
Matrix:	SO - Soil	Percent Solids:	78.9
Method:	SW846 8015 M SW846 3550B		
Project:	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	LL11105.D	4	06/29/06	VS	06/27/06	OP17034	GLL410
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.2 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28) <sup>a</sup>	406	42	25	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	89%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Report of Analysis

Client Sample ID:	PC-TP-116539-GRID12	Date Sampled:	06/20/06
Lab Sample ID:	F41620-6	Date Received:	06/22/06
Matrix:	SO - Soil	Percent Solids:	78.9
Project:	Paradise Creek		

### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Corrosivity as pH	10.6			1	06/23/06	CP	SW846 CHAP7
Cyanide Reactivity	< 1.9	1.9	mg/kg	1	06/29/06	SJL	SW846 CHAP7
Ignitability (Flashpoint) <sup>a</sup>	> 200		Deg. F	1	06/23/06	CP	SW846 1010
Solids, Percent	78.9		%	1	06/22/06	CP	EPA 160.3 M
Sulfide Reactivity	< 50	50	mg/kg	1	06/29/06	SJL	SW846 CHAP7

(a) Not ignitable

RL = Reporting Limit

Report of Analysis

Client Sample ID:	PC-TP-116539-GRID12	Date Sampled:	06/20/06
Lab Sample ID:	F41620-6A	Date Received:	06/22/06
Matrix:	SO - Soil	Percent Solids:	78.9
Method:	SW846 8260B SW846 1311		
Project:	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	C0041836.D	10	06/29/06	KW	06/27/06	OP17038	VC1691
Run #2							

Run #	Purge Volume
Run #1	5.0 ml
Run #2	

VOA TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
71-43-2	Benzene	ND	D018	0.50	0.010	0.0050	mg/l	
108-90-7	Chlorobenzene	ND	D021	100	0.020	0.0050	mg/l	
67-66-3	Chloroform	ND	D022	6.0	0.020	0.0050	mg/l	
56-23-5	Carbon tetrachloride	ND	D019	0.50	0.020	0.0050	mg/l	
75-35-4	1,1-Dichloroethylene	ND	D029	0.70	0.020	0.0050	mg/l	
107-06-2	1,2-Dichloroethane	ND	D028	0.50	0.020	0.0050	mg/l	
106-46-7	p-Dichlorobenzene	ND	D027	7.5	0.020	0.0050	mg/l	
78-93-3	Methyl ethyl ketone	ND	D035	200	0.10	0.025	mg/l	
127-18-4	Tetrachloroethylene	ND	D039	0.70	0.020	0.0050	mg/l	
79-01-6	Trichloroethylene	ND	D040	0.50	0.020	0.0050	mg/l	
75-01-4	Vinyl chloride	ND	D043	0.20	0.010	0.0050	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	105%		86-115%
2037-26-5	Toluene-D8	100%		86-112%
460-00-4	4-Bromofluorobenzene	104%		83-119%
17060-07-0	1,2-Dichloroethane-D4	103%		73-126%

ND = Not detected      MDL - Method Detection Limit      J = Indicates an estimated value  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

## Report of Analysis

2.12  
2

Client Sample ID: PC-TP-116539-GRID12	Date Sampled: 06/20/06
Lab Sample ID: F41620-6A	Date Received: 06/22/06
Matrix: SO - Soil	Percent Solids: 78.9
Method: SW846 8270C SW846 3510C	
Project: Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	L032386.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	1.0 ml
Run #2		

**ABN TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	D023	200	0.050	0.020	mg/l	
	3&4-Methylphenol	ND	D024	200	0.050	0.020	mg/l	
87-86-5	Pentachlorophenol	ND	D037	100	0.25	0.10	mg/l	
95-95-4	2,4,5-Trichlorophenol	ND	D041	400	0.050	0.020	mg/l	
88-06-2	2,4,6-Trichlorophenol	ND	D042	2.0	0.050	0.020	mg/l	
106-46-7	1,4-Dichlorobenzene	ND	D027	7.5	0.050	0.010	mg/l	
121-14-2	2,4-Dinitrotoluene	ND	D030	0.13	0.050	0.020	mg/l	
118-74-1	Hexachlorobenzene	ND	D032	0.13	0.050	0.010	mg/l	
87-68-3	Hexachlorobutadiene	ND	D033	0.50	0.050	0.020	mg/l	
67-72-1	Hexachloroethane	ND	D034	3.0	0.050	0.020	mg/l	
98-95-3	Nitrobenzene	ND	D036	2.0	0.050	0.010	mg/l	
110-86-1	Pyridine	ND	D038	5.0	0.10	0.030	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
367-12-4	2-Fluorophenol	44%		19-90%
4165-62-2	Phenol-d5	27%		10-68%
118-79-6	2,4,6-Tribromophenol	95%		36-137%
4165-60-0	Nitrobenzene-d5	87%		49-119%
321-60-8	2-Fluorobiphenyl	91%		45-118%
1718-51-0	Terphenyl-d14	82%		46-135%

ND = Not detected      MDL - Method Detection Limit      J = Indicates an estimated value  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

## Report of Analysis

Client Sample ID: PC-TP-116539-GRID12	Date Sampled: 06/20/06
Lab Sample ID: F41620-6A	Date Received: 06/22/06
Matrix: SO - Soil	Percent Solids: 78.9
Method: SW846 8081A SW846 3510C	
Project: Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	TT00807.D	1	06/29/06	AA	06/28/06	OP17053	GTT35
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

**Pesticide TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	D013	0.40	0.00050	0.00020	mg/l	
12789-03-6	Chlordane	ND	D020	0.030	0.0050	0.0025	mg/l	
72-20-8	Endrin	ND	D012	0.020	0.0010	0.00040	mg/l	
76-44-8	Heptachlor	ND	D031	0.0080	0.00050	0.00020	mg/l	
1024-57-3	Heptachlor epoxide	ND	D031	0.0080	0.00050	0.00020	mg/l	
72-43-5	Methoxychlor	ND	D014	10	0.0010	0.00040	mg/l	
8001-35-2	Toxaphene	ND	D015	0.50	0.025	0.015	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	101%		60-138%
2051-24-3	Decachlorobiphenyl	96%		31-148%

ND = Not detected    MDL - Method Detection Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)  
E = Indicates value exceeds calibration range

J = Indicates an estimated value  
B = Indicates analyte found in associated method blank  
N = Indicates presumptive evidence of a compound

Report of Analysis

2.12  
2

Client Sample ID:	PC-TP-116539-GRID12	Date Sampled:	06/20/06
Lab Sample ID:	F41620-6A	Date Received:	06/22/06
Matrix:	SO - Soil	Percent Solids:	78.9
Method:	SW846 8151 SW846 1311		
Project:	Paradise Creek		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	DD57055.D	1	06/29/06	ATX	06/28/06	T:OP6063	T:GDD1067
Run #2							

	Initial Volume	Final Volume
Run #1	1000 ml	10.0 ml
Run #2		

Herbicide TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
94-75-7	2,4-D	ND	D016	10	0.0015	0.0011	mg/l	
93-72-1	2,4,5-TP (Silvex)	ND	D017	1.0	0.00020	0.000060	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
19719-28-9	2,4-DCAA	151%		23-171%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

ND = Not detected MDL - Method Detection Limit  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

212  
2

Client Sample ID: PC-TP-116539-GRID12	Date Sampled: 06/20/06
Lab Sample ID: F41620-6A	Date Received: 06/22/06
Matrix: SO - Soil	Percent Solids: 78.9
Project: Paradise Creek	

Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Arsenic <sup>a</sup>	0.0056 U	D004	5.0	0.020	0.0056	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>
Barium	2.2	D005	100	1.0	0.20	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>
Cadmium	0.023	D006	1.0	0.0050	0.00030	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>
Chromium	0.0015 B	D007	5.0	0.010	0.00060	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>
Lead	0.28	D008	5.0	0.050	0.0017	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>
Mercury	0.0012 B	D009	0.20	0.010	0.0010	mg/l	1	06/27/06	06/27/06	MS SW846 7470A <sup>1</sup>
Selenium <sup>b</sup>	0.040 U	D010	1.0	0.10	0.040	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>
Silver	0.00090 U	D011	5.0	0.010	0.00090	mg/l	1	06/27/06	06/27/06	RS SW846 6010B <sup>2</sup>

- (1) Instrument QC Batch: MA5055
- (2) Instrument QC Batch: MA5056
- (3) Prep QC Batch: MP9826
- (4) Prep QC Batch: MP9828

- (a) Elevated RL/MDL due to negative bias of Method Blank.
- (b) Elevated RL/MDL due to positive bias of Method Blank.

RL = Reporting Limit MDL = Method Detection Limit U = Indicates a result < MDL  
MCL = Maximum Contamination Level (40 CFR 261 6/96) B = Indicates a result > = MDL but < RL



## Misc. Forms

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## Custody Documents and Other Forms

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Includes the following where applicable:

- Chain of Custody



**ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION**

ACCUTEST'S JOB NUMBER: F41620 CLIENT: SHAW PROJECT: Paradise Creek  
 DATE/TIME RECEIVED: 6/22/06 19:00 # OF COOLERS RECEIVED: 1 COOLER TEMPS: 2.4  
 METHOD OF DELIVERY: FEDEX UPS ACCUTEST COURIER GREYHOUND DELIVERY OTHER  
 AIRBILL NUMBERS: 85748739 8402

**COOLER INFORMATION**

- CUSTODY SEAL NOT PRESENT OR NOT INTACT
- CHAIN OF CUSTODY NOT RECEIVED (COC)
- ANALYSIS REQUESTED IS UNCLEAR OR MISSING
- SAMPLE DATES OR TIMES UNCLEAR OR MISSING
- TEMPERATURE CRITERIA NOT MET

**TRIP BLANK INFORMATION**

- TRIP BLANK NOT PROVIDED
- TRIP BLANK NOT ON COC
- TRIP BLANK INTACT
- TRIP BLANK NOT INTACT
- RECEIVED WATER TRIP BLANK
- RECEIVED SOIL TRIP BLANK

**MISC. INFORMATION**

NUMBER OF ENCORES? 0  
 NUMBER OF 5035 FIELD KITS? 0  
 NUMBER OR LAB FILTERED METALS? 0

SUMMARY OF COMMENTS: No date + time on soil jars

**SAMPLE INFORMATION**

- SAMPLE LABELS PRESENT ON ALL BOTTLES
- CORRECT NUMBER OF CONTAINERS USED
- SAMPLE RECEIVED IMPROPERLY PRESERVED
- INSUFFICIENT VOLUME FOR ANALYSIS
- TIMES ON COC DON'T MATCH LABEL
- ID'S ON COC DON'T MATCH LABEL
- VOC VIALS HAVE HEADSPACE (MACRO BUBBLES)
- BOTTLES RECEIVED BUT ANALYSIS NOT REQUESTED
- NO BOTTLES RECEIVED FOR ANALYSIS REQUESTED
- UNCLEAR FILTERING INSTRUCTIONS
- UNCLEAR COMPOSITING INSTRUCTIONS
- SAMPLE CONTAINER(S) RECEIVED BROKEN
- % SOLIDS JAR NOT RECEIVED
- 5035 FIELD KIT FROZEN WITHIN 48 HOURS

F41620: Chain of Custody

Page 2 of 2



## GC/MS Volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Leachate Blank Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17038-LB	C0041830.D	10	06/29/06	KW	06/27/06	OP17038	VC1691

4.1  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Result	RL	MDL	Units	Q
71-43-2	Benzene	ND	10	5.0	ug/l	
108-90-7	Chlorobenzene	ND	20	5.0	ug/l	
67-66-3	Chloroform	ND	20	5.0	ug/l	
56-23-5	Carbon tetrachloride	ND	20	5.0	ug/l	
75-35-4	1,1-Dichloroethylene	ND	20	5.0	ug/l	
107-06-2	1,2-Dichloroethane	ND	20	5.0	ug/l	
106-46-7	p-Dichlorobenzene	ND	20	5.0	ug/l	
78-93-3	Methyl ethyl ketone	ND	100	25	ug/l	
127-18-4	Tetrachloroethylene	ND	20	5.0	ug/l	
79-01-6	Trichloroethylene	ND	20	5.0	ug/l	
75-01-4	Vinyl chloride	ND	10	5.0	ug/l	

CAS No.	Surrogate Recoveries	Limits	
1868-53-7	Dibromofluoromethane	108%	86-115%
17060-07-0	1,2-Dichloroethane-D4	105%	73-126%
2037-26-5	Toluene-D8	99%	86-112%
460-00-4	4-Bromofluorobenzene	105%	83-119%

# Blank Spike Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VC1691-BS	C0041829.D	10	06/29/06	KW	n/a	n/a	VC1691

4.2  
7

The QC reported here applies to the following samples:

Method: SW846 8260B

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
71-43-2	Benzene	250	279	112	80-120
108-90-7	Chlorobenzene	250	250	100	82-112
67-66-3	Chloroform	250	273	109	78-118
56-23-5	Carbon tetrachloride	250	262	105	69-137
75-35-4	1,1-Dichloroethylene	250	269	108	67-134
107-06-2	1,2-Dichloroethane	250	262	105	68-121
106-46-7	p-Dichlorobenzene	250	252	101	77-113
78-93-3	Methyl ethyl ketone	1250	1100	88	58-127
127-18-4	Tetrachloroethylene	250	273	109	75-126
79-01-6	Trichloroethylene	250	277	111	80-115
75-01-4	Vinyl chloride	250	267	107	70-151

CAS No.	Surrogate Recoveries	BSP	Limits
1868-53-7	Dibromofluoromethane	105%	86-115%
17060-07-0	1,2-Dichloroethane-D4	107%	73-126%
2037-26-5	Toluene-D8	98%	86-112%
460-00-4	4-Bromofluorobenzene	101%	83-119%

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
(a) F41620-1AMS	C0041838.D	10	06/29/06	KW	n/a	n/a	VC1691
(a) F41620-1AMSD	C0041839.D	10	06/29/06	KW	n/a	n/a	VC1691
F41620-1A	C0041831.D	10	06/29/06	KW	06/27/06	OP17038	VC1691

The QC reported here applies to the following samples:

Method: SW846 8260B

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-1A ug/l	Spike Q ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
71-43-2	Benzene	ND	250	274	110	262	105	4	72-125/7
108-90-7	Chlorobenzene	ND	250	241	96	236	94	2	79-113/7
67-66-3	Chloroform	ND	250	263	105	258	103	2	75-120/8
56-23-5	Carbon tetrachloride	ND	250	247	99	252	101	2	56-145/12
75-35-4	1,1-Dichloroethylene	ND	250	250	100	251	100	0	61-137/15
107-06-2	1,2-Dichloroethane	ND	250	257	103	259	104	1	64-124/7
106-46-7	p-Dichlorobenzene	ND	250	230	92	228	91	1	74-112/7
78-93-3	Methyl ethyl ketone	ND	1250	1200	96	1210	97	1	51-128/10
127-18-4	Tetrachloroethylene	ND	250	243	97	247	99	2	70-126/9
79-01-6	Trichloroethylene	ND	250	266	106	256	102	4	73-117/10
75-01-4	Vinyl chloride	ND	250	263	105	254	102	3	63-161/18

CAS No.	Surrogate Recoveries	MS	MSD	F41620-1A	Limits
1868-53-7	Dibromofluoromethane	104%	103%	108%	86-115%
17060-07-0	1,2-Dichloroethane-D4	109%	111%	101%	73-126%
2037-26-5	Toluene-D8	97%	96%	100%	86-112%
460-00-4	4-Bromofluorobenzene	97%	97%	104%	83-119%

(a) SAMPLE NOT YET APPROVED BY LAB. DO NOT REPORT.

4.3  
4

# Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
(a) F41620-4ADUP	C0041837.D	10	06/29/06	KW	n/a	n/a	VC1691
F41620-4A	C0041834.D	10	06/29/06	KW	06/27/06	OP17038	VC1691

4.4  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-4A		Q	RPD	Limits
		ug/l	DUP Q ug/l			
71-43-2	Benzene	ND	ND		nc	
108-90-7	Chlorobenzene	ND	ND		nc	
67-66-3	Chloroform	ND	ND		nc	
56-23-5	Carbon tetrachloride	ND	ND		nc	
75-35-4	1,1-Dichloroethylene	ND	ND		nc	
107-06-2	1,2-Dichloroethane	ND	ND		nc	
106-46-7	p-Dichlorobenzene	ND	ND		nc	
78-93-3	Methyl ethyl ketone	ND	ND		nc	
127-18-4	Tetrachloroethylene	ND	ND		nc	
79-01-6	Trichloroethylene	ND	ND		nc	
75-01-4	Vinyl chloride	ND	ND		nc	

CAS No.	Surrogate Recoveries	DUP	F41620-4A	Limits
1868-53-7	Dibromofluoromethane	106%	106%	86-115%
17060-07-0	1,2-Dichloroethane-D4	105%	103%	73-126%
2037-26-5	Toluene-D8	100%	99%	86-112%
460-00-4	4-Bromofluorobenzene	101%	103%	83-119%

(a) SAMPLE NOT YET APPROVED BY LAB. DO NOT REPORT.



## GC/MS Semi-volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Leachate Blank Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17054-LB	L032377.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675

The QC reported here applies to the following samples:

Method: SW846 8270C

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Result	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	50	20	ug/l	
	3&4-Methylphenol	ND	50	20	ug/l	
87-86-5	Pentachlorophenol	ND	250	100	ug/l	
95-95-4	2,4,5-Trichlorophenol	ND	50	20	ug/l	
88-06-2	2,4,6-Trichlorophenol	ND	50	20	ug/l	
106-46-7	1,4-Dichlorobenzene	ND	50	10	ug/l	
121-14-2	2,4-Dinitrotoluene	ND	50	20	ug/l	
118-74-1	Hexachlorobenzene	ND	50	10	ug/l	
87-68-3	Hexachlorobutadiene	ND	50	20	ug/l	
67-72-1	Hexachloroethane	ND	50	20	ug/l	
98-95-3	Nitrobenzene	ND	50	10	ug/l	
110-86-1	Pyridine	ND	100	30	ug/l	

CAS No.	Surrogate Recoveries	Limits	
367-12-4	2-Fluorophenol	58%	19-90%
4165-62-2	Phenol-d5	39%	10-68%
118-79-6	2,4,6-Tribromophenol	81%	36-137%
4165-60-0	Nitrobenzene-d5	75%	49-119%
321-60-8	2-Fluorobiphenyl	77%	45-118%
1718-51-0	Terphenyl-d14	81%	46-135%

5.1  
5

# Blank Spike Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17054-LBS	L032376.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675

The QC reported here applies to the following samples:

Method: SW846 8270C

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
95-48-7	2-Methylphenol	500	305	61	48-90
	3&4-Methylphenol	1000	559	56	43-94
87-86-5	Pentachlorophenol	1000	784	78	62-120
95-95-4	2,4,5-Trichlorophenol	500	424	85	67-103
88-06-2	2,4,6-Trichlorophenol	500	414	83	68-104
106-46-7	1,4-Dichlorobenzene	500	366	73	46-96
121-14-2	2,4-Dinitrotoluene	500	448	90	64-107
118-74-1	Hexachlorobenzene	500	432	86	69-103
87-68-3	Hexachlorobutadiene	500	394	79	48-100
67-72-1	Hexachloroethane	500	359	72	41-98
98-95-3	Nitrobenzene	500	400	80	60-102
110-86-1	Pyridine	500	131	26	17-65

CAS No.	Surrogate Recoveries	BSP	Limits
367-12-4	2-Fluorophenol	45%	19-90%
4165-62-2	Phenol-d5	28%	10-68%
118-79-6	2,4,6-Tribromophenol	92%	36-137%
4165-60-0	Nitrobenzene-d5	84%	49-119%
321-60-8	2-Fluorobiphenyl	85%	45-118%
1718-51-0	Terphenyl-d14	89%	46-135%

5.2  
5

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17054-MS	L032382.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675
OP17054-MSD	L032383.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675
F41620-3A	L032381.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675

The QC reported here applies to the following samples:

Method: SW846 8270C

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-3A ug/l	Spike Q	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
95-48-7	2-Methylphenol	ND	500	298	60	321	64	7	40-102/25
	3&4-Methylphenol	ND	1000	556	56	586	59	5	39-97/24
87-86-5	Pentachlorophenol	ND	1000	826	83	857	86	4	53-128/22
95-95-4	2,4,5-Trichlorophenol	ND	500	423	85	433	87	2	56-110/19
88-06-2	2,4,6-Trichlorophenol	ND	500	418	84	430	86	3	55-112/19
106-46-7	1,4-Dichlorobenzene	ND	500	357	71	381	76	7	43-102/24
121-14-2	2,4-Dinitrotoluene	ND	500	443	89	445	89	0	60-108/18
118-74-1	Hexachlorobenzene	ND	500	449	90	464	93	3	66-106/16
87-68-3	Hexachlorobutadiene	ND	500	370	74	402	80	8	46-107/26
67-72-1	Hexachloroethane	ND	500	331	66	369	74	11	39-105/25
98-95-3	Nitrobenzene	ND	500	404	81	426	85	5	50-107/25
110-86-1	Pyridine	ND	500	118	24	139	28	16	19-77/41

CAS No.	Surrogate Recoveries	MS	MSD	F41620-3A	Limits
367-12-4	2-Fluorophenol	43%	47%	43%	19-90%
4165-62-2	Phenol-d5	27%	29%	26%	10-68%
118-79-6	2,4,6-Tribromophenol	93%	98%	99%	36-137%
4165-60-0	Nitrobenzene-d5	81%	87%	87%	49-119%
321-60-8	2-Fluorobiphenyl	85%	88%	89%	45-118%
1718-51-0	Terphenyl-d14	84%	86%	93%	46-135%



# Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17054-DUP	L032379.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675
F41620-1A	L032378.D	1	06/29/06	NJ	06/28/06	OP17054	SL1675

The QC reported here applies to the following samples:

Method: SW846 8270C

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-1A		Q	RPD	Limits
		ug/l	DUP Q ug/l			
95-48-7	2-Methylphenol	ND	ND		nc	
	3&4-Methylphenol	ND	ND		nc	
87-86-5	Pentachlorophenol	ND	ND		nc	
95-95-4	2,4,5-Trichlorophenol	ND	ND		nc	
88-06-2	2,4,6-Trichlorophenol	ND	ND		nc	
106-46-7	1,4-Dichlorobenzene	ND	ND		nc	
121-14-2	2,4-Dinitrotoluene	ND	ND		nc	
118-74-1	Hexachlorobenzene	ND	ND		nc	
87-68-3	Hexachlorobutadiene	ND	ND		nc	
67-72-1	Hexachloroethane	ND	ND		nc	
98-95-3	Nitrobenzene	ND	ND		nc	
110-86-1	Pyridine	ND	ND		nc	

CAS No.	Surrogate Recoveries	DUP	F41620-1A	Limits
367-12-4	2-Fluorophenol	44%	41%	19-90%
4165-62-2	Phenol-d5	27%	26%	10-68%
118-79-6	2,4,6-Tribromophenol	98%	91%	36-137%
4165-60-0	Nitrobenzene-d5	84%	81%	49-119%
321-60-8	2-Fluorobiphenyl	86%	83%	45-118%
1718-51-0	Terphenyl-d14	91%	86%	46-135%

5.4

5



IT'S ALL IN THE CHEMISTRY

## GC Volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Method Blank Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GUV1317-MB	UV022700.D1		06/23/06	MM	n/a	n/a	GUV1317

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-1, F41620-2, F41620-3, F41620-4, F41620-6

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	5.0	2.5	mg/kg	

CAS No.	Surrogate Recoveries		Limits
460-00-4	4-Bromofluorobenzene	88%	62-135%
98-08-8	aaa-Trifluorotoluene	84%	65-118%



# Method Blank Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GUV1318-MB	UV022731.D1		06/26/06	MM	n/a	n/a	GUV1318

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-5

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	5.0	2.5	mg/kg	

CAS No.	Surrogate Recoveries		Limits
460-00-4	4-Bromofluorobenzene	103%	62-135%
98-08-8	aaa-Trifluorotoluene	91%	65-118%



# Blank Spike Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GUV1317-BS	UV022699.D1		06/23/06	MM	n/a	n/a	GUV1317

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-1, F41620-2, F41620-3, F41620-4, F41620-6

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH-GRO (C6-C10)	20	18.0	90	66-122

CAS No.	Surrogate Recoveries	BSP	Limits
460-00-4	4-Bromofluorobenzene	105%	62-135%
98-08-8	aaa-Trifluorotoluene	101%	65-118%

6.2  
6

# Blank Spike Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GUV1318-BS	UV022730.D1		06/26/06	MM	n/a	n/a	GUV1318

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-5

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH-GRO (C6-C10)	20	17.6	88	66-122

CAS No.	Surrogate Recoveries	BSP	Limits
460-00-4	4-Bromofluorobenzene	108%	62-135%
98-08-8	aaa-Trifluorotoluene	100%	65-118%

6.2  
6

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F41620-1MS	UV022724.D1		06/23/06	MM	n/a	n/a	GUV1317
F41620-1MSD	UV022725.D1		06/23/06	MM	n/a	n/a	GUV1317
F41620-1 <sup>a</sup>	UV022701.D1		06/23/06	MM	n/a	n/a	GUV1317

The QC reported here applies to the following samples:

Method: SW846 8015

F41620-1, F41620-2, F41620-3, F41620-4, F41620-6

CAS No.	Compound	F41620-1 mg/kg	Spike mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH-GRO (C6-C10)	ND	43.6	26.9	62	35.1	80	26*	37-142/17

CAS No.	Surrogate Recoveries	MS	MSD	F41620-1	Limits
460-00-4	4-Bromofluorobenzene	55%*	113%	112%	62-135%
98-08-8	aaa-Trifluorotoluene	59%*	92%	99%	65-118%

(a) Sample was received in a bulk container but was not preserved within 48 hours of sampling.



# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F41623-1MS	UV022742.D1		06/26/06	MM	n/a	n/a	GUV1318
F41623-1MSD	UV022743.D1		06/26/06	MM	n/a	n/a	GUV1318
F41623-1	UV022734.D1		06/26/06	MM	n/a	n/a	GUV1318

The QC reported here applies to the following samples:

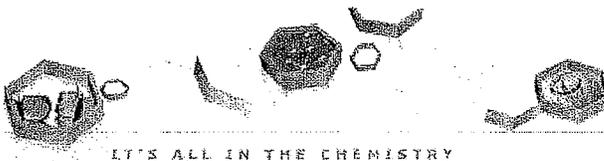
Method: SW846 8015

F41620-5

CAS No.	Compound	F41623-1 mg/kg	Spike Q mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH-GRO (C6-C10)	ND	33.6	27.6	82	26.6	79	4	37-142/17

CAS No.	Surrogate Recoveries	MS	MSD	F41623-1	Limits
460-00-4	4-Bromofluorobenzene	105%	104%	105%	62-135%
98-08-8	aaa-Trifluorotoluene	93%	84%	91%	65-118%

63  
6



## GC Semi-volatiles

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## QC Data Summaries

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7

Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Method Blank Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17013-MB	ST48602.D	1	06/27/06	ME	06/26/06	OP17013	GST1418

The QC reported here applies to the following samples:

Method: SW846 8082

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	8.3	ug/kg	
11104-28-2	Aroclor 1221	ND	17	13	ug/kg	
11141-16-5	Aroclor 1232	ND	17	13	ug/kg	
53469-21-9	Aroclor 1242	ND	17	8.3	ug/kg	
12672-29-6	Aroclor 1248	ND	17	8.3	ug/kg	
11097-69-1	Aroclor 1254	ND	17	8.3	ug/kg	
11096-82-5	Aroclor 1260	ND	17	8.3	ug/kg	
11100-14-4	Aroclor 1268	ND	17	8.3	ug/kg	
	Total PCBs	ND	33		ug/kg	

CAS No.	Surrogate Recoveries	Limits	
877-09-8	Tetrachloro-m-xylene	88%	52-136%
2051-24-3	Decachlorobiphenyl	107%	49-148%

7.1  
7

# Method Blank Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17013-MB	ST48638.D	1	06/28/06	ME	06/26/06	OP17013	GST1419

The QC reported here applies to the following samples:

Method: SW846 8082

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	8.3	ug/kg	
11104-28-2	Aroclor 1221	ND	17	13	ug/kg	
11141-16-5	Aroclor 1232	ND	17	13	ug/kg	
53469-21-9	Aroclor 1242	ND	17	8.3	ug/kg	
12672-29-6	Aroclor 1248	ND	17	8.3	ug/kg	
11097-69-1	Aroclor 1254	ND	17	8.3	ug/kg	
11096-82-5	Aroclor 1260	ND	17	8.3	ug/kg	
11100-14-4	Aroclor 1268	ND	17	8.3	ug/kg	
	Total PCBs	ND	33		ug/kg	

CAS No.	Surrogate Recoveries	Limits	
877-09-8	Tetrachloro-m-xylene	98%	52-136%
2051-24-3	Decachlorobiphenyl	96%	49-148%

7.1  
7

# Method Blank Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17034-MB	LL11094.D	1	06/29/06	VS	06/27/06	OP17034	GLL410

The QC reported here applies to the following samples:

Method: SW846 8015 M

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries		Limits
84-15-1	o-Terphenyl	107%	57-115%

7.1  
7

# Leachate Blank Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17053-LB	TT00796.D	1	06/29/06	AA	06/28/06	OP17053	GTT35

The QC reported here applies to the following samples:

Method: SW846 8081A

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Result	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	0.50	0.20	ug/l	
12789-03-6	Chlordane	ND	5.0	2.5	ug/l	
72-20-8	Endrin	ND	1.0	0.40	ug/l	
76-44-8	Heptachlor	ND	0.50	0.20	ug/l	
1024-57-3	Heptachlor epoxide	ND	0.50	0.20	ug/l	
72-43-5	Methoxychlor	ND	1.0	0.40	ug/l	
8001-35-2	Toxaphene	ND	25	15	ug/l	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	99%	60-138%
2051-24-3	Decachlorobiphenyl	93%	31-148%

7.2



# Blank Spike Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17053-LBS	TT00795.D	1	06/29/06	AA	06/28/06	OP17053	GTT35

The QC reported here applies to the following samples:

Method: SW846 8081A

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
58-89-9	gamma-BHC (Lindane)	5	4.3	86	69-137
72-20-8	Endrin	5	5.3	106	78-134
76-44-8	Heptachlor	5	4.2	84	62-137
1024-57-3	Heptachlor epoxide	5	4.6	92	74-130
72-43-5	Methoxychlor	5	5.4	108	77-131

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	79%	60-138%
2051-24-3	Decachlorobiphenyl	96%	31-148%

7.3  
7

# Blank Spike Summary

Job Number: F41620  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17013-BS	ST48601.D	1	06/27/06	ME	06/26/06	OP17013	GST1418

The QC reported here applies to the following samples:

Method: SW846 8082

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Spike ug/kg	BSP ug/kg	BSP %	Limits
12674-11-2	Aroclor 1016	133	134	101	75-123
11096-82-5	Aroclor 1260	133	147	110	72-124

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	102%	52-136%
2051-24-3	Decachlorobiphenyl	120%	49-148%

7.3  
7

# Blank Spike Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17034-BS	LL11093.D	1	06/29/06	VS	06/27/06	OP17034	GLL410

The QC reported here applies to the following samples:

Method: SW846 8015 M

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH (C10-C28)	33.3	26.7	80	62-114

CAS No.	Surrogate Recoveries	BSP	Limits
84-15-1	o-Terphenyl	101%	57-115%

7.3  
7

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17053-MS	TT00803.D	1	06/29/06	AA	06/28/06	OP17053	GTT35
OP17053-MSD	TT00804.D	1	06/29/06	AA	06/28/06	OP17053	GTT35
F41620-5A	TT00802.D	1	06/29/06	AA	06/28/06	OP17053	GTT35

The QC reported here applies to the following samples:

Method: SW846 8081A

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-5A ug/l	Spike Q ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
58-89-9	gamma-BHC (Lindane)	ND	5	5.7	114	5.5	110	4	75-140/21
72-20-8	Endrin	ND	5	6.5	130	6.0	120	8	72-149/21
76-44-8	Heptachlor	ND	5	5.5	110	5.2	104	6	74-136/25
1024-57-3	Heptachlor epoxide	ND	5	5.6	112	5.4	108	4	75-138/21
72-43-5	Methoxychlor	ND	5	6.1	122	5.9	118	3	69-145/27

CAS No.	Surrogate Recoveries	MS	MSD	F41620-5A	Limits
877-09-8	Tetrachloro-m-xylene	100%	100%	99%	60-138%
2051-24-3	Decachlorobiphenyl	71%	69%	59%	31-148%

7.4



# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17013-MS	ST48656.D	1	06/28/06	ME	06/26/06	OP17013	GST1419
OP17013-MSD	ST48657.D	1	06/28/06	ME	06/26/06	OP17013	GST1419
F41636-7	ST48655.D	1	06/28/06	ME	06/26/06	OP17013	GST1419

The QC reported here applies to the following samples:

Method: SW846 8082

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	F41636-7 ug/kg	Spike Q	ug/kg	MS ug/kg	MS %	MSD ug/kg	MSD %	RPD	Limits Rec/RPD
12674-11-2	Aroclor 1016	17 U	134	88.6	66	93.8	68	6	54-138/22	
11096-82-5	Aroclor 1260	17 U	134	88.1	66	86.2	63	2	46-138/21	

CAS No.	Surrogate Recoveries	MS	MSD	F41636-7	Limits
877-09-8	Tetrachloro-m-xylene	67%	65%	56%	52-136%
2051-24-3	Decachlorobiphenyl	59%	55%	52%	49-148%

7.4



# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17034-MS	LL11098.D	20	06/29/06	VS	06/27/06	OP17034	GLL410
OP17034-MSD	LL11099.D	10	06/29/06	VS	06/27/06	OP17034	GLL410
F41620-2	LL11097.D	8	06/29/06	VS	06/27/06	OP17034	GLL410

The QC reported here applies to the following samples:

Method: SW846 8015 M

F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

CAS No.	Compound	F41620-2 mg/kg	Spike Q mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH (C10-C28)	570	47.3	1020	952* a	396	-367* a	88*	31-136/36

CAS No.	Surrogate Recoveries	MS	MSD	F41620-2	Limits
84-15-1	o-Terphenyl	0%* b	88%	86%	57-115%

(a) Outside control limits due to high level in sample relative to spike amount.

(b) Outside control limits due to dilution.

7.4



# Duplicate Summary

Job Number: F41620  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17053-DUP	TT00798.D	1	06/29/06	AA	06/28/06	OP17053	GTT35
F41620-1A	TT00797.D	1	06/29/06	AA	06/28/06	OP17053	GTT35

The QC reported here applies to the following samples:

Method: SW846 8081A

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-1A		RPD	Limits
		ug/l	DUP Q		
58-89-9	gamma-BHC (Lindane)	ND	ND	nc	
12789-03-6	Chlordane	ND	ND	nc	
72-20-8	Endrin	ND	ND	nc	
76-44-8	Heptachlor	ND	ND	nc	
1024-57-3	Heptachlor epoxide	ND	ND	nc	
72-43-5	Methoxychlor	ND	ND	nc	

CAS No.	Surrogate Recoveries	DUP	F41620-1A	Limits
877-09-8	Tetrachloro-m-xylene	98%	100%	60-138%
2051-24-3	Decachlorobiphenyl	98%	98%	31-148%

7.5  
7



## Metals Analysis

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## QC Data Summaries



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Includes the following where applicable:

- Method Blank Summaries
- Matrix Spike and Duplicate Summaries
- Blank Spike and Lab Control Sample Summaries
- Serial Dilution Summaries

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F41620  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP9826  
Matrix Type: LEACHATE

Methods: SW846 6010B  
Units: mg/l

Prep Date: 06/27/06 06/27/06 06/27/06

Metal	RL	IDL	MB raw	final	MB raw	final	MB raw	final
Aluminum	0.20	.018						
Antimony	0.0060	.0034						
Arsenic	0.020	.0028	-0.0012	<0.020(a)	-0.011	<0.020(a)	-0.012	<0.020(a)
Barium	1.0	.0004	0.00019	<1.0	0.0057	<1.0	0.014	<1.0
Beryllium	0.0050	.0004						
Cadmium	0.0050	.0002	-0.000010	<0.0050	0.0	<0.0050	0.00013	<0.0050
Calcium	5.0	.042						
Chromium	0.010	.0006	-0.000020	<0.010	0.0034	<0.010	-0.000070	<0.010
Cobalt	0.050	.0006						
Copper	0.025	.0009						
Iron	0.30	.012						
Lead	0.050	.0017	0.0013	<0.050	0.00023	<0.050	0.0024	<0.050
Magnesium	5.0	.0043						
Manganese	0.015	.0006						
Molybdenum	0.050	.0013						
Nickel	0.040	.0008						
Potassium	10	.01						
Selenium	0.10	.002	-0.00086	<0.10(b)	0.032	<0.10(b)	0.026	<0.10(b)
Silver	0.010	.0009	-0.00032	<0.010	-0.000010	<0.010	-0.00062	<0.010
Sodium	10	.5						
Thallium	0.010	.0023						
Tin	0.050	.0031						
Vanadium	0.050	.0006						
Zinc	0.10	.0013						

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes

(\*) Outside of QC limits

(anr) Analyte not requested

(a) Elevated RL/MDL due to negative bias of Method Blank.

(b) Elevated RL/MDL due to positive bias of Method Blank.

8.1.1

8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	F41620-1A Original	DUP	RPD	QC Limits	F41620-1A Original MS	Spikelot MPFLICP1 % Rec	QC Limits
Aluminum							
Antimony							
Arsenic	0.0	0.0 (a)	NC	0-20	0.0	2.0 (a)	80-120
Barium	2.1	2.1	0.0	0-20	2.1	4.1	80-120
Beryllium							
Cadmium	0.058	0.058	0.0	0-20	0.058	0.11	80-120
Calcium							
Chromium	0.019	0.018	5.4	0-20	0.019	0.21	80-120
Cobalt							
Copper							
Iron							
Lead	1.6	1.6	0.0	0-20	1.6	2.1	80-120
Magnesium							
Manganese							
Molybdenum							
Nickel							
Potassium							
Selenium	0.036	0.035(b)	2.8	0-20	0.036	2.2 (b)	80-120
Silver	0.0	0.0	NC	0-20	0.0	0.058	80-120
Sodium							
Thallium							
Tin							
Vanadium							
Zinc							

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested  
 (a) Elevated RL/MDL due to negative bias of Method Blank.  
 (b) Elevated RL/MDL due to positive bias of Method Blank.

8.1.2  
 8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	F41620-1A Original MSD	Spikelot MPFLICP1 % Rec	MSD RPD	QC Limit	Original DUP	RPD	QC Limits
Aluminum							
Antimony							
Arsenic	0.0	2.0 (a)	2.0	100.0	0.0	20	
Barium	2.1	4.1	2.0	100.0	0.0	20	
Beryllium							
Cadmium	0.058	0.11	0.050	104.0	0.0	20	
Calcium							
Chromium	0.019	0.21	0.20	95.5	0.0	20	
Cobalt							
Copper							
Iron							
Lead	1.6	2.1	0.50	100.0	0.0	20	
Magnesium							
Manganese							
Molybdenum							
Nickel							
Potassium							
Selenium	0.036	2.2 (b)	2.0	108.2	0.0	20	
Silver	0.0	0.057	0.050	114.0	1.7	20	
Sodium							
Thallium							
Tin							
Vanadium							
Zinc							

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes

- (\*) Outside of QC limits
- (N) Matrix Spike Rec. outside of QC limits
- (anr) Analyte not requested
- (a) Elevated RL/MDL due to negative bias of Method Blank.
- (b) Elevated RL/MDL due to positive bias of Method Blank.

8.1.2

8

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	BSP Result	Spikelot MPFLICP1	% Rec	QC Limits	BSP Result	Spikelot MPFLICP1	% Rec	QC Limits
Aluminum								
Antimony								
Arsenic	2.0 (a)	2.0	100.0	80-120	2.0 (a)	2.0	100.0	80-120
Barium	2.0	2.0	100.0	80-120	2.0	2.0	100.0	80-120
Beryllium								
Cadmium	0.050	0.050	100.0	80-120	0.049	0.050	98.0	80-120
Calcium								
Chromium	0.21	0.20	105.0	80-120	0.20	0.20	100.0	80-120
Cobalt								
Copper								
Iron								
Lead	0.50	0.50	100.0	80-120	0.51	0.50	102.0	80-120
Magnesium								
Manganese								
Molybdenum								
Nickel								
Potassium								
Selenium	2.0 (b)	2.0	100.0	80-120	2.2 (b)	2.0	110.0	80-120
Silver	0.051	0.050	102.0	80-120	0.058	0.050	116.0	80-120
Sodium								
Thallium								
Tin								
Vanadium								
Zinc								

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested  
 (a) Elevated RL/MDL due to negative bias of Method Blank.  
 (b) Elevated RL/MDL due to positive bias of Method Blank.

8.1.3  
 8

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 06/27/06

Metal	BSP Result	Spikelot MPFLICP1	% Rec	QC Limits
Aluminum				
Antimony				
Arsenic	2.1 (a)	2.0	105.0	80-120
Barium	2.1	2.0	105.0	80-120
Beryllium				
Cadmium	0.050	0.050	100.0	80-120
Calcium				
Chromium	0.21	0.20	105.0	80-120
Cobalt				
Copper				
Iron				
Lead	0.50	0.50	100.0	80-120
Magnesium				
Manganese				
Molybdenum				
Nickel				
Potassium				
Selenium	2.2 (b)	2.0	110.0	80-120
Silver	0.052	0.050	104.0	80-120
Sodium				
Thallium				
Tin				
Vanadium				
Zinc				

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested  
 (a) Elevated RL/MDL due to negative bias of Method Blank.  
 (b) Elevated RL/MDL due to positive bias of Method Blank.

8.1.3  


SERIAL DILUTION RESULTS SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9826  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: ug/l

Prep Date: 06/27/06

Metal	F41620-1A Original	SDL 1:5	RPD	QC Limits
Aluminum				
Antimony				
Arsenic	0.00	0.00	NC	0-10
Barium	2060	2100	2.4	0-10
Beryllium				
Cadmium	58.2	61.0	4.7	0-10
Calcium				
Chromium	18.6	20.6	11.3 (a)	0-10
Cobalt				
Copper				
Iron				
Lead	1610	1680	4.6	0-10
Magnesium				
Manganese				
Molybdenum				
Nickel				
Potassium				
Selenium	36.3	35.1	3.4	0-10
Silver	0.00	0.00	NC	0-10
Sodium				
Thallium				
Tin				
Vanadium				
Zinc				

Associated samples MP9826: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes

(\*) Outside of QC limits

(anr) Analyte not requested

(a) Percent difference acceptable due to low initial sample concentration (< 50 times IDL).

8.1.4  
8

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F41620  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP9828  
Matrix Type: LEACHATE

Methods: SW846 7470A  
Units: mg/l

Prep Date: 06/27/06 06/27/06 06/27/06

Metal	RL	IDL	MB raw	final	MB raw	final	MB raw	final
Mercury	0.0010	.00008	-0.000023	<0.0010	-0.00013	<0.010	-0.00043	<0.010

Associated samples MP9828: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

8.2.1  
8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9828  
 Matrix Type: LEACHATE

Methods: SW846 7470A  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	F41620-1A Original	DUP	RPD	QC Limits	F41620-1A Original MS	Spikelot HGFLWS1	% Rec	QC Limits	
Mercury	0.0	0.0	NC	0-20	0.0	0.032	0.030	106.7	80-120

Associated samples MP9828: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested

8.2.2  
**8**

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41620  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP9828  
 Matrix Type: LEACHATE

Methods: SW846 7470A  
 Units: mg/l

Prep Date: 06/27/06 06/27/06

Metal	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.0030	0.0030	100.0	80-120	0.031	0.030	103.3	80-120

Associated samples MP9828: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

8.2.3

8

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41620  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP9828  
Matrix Type: LEACHATE

Methods: SW846 7470A  
Units: mg/l

Prep Date: 06/27/06

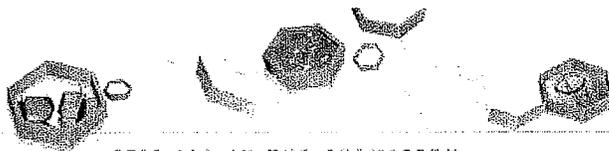
Metal	BSP Result	SpikeLot HGFLWS1	% Rec	QC Limits
Mercury	0.031	0.030	103.3	80-120

Associated samples MP9828: F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

8.2.3





## General Chemistry

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### QC Data Summaries

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Includes the following where applicable:

- Method Blank and Blank Spike Summaries
- Duplicate Summaries
- Matrix Spike Summaries

METHOD BLANK AND SPIKE RESULTS SUMMARY  
GENERAL CHEMISTRY

Login Number: F41620  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

Analyte	Batch ID	RL	MB Result	Units	Spike Amount	BSP Result	BSP %Recov	QC Limits
Cyanide Reactivity	GP8051/GN21169			mg/kg	5.0	0.18	3.5	0-100%
Cyanide Reactivity	GP8051/GN21169	1.5	<1.5	mg/kg	5.0	0.31	6.2	0-100%
Sulfide Reactivity	GP8053/GN21170			mg/kg	53.7	3.0	5.6	0-100%
Sulfide Reactivity	GP8053/GN21170	50	<50	mg/kg	53.7	5.0	9.3	0-100%

Associated Samples:

Batch GP8051: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6  
Batch GP8053: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

9.1



**DUPLICATE RESULTS SUMMARY  
GENERAL CHEMISTRY**

Login Number: F41620  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

Analyte	Batch ID	QC Sample	Units	Original Result	DUP Result	RPD	QC Limits
Corrosivity as pH	GN21100	F41620-1		7.4	7.6		0-%
Ignitability (Flashpoint)	GN21105	F41620-1	Deg. F	>200	0(a)	0.0	0-38%
Solids, Percent	GN21093	F41611-1	%	86.3	86	0.3	0-30%

Associated Samples:

Batch GN21093: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

Batch GN21100: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

Batch GN21105: F41620-1, F41620-2, F41620-3, F41620-4, F41620-5, F41620-6

(a) Not ignitable.

9.2  
**9**



IT'S ALL IN THE CHEMISTRY

## Misc. Forms

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## Custody Documents and Other Forms

(Accutest Laboratories Gulf Coast, Inc.)

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Includes the following where applicable:

- Chain of Custody



# CHAIN OF CUSTODY

4405 VINELAND ROAD • SUITE C-15  
ORLANDO, FL 32811  
TEL: 407-425-6700 • FAX: 407-425-0707

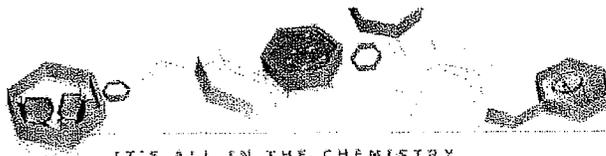
ACCUTEST JOB #:  
ACCUTEST QUOTE #:

CLIENT INFORMATION		FACILITY INFORMATION				ANALYTICAL INFORMATION								MATRIX CODES																																																																																				
NAME: <b>F41620</b>		PROJECT NAME: <b>Accutest SF</b>				<div style="display: flex; align-items: center;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); border: 1px solid black; padding: 2px;">851 TEL</div> <table border="1" style="width: 100%; height: 100%; border-collapse: collapse;"> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table> </div>																																																																																												DW - DRINKING WATER GW - GROUND WATER WW - WASTE WATER SO - SOIL SL - SLUDGE OL - OIL LIQ - OTHER LIQUID SOL - OTHER SOLID
ADDRESS:		LOCATION:																																																																																																
CITY, STATE ZIP:		PROJECT NO.:																																																																																																
SEND REPORT TO: PHONE #:		FAX #:																																																																																																
ACCUTEST SAMPLE #		FIELD ID / POINT OF COLLECTION		COLLECTION		PRESERVATION						LAB USE ONLY																																																																																						
		DATE	TIME	SAMPLED BY:	MATRIX	# OF BOTTLES	ACI	INDI	INDI	INDI	INDI		INDI	INDI																																																																																				
	<b>F41620-1</b>	<b>06/20/06</b>	<b>10:00</b>		<b>S</b>																																																																																													
	<b>-2</b>		<b>15:00</b>																																																																																															
	<b>-3</b>		<b>16:00</b>																																																																																															
	<b>-4</b>		<b>11:00</b>																																																																																															
	<b>-5</b>		<b>13:00</b>																																																																																															
	<b>-6</b>		<b>14:00</b>																																																																																															
DATA TURNAROUND INFORMATION				DATA DELIVERABLE INFORMATION				COMMENTS/REMARKS																																																																																										
<input type="checkbox"/> STANDARD <input type="checkbox"/> 48 HOUR RUSH <input type="checkbox"/> 24 HOUR EMERGENCY <input checked="" type="checkbox"/> OTHER <b>06/20/06 please</b> EMERGENCY OR RUSH IS FAX DATA UNLESS PREVIOUSLY APPROVED				<input checked="" type="checkbox"/> STANDARD <input type="checkbox"/> COMMERCIAL "B" <input type="checkbox"/> DISK DELIVERABLE <input type="checkbox"/> STATE FORMS <input type="checkbox"/> OTHER (SPECIFY)				<b>ABC</b> <del>XYZ</del>																																																																																										
SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION, INCLUDING COURIER DELIVERY																																																																																																		
RELINQUISHED BY: <b>1. [Signature]</b>	DATE TIME: <b>06/20/06-180</b>	RECEIVED BY: <b>1. [Signature]</b>	DATE TIME: <b>06/20/06-180</b>	RELINQUISHED BY: <b>2. [Signature]</b>	DATE TIME: <b> </b>	RECEIVED BY: <b>2. [Signature]</b>	DATE TIME: <b> </b>	RELINQUISHED BY: <b>3. [Signature]</b>	DATE TIME: <b> </b>	RECEIVED BY: <b>3. [Signature]</b>	DATE TIME: <b> </b>	RELINQUISHED BY: <b>4. [Signature]</b>	DATE TIME: <b> </b>	RECEIVED BY: <b>4. [Signature]</b>																																																																																				
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10.1 10

F41620: Chain of Custody  
Page 1 of 2  
Accutest Laboratories Gulf Coast, Inc.





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## GC Semi-volatiles

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### QC Data Summaries

(Accutest Laboratories Gulf Coast, Inc.)

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Method Blank Summary

Job Number: F41620  
Account: ALSE Accutest Laboratories Southeast, Inc.  
Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6063-MB	DD57046.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067

The QC reported here applies to the following samples:

Method: SW846 8151

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Result	RL	MDL	Units	Q
94-75-7	2,4-D	ND	1.0	0.50	ug/l	
93-72-1	2,4,5-TP (Silvex)	ND	0.20	0.15	ug/l	

CAS No.	Surrogate Recoveries	Limits
19719-28-9	2,4-DCAA	116% 23-171%

11.1  
11

# Blank Spike Summary

Job Number: F41620  
Account: ALSE Accutest Laboratories Southeast, Inc.  
Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6063-BS	DD57047.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067

The QC reported here applies to the following samples:

Method: SW846 8151

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
94-75-7	2,4-D	2	2.3	115	44-152
93-72-1	2,4,5-TP (Silvex)	0.4	0.34	85	41-142

CAS No.	Surrogate Recoveries	BSP	Limits
19719-28-9	2,4-DCAA	125%	23-171%

11.2  
11

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41620  
 Account: ALSE Accutest Laboratories Southeast, Inc.  
 Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6063-MS	DD57049.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067
OP6063-MSD	DD57050.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067
F41620-1A	DD57048.D	1	06/29/06	RC	06/28/06	OP6063	GDD1067

The QC reported here applies to the following samples:

Method: SW846 8151

F41620-1A, F41620-2A, F41620-3A, F41620-4A, F41620-5A, F41620-6A

CAS No.	Compound	F41620-1A ug/l	Spike Q ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
94-75-7	2,4-D	ND	2	2.6	130	2.0	100	26*	28-144/25
93-72-1	2,4,5-TP (Silvex)	ND	0.4	0.43	108	0.39	98	10	25-137/24

CAS No.	Surrogate Recoveries	MS	MSD	F41620-1A	Limits
19719-28-9	2,4-DCAA	130%	121%	134%	23-171%

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IT'S ALL IN THE CHEMISTRY

08/03/06

**Technical Report for**

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**Shaw E & I, Inc.**

**Paradise Creek**

**116539**

**Accutest Job Number: F42307**

**Sampling Date: 07/18/06**

---



**Report to:**

Shaw E & I, Inc.  
5700 Thurston Ave. Suite 116-B  
Virginia Beach, VA 23455  
natasha.sullivan@shawgrp.com

**ATTN: Natasha Sullivan**

**Total number of pages in report: 102**



Test results contained within this data package meet the requirements of the National Environmental Laboratory Accreditation Conference and/or state specific certification programs as applicable.

*Harry Behzadi*  
**Harry Behzadi, Ph.D.**  
**Laboratory Director**

Certifications: FL (DOH E83510), NC (573), NJ (FL002), MA (FL946), IA (366), LA (03051), KS (E-10327), SC, AK  
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### Sample Summary

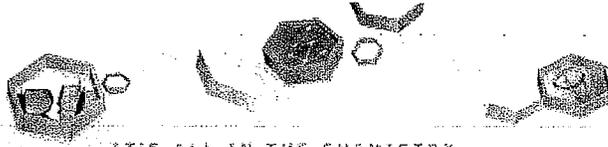
Shaw E & I, Inc.

Job No: F42307

Paradise Creek  
Project No: 116539

Sample Number	Collected		Received	Matrix		Client Sample ID
	Date	Time By		Code	Type	
F42307-1	07/18/06	07:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID007
F42307-1A	07/18/06	07:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID007
F42307-2	07/18/06	08:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID008
F42307-2A	07/18/06	08:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID008
F42307-3	07/18/06	09:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID009
F42307-3A	07/18/06	09:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID009
F42307-4	07/18/06	10:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID0113
F42307-4A	07/18/06	10:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID0113
F42307-5	07/18/06	11:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID014
F42307-5A	07/18/06	11:00 BM	07/20/06	SO	Soil	PC-TP-116539-GRID014

Soil samples reported on a dry weight basis unless otherwise indicated on result page.



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**Sample Results**

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**Report of Analysis**

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## Report of Analysis

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2

<b>Client Sample ID:</b> PC-TP-116539-GRID0113	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-4	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 64.3
<b>Method:</b> SW846 8015	
<b>Project:</b> Paradise Creek	

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	CD070188.D	1	07/21/06	MM	n/a	n/a	GCD2898
Run #2							

	Initial Weight	Final Volume	Methanol Aliquot
Run #1	4.31 g	5.0 ml	100 ul
Run #2			

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	12	5.9	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
460-00-4	4-Bromofluorobenzene	84%		62-135%
98-08-8	aaa-Trifluorotoluene	84%		65-118%

(a) Sample was received in a bulk container but was not preserved within 48 hours of sampling.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID0113	
<b>Lab Sample ID:</b> F42307-4	<b>Date Sampled:</b> 07/18/06
<b>Matrix:</b> SO - Soil	<b>Date Received:</b> 07/20/06
<b>Method:</b> SW846 8082 SW846 3550B	<b>Percent Solids:</b> 64.3
<b>Project:</b> Paradise Creek	

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	DD32911.D	50	07/31/06	NAF	07/25/06	OP17353	GDD919
Run #2							

	Initial Weight	Final Volume
Run #1	30.4 g	10.0 ml
Run #2		

**PCB List**

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	1300	640	ug/kg	
11104-28-2	Aroclor 1221	ND	1300	1000	ug/kg	
11141-16-5	Aroclor 1232	ND	1300	1000	ug/kg	
53469-21-9	Aroclor 1242	ND	1300	640	ug/kg	
12672-29-6	Aroclor 1248	ND	1300	640	ug/kg	
11097-69-1	Aroclor 1254	ND	1300	640	ug/kg	
11096-82-5	Aroclor 1260 <sup>b</sup>	4240	1300	640	ug/kg	J
11100-14-4	Aroclor 1268 <sup>b</sup>	3370	1300	640	ug/kg	J
	Total PCBs	7610	2600		ug/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	0% <sup>c</sup>		52-136%
2051-24-3	Decachlorobiphenyl	0% <sup>c</sup>		49-148%

- (a) All hits confirmed by dual column analysis.
- (b) Estimated value due to the presence of multiple overlapping Aroclor patterns.
- (c) Outside control limits due to dilution.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

**Report of Analysis**

2.7  
2

<b>Client Sample ID:</b> PC-TP-116539-GRID0113	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-4	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 64.3
<b>Method:</b> SW846 8015 M SW846 3550B	
<b>Project:</b> Paradise Creek	

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	ZF20861.D	8	07/27/06	ME	07/26/06	OP17355	GZF978
Run #2							

	Initial Weight	Final Volume
Run #1	29.8 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	310	100	63	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	71%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Report of Analysis

<b>Client Sample ID:</b>	PC-TP-116539-GRID0113	<b>Date Sampled:</b>	07/18/06
<b>Lab Sample ID:</b>	F42307-4	<b>Date Received:</b>	07/20/06
<b>Matrix:</b>	SO - Soil	<b>Percent Solids:</b>	64.3
<b>Project:</b>	Paradise Creek		

### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Corrosivity as pH	9.1			1	07/21/06	EM	SW846 CHAP7
Cyanide Reactivity	< 2.0	2.0	mg/kg	1	07/25/06	SJL	SW846 CHAP7
Ignitability (Flashpoint) <sup>a</sup>	> 200		Deg. F	1	07/21/06	CP	SW846 1010
Solids, Percent	64.3		%	1	07/20/06	KG	EPA 160.3 M
Sulfide Reactivity	< 50	50	mg/kg	1	07/25/06	LE	SW846 CHAP7

(a) Not ignitable

RL = Reporting Limit

Report of Analysis

2.8  
2

<b>Client Sample ID:</b> PC-TP-116539-GRID0113	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-4A	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 64.3
<b>Method:</b> SW846 8260B SW846 1311	
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	C0042615.D	10	08/03/06	KW	07/31/06	OP17412	VC1721
Run #2							

Run #	Purge Volume
Run #1	5.0 ml
Run #2	

VOA TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
71-43-2	Benzene	ND	D018	0.50	0.010	0.0050	mg/l	
108-90-7	Chlorobenzene	ND	D021	100	0.020	0.0050	mg/l	
67-66-3	Chloroform	ND	D022	6.0	0.020	0.0050	mg/l	
56-23-5	Carbon tetrachloride	ND	D019	0.50	0.020	0.0050	mg/l	
75-35-4	1,1-Dichloroethylene	ND	D029	0.70	0.020	0.0050	mg/l	
107-06-2	1,2-Dichloroethane	ND	D028	0.50	0.020	0.0050	mg/l	
106-46-7	p-Dichlorobenzene	ND	D027	7.5	0.020	0.0050	mg/l	
78-93-3	Methyl ethyl ketone	ND	D035	200	0.10	0.025	mg/l	
127-18-4	Tetrachloroethylene	ND	D039	0.70	0.020	0.0050	mg/l	
79-01-6	Trichloroethylene	ND	D040	0.50	0.020	0.0050	mg/l	
75-01-4	Vinyl chloride	ND	D043	0.20	0.010	0.0050	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	110%		86-115%
2037-26-5	Toluene-D8	102%		86-112%
460-00-4	4-Bromofluorobenzene	105%		83-119%
17060-07-0	1,2-Dichloroethane-D4	111%		73-126%

ND = Not detected      MDL - Method Detection Limit      J = Indicates an estimated value  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b>	PC-TP-116539-GRID0113	<b>Date Sampled:</b>	07/18/06
<b>Lab Sample ID:</b>	F42307-4A	<b>Date Received:</b>	07/20/06
<b>Matrix:</b>	SO - Soil	<b>Percent Solids:</b>	64.3
<b>Method:</b>	SW846 8270C SW846 3510C		
<b>Project:</b>	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	R04135.D	1	08/02/06	NJ	07/31/06	OP17413	SR195
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	1.0 ml
Run #2		

**ABN TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	D023	200	0.050	0.020	mg/l	
	3&4-Methylphenol	ND	D024	200	0.050	0.020	mg/l	
87-86-5	Pentachlorophenol	ND	D037	100	0.25	0.10	mg/l	
95-95-4	2,4,5-Trichlorophenol	ND	D041	400	0.050	0.020	mg/l	
88-06-2	2,4,6-Trichlorophenol	ND	D042	2.0	0.050	0.020	mg/l	
106-46-7	1,4-Dichlorobenzene	ND	D027	7.5	0.050	0.010	mg/l	
121-14-2	2,4-Dinitrotoluene	ND	D030	0.13	0.050	0.020	mg/l	
118-74-1	Hexachlorobenzene	ND	D032	0.13	0.050	0.010	mg/l	
87-68-3	Hexachlorobutadiene	ND	D033	0.50	0.050	0.020	mg/l	
67-72-1	Hexachloroethane	ND	D034	3.0	0.050	0.020	mg/l	
98-95-3	Nitrobenzene	ND	D036	2.0	0.050	0.010	mg/l	
110-86-1	Pyridine	ND	D038	5.0	0.10	0.030	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
367-12-4	2-Fluorophenol	27%		19-90%
4165-62-2	Phenol-d5	16%		10-68%
118-79-6	2,4,6-Tribromophenol	83%		36-137%
4165-60-0	Nitrobenzene-d5	82%		49-119%
321-60-8	2-Fluorobiphenyl	82%		45-118%
1718-51-0	Terphenyl-d14	87%		46-135%

ND = Not detected MDL - Method Detection Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)  
E = Indicates value exceeds calibration range

J = Indicates an estimated value  
B = Indicates analyte found in associated method blank  
N = Indicates presumptive evidence of a compound

**Report of Analysis**

<b>Client Sample ID:</b> PC-TP-116539-GRID0113	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-4A	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 64.3
<b>Method:</b> SW846 8081A SW846 3510C	
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	KK13810.D	1	08/01/06	AA	07/31/06	OP17414	GKK523
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

**Pesticide TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	D013	0.40	0.00050	0.00020	mg/l	
12789-03-6	Chlordane	ND	D020	0.030	0.0050	0.0025	mg/l	
72-20-8	Endrin	ND	D012	0.020	0.0010	0.00040	mg/l	
76-44-8	Heptachlor	ND	D031	0.0080	0.00050	0.00020	mg/l	
1024-57-3	Heptachlor epoxide	ND	D031	0.0080	0.00050	0.00020	mg/l	
72-43-5	Methoxychlor	ND	D014	10	0.0010	0.00040	mg/l	
8001-35-2	Toxaphene	ND	D015	0.50	0.025	0.015	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	99%		60-138%
2051-24-3	Decachlorobiphenyl	57%		31-148%

ND = Not detected      MDL - Method Detection Limit  
MCL = Maximum Contamination Level (40 CFR 261 6/96)  
E = Indicates value exceeds calibration range

J = Indicates an estimated value  
B = Indicates analyte found in associated method blank  
N = Indicates presumptive evidence of a compound

**Report of Analysis**

2.8  
2

<b>Client Sample ID:</b> PC-TP-116539-GRID0113	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-4A	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 64.3
<b>Method:</b> SW846 8151 SW846 3510C	
<b>Project:</b> Paradise Creek	

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	DD57602.D	1	07/31/06	ATX	07/28/06	T:OP6178	T:GDD1085
Run #2							

	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

**Herbicide TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
94-75-7	2,4-D	ND	D016	10	0.015	0.011	mg/l	
93-72-1	2,4,5-TP (Silvex)	ND	D017	1.0	0.0020	0.00060	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
19719-28-9	2,4-DCAA	107%		23-171%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

ND = Not detected    MDL - Method Detection Limit  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

Report of Analysis

2.8  
2

<b>Client Sample ID:</b> PC-TP-116539-GRID0113	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-4A	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 64.3
<b>Project:</b> Paradise Creek	

Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Arsenic <sup>a</sup>	0.0056 U	D004	5.0	0.020	0.0056	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Barium	2.1	D005	100	1.0	0.20	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Cadmium	0.0077	D006	1.0	0.0050	0.00030	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Chromium	0.016	D007	5.0	0.010	0.00060	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Lead	0.17	D008	5.0	0.050	0.0017	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Mercury	0.0010 U	D009	0.20	0.010	0.0010	mg/l	1	08/01/06	08/01/06	MS SW846 7470A <sup>2</sup>
Selenium <sup>a</sup>	0.040 U	D010	1.0	0.10	0.040	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Silver	0.00090 U	D011	5.0	0.010	0.00090	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>

- (1) Instrument QC Batch: MA5127
- (2) Instrument QC Batch: MA5128
- (3) Prep QC Batch: MP10008
- (4) Prep QC Batch: MP10014

(a) Elevated RL/MDL due to positive bias of Method Blank.

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result > = MDL but < RL

## Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID014	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-5	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 76.9
<b>Method:</b> SW846 8015	
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	CD070194.D	1	07/21/06	MM	n/a	n/a	GCD2898
Run #2							

Run #	Initial Weight	Final Volume	Methanol Aliquot
Run #1	5.12 g	5.0 ml	100 ul
Run #2			

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	7.9	3.9	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
460-00-4	4-Bromofluorobenzene	88%		62-135%
98-08-8	aaa-Trifluorotoluene	84%		65-118%

(a) Sample was received in a bulk container but was not preserved within 48 hours of sampling.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID014	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-5	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 76.9
<b>Method:</b> SW846 8082 SW846 3550B	
<b>Project:</b> Paradise Creek	

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	DD32912.D	10	07/31/06	NAF	07/25/06	OP17353	GDD919
Run #2							

	Initial Weight	Final Volume
Run #1	30.6 g	10.0 ml
Run #2		

## PCB List

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	210	210	ug/kg	
11104-28-2	Aroclor 1221	ND	210	170	ug/kg	
11141-16-5	Aroclor 1232	ND	210	210	ug/kg	
53469-21-9	Aroclor 1242	ND	210	210	ug/kg	
12672-29-6	Aroclor 1248 <sup>b</sup>	ND	420	420	ug/kg	
11097-69-1	Aroclor 1254	ND	210	210	ug/kg	
11096-82-5	Aroclor 1260 <sup>c</sup>	461	210	110	ug/kg	J
11100-14-4	Aroclor 1268 <sup>c</sup>	135	210	110	ug/kg	J
	Total PCBs	597	420		ug/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	119%		52-136%
2051-24-3	Decachlorobiphenyl	123%		49-148%

(a) All hits confirmed by dual column analysis. Dilution required due to matrix interference.

(b) Elevated reporting limits due to matrix interference.

(c) Estimated value due to the presence of multiple overlapping Aroclor patterns.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

**Report of Analysis**

<b>Client Sample ID:</b> PC-TP-116539-GRID014	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-5	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 76.9
<b>Method:</b> SW846 8015 M SW846 3550B	
<b>Project:</b> Paradise Creek	

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	ZF20830.D	4	07/27/06	ME	07/26/06	OP17355	GZF978
Run #2							

	Initial Weight	Final Volume
Run #1	29.3 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	215	44	27	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	87%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

**Report of Analysis**

<b>Client Sample ID:</b> PC-TP-116539-GRID014	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-5	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 76.9
<b>Project:</b> Paradise Creek	

**General Chemistry**

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Corrosivity as pH	6.9			1	07/21/06	EM	SW846 CHAP7
Cyanide Reactivity	< 1.8	1.8	mg/kg	1	07/25/06	SJL	SW846 CHAP7
Ignitability (Flashpoint) <sup>a</sup>	> 200		Deg. F	1	07/21/06	CP	SW846 1010
Solids, Percent	76.9		%	1	07/20/06	KG	EPA 160.3 M
Sulfide Reactivity	< 50	50	mg/kg	1	07/25/06	LE	SW846 CHAP7

(a) Not ignitable

RL = Reporting Limit

Report of Analysis

2.10  
2

<b>Client Sample ID:</b> PC-TP-116539-GRID014	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-5A	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 76.9
<b>Method:</b> SW846 8260B SW846 1311	
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	C0042616.D	10	08/03/06	KW	07/31/06	OP17412	VC1721
Run #2							

Run #	Purge Volume
Run #1	5.0 ml
Run #2	

VOA TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
71-43-2	Benzene	ND	D018	0.50	0.010	0.0050	mg/l	
108-90-7	Chlorobenzene	ND	D021	100	0.020	0.0050	mg/l	
67-66-3	Chloroform	ND	D022	6.0	0.020	0.0050	mg/l	
56-23-5	Carbon tetrachloride	ND	D019	0.50	0.020	0.0050	mg/l	
75-35-4	1,1-Dichloroethylene	ND	D029	0.70	0.020	0.0050	mg/l	
107-06-2	1,2-Dichloroethane	ND	D028	0.50	0.020	0.0050	mg/l	
106-46-7	p-Dichlorobenzene	ND	D027	7.5	0.020	0.0050	mg/l	
78-93-3	Methyl ethyl ketone	ND	D035	200	0.10	0.025	mg/l	
127-18-4	Tetrachloroethylene	ND	D039	0.70	0.020	0.0050	mg/l	
79-01-6	Trichloroethylene	ND	D040	0.50	0.020	0.0050	mg/l	
75-01-4	Vinyl chloride	ND	D043	0.20	0.010	0.0050	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	111%		86-115%
2037-26-5	Toluene-D8	103%		86-112%
460-00-4	4-Bromofluorobenzene	102%		83-119%
17060-07-0	1,2-Dichloroethane-D4	117%		73-126%

ND = Not detected MDL - Method Detection Limit  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Report of Analysis

2.10  
2

<b>Client Sample ID:</b> PC-TP-116539-GRID014	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-5A	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 76.9
<b>Method:</b> SW846 8270C SW846 3510C	
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	R04136.D	1	08/02/06	NJ	07/31/06	OP17413	SR195
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	1.0 ml
Run #2		

**ABN TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	D023	200	0.050	0.020	mg/l	
	3&4-Methylphenol	ND	D024	200	0.050	0.020	mg/l	
87-86-5	Pentachlorophenol	ND	D037	100	0.25	0.10	mg/l	
95-95-4	2,4,5-Trichlorophenol	ND	D041	400	0.050	0.020	mg/l	
88-06-2	2,4,6-Trichlorophenol	ND	D042	2.0	0.050	0.020	mg/l	
106-46-7	1,4-Dichlorobenzene	ND	D027	7.5	0.050	0.010	mg/l	
121-14-2	2,4-Dinitrotoluene	ND	D030	0.13	0.050	0.020	mg/l	
118-74-1	Hexachlorobenzene	ND	D032	0.13	0.050	0.010	mg/l	
87-68-3	Hexachlorobutadiene	ND	D033	0.50	0.050	0.020	mg/l	
67-72-1	Hexachloroethane	ND	D034	3.0	0.050	0.020	mg/l	
98-95-3	Nitrobenzene	ND	D036	2.0	0.050	0.010	mg/l	
110-86-1	Pyridine	ND	D038	5.0	0.10	0.030	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
367-12-4	2-Fluorophenol	27%		19-90%
4165-62-2	Phenol-d5	16%		10-68%
118-79-6	2,4,6-Tribromophenol	80%		36-137%
4165-60-0	Nitrobenzene-d5	77%		49-119%
321-60-8	2-Fluorobiphenyl	77%		45-118%
1718-51-0	Terphenyl-d14	75%		46-135%

ND = Not detected      MDL - Method Detection Limit      J = Indicates an estimated value  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID014	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-5A	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 76.9
<b>Method:</b> SW846 8081A SW846 3510C	
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	TT01324.D	1	08/03/06	VS	08/02/06	OP17436	GTT53
Run #2							

Run #	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

**Pesticide TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	D013	0.40	0.00050	0.00020	mg/l	
12789-03-6	Chlordane	ND	D020	0.030	0.0050	0.0025	mg/l	
72-20-8	Endrin	ND	D012	0.020	0.0010	0.00040	mg/l	
76-44-8	Heptachlor	ND	D031	0.0080	0.00050	0.00020	mg/l	
1024-57-3	Heptachlor epoxide	ND	D031	0.0080	0.00050	0.00020	mg/l	
72-43-5	Methoxychlor	ND	D014	10	0.0010	0.00040	mg/l	
8001-35-2	Toxaphene	ND	D015	0.50	0.025	0.015	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	78%		60-138%
2051-24-3	Decachlorobiphenyl	88%		31-148%

ND = Not detected    MDL - Method Detection Limit  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

**Report of Analysis**

2.10  
2

<b>Client Sample ID:</b> PC-TP-116539-GRID014	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-5A	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 76.9
<b>Method:</b> SW846 8151 SW846 3510C	
<b>Project:</b> Paradise Creek	

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	DD57605.D	1	07/31/06	ATX	07/28/06	T:OP6178	T:GDD1085
Run #2							

	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

**Herbicide TCLP Leachate**

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
94-75-7	2,4-D	ND	D016	10	0.015	0.011	mg/l	
93-72-1	2,4,5-TP (Silvex)	ND	D017	1.0	0.0020	0.00060	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
19719-28-9	2,4-DCAA	102%		23-171%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

ND = Not detected    MDL - Method Detection Limit  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

**Report of Analysis**

2.10  
2

<b>Client Sample ID:</b> PC-TP-116539-GRID014	<b>Date Sampled:</b> 07/18/06
<b>Lab Sample ID:</b> F42307-5A	<b>Date Received:</b> 07/20/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 76.9
<b>Project:</b> Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Arsenic <sup>a</sup>	0.046	D004	5.0	0.020	0.0056	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Barium	1.5	D005	100	1.0	0.20	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Cadmium	0.058	D006	1.0	0.0050	0.00030	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Chromium	0.018	D007	5.0	0.010	0.00060	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Lead	3.5	D008	5.0	0.050	0.0017	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Mercury	0.0010 U	D009	0.20	0.010	0.0010	mg/l	1	08/01/06	08/01/06	MS SW846 7470A <sup>2</sup>
Selenium <sup>a</sup>	0.040 U	D010	1.0	0.10	0.040	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>
Silver	0.0014 B	D011	5.0	0.010	0.00090	mg/l	1	07/31/06	07/31/06	RS SW846 6010B <sup>1</sup>

- (1) Instrument QC Batch: MA5127
- (2) Instrument QC Batch: MA5128
- (3) Prep QC Batch: MP10008
- (4) Prep QC Batch: MP10014

(a) Elevated RL/MDL due to positive bias of Method Blank.

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result > = MDL but < RL



## Misc. Forms

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## Custody Documents and Other Forms

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Includes the following where applicable:

- Chain of Custody



**ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION**

ACCUTEST'S JOB NUMBER: F42307 CLIENT: Shaw PROJECT: Paradise Creek  
 DATE/TIME RECEIVED: 1030 7/24/06 # OF COOLERS RECEIVED: 1 COOLER TEMPS: 2.4  
 METHOD OF DELIVERY: FEDEX  **UPS**  ACCUTEST COURIER GREYHOUND DELIVERY OTHER  
 AIRBILL NUMBERS: 12 66V 742 01 9200 1298

**COOLER INFORMATION**

- CUSTODY SEAL NOT PRESENT OR NOT INTACT
- CHAIN OF CUSTODY NOT RECEIVED (COC)
- ANALYSIS REQUESTED IS UNCLEAR OR MISSING
- SAMPLE DATES OR TIMES UNCLEAR OR MISSING
- TEMPERATURE CRITERIA NOT MET

**TRIP BLANK INFORMATION**

- TRIP BLANK NOT PROVIDED
- TRIP BLANK NOT ON COC
- TRIP BLANK INTACT
- TRIP BLANK NOT INTACT
- RECEIVED WATER TRIP BLANK
- RECEIVED SOIL TRIP BLANK

**MISC. INFORMATION**

NUMBER OF ENCORES ? 1  
 NUMBER OF 5035 FIELD KITS ? 2  
 NUMBER OR LAB FILTERED METALS ? 2

SUMMARY OF COMMENTS:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

TECHNICIAN SIGNATURE/DATE [Signature] 7/24/06 TECHNICIAN SIGNATURE/DATE \_\_\_\_\_

ASBD03/27/06



## GC/MS Volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Leachate Blank Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17412-LB	C0042611.D	10	08/03/06	KW	07/31/06	OP17412	VC1721

4.1  
4

The QC reported here applies to the following samples:

Method: SW846 8260B

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	Result	RL	MDL	Units	Q
71-43-2	Benzene	ND	10	5.0	ug/l	
108-90-7	Chlorobenzene	ND	20	5.0	ug/l	
67-66-3	Chloroform	ND	20	5.0	ug/l	
56-23-5	Carbon tetrachloride	ND	20	5.0	ug/l	
75-35-4	1,1-Dichloroethylene	ND	20	5.0	ug/l	
107-06-2	1,2-Dichloroethane	ND	20	5.0	ug/l	
106-46-7	p-Dichlorobenzene	ND	20	5.0	ug/l	
78-93-3	Methyl ethyl ketone	ND	100	25	ug/l	
127-18-4	Tetrachloroethylene	ND	20	5.0	ug/l	
79-01-6	Trichloroethylene	ND	20	5.0	ug/l	
75-01-4	Vinyl chloride	ND	10	5.0	ug/l	

CAS No.	Surrogate Recoveries	Limits
1868-53-7	Dibromofluoromethane	107% 86-115%
17060-07-0	1,2-Dichloroethane-D4	108% 73-126%
2037-26-5	Toluene-D8	101% 86-112%
460-00-4	4-Bromofluorobenzene	105% 83-119%

# Blank Spike Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VC1721-BS	C0042610.D	10	08/03/06	KW	n/a	n/a	VC1721

4.2  
4

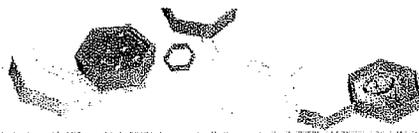
The QC reported here applies to the following samples:

Method: SW846 8260B

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
71-43-2	Benzene	250	258	103	80-120
108-90-7	Chlorobenzene	250	252	101	82-112
67-66-3	Chloroform	250	271	108	78-118
56-23-5	Carbon tetrachloride	250	302	121	69-137
75-35-4	1,1-Dichloroethylene	250	286	114	67-134
107-06-2	1,2-Dichloroethane	250	268	107	68-121
106-46-7	p-Dichlorobenzene	250	244	98	77-113
78-93-3	Methyl ethyl ketone	1250	1100	88	58-127
127-18-4	Tetrachloroethylene	250	273	109	75-126
79-01-6	Trichloroethylene	250	259	104	80-115
75-01-4	Vinyl chloride	250	328	131	70-151

CAS No.	Surrogate Recoveries	BSP	Limits
1868-53-7	Dibromofluoromethane	104%	86-115%
17060-07-0	1,2-Dichloroethane-D4	110%	73-126%
2037-26-5	Toluene-D8	102%	86-112%
460-00-4	4-Bromofluorobenzene	98%	83-119%



IT'S ALL IN THE CHEMISTRY

## GC/MS Semi-volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Leachate Blank Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17413-LB	R04125.D	1	08/02/06	NJ	08/01/06	OP17413	SR195

The QC reported here applies to the following samples:

Method: SW846 8270C

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	Result	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	50	20	ug/l	
	3&4-Methylphenol	ND	50	20	ug/l	
87-86-5	Pentachlorophenol	ND	250	100	ug/l	
95-95-4	2,4,5-Trichlorophenol	ND	50	20	ug/l	
88-06-2	2,4,6-Trichlorophenol	ND	50	20	ug/l	
106-46-7	1,4-Dichlorobenzene	ND	50	10	ug/l	
121-14-2	2,4-Dinitrotoluene	ND	50	20	ug/l	
118-74-1	Hexachlorobenzene	ND	50	10	ug/l	
87-68-3	Hexachlorobutadiene	ND	50	20	ug/l	
67-72-1	Hexachloroethane	ND	50	20	ug/l	
98-95-3	Nitrobenzene	ND	50	10	ug/l	
110-86-1	Pyridine	ND	100	30	ug/l	

CAS No.	Surrogate Recoveries	Limits
367-12-4	2-Fluorophenol	19% 19-90%
4165-62-2	Phenol-d5	10% 10-68%
118-79-6	2,4,6-Tribromophenol	70% 36-137%
4165-60-0	Nitrobenzene-d5	65% 49-119%
321-60-8	2-Fluorobiphenyl	62% 45-118%
1718-51-0	Terphenyl-d14	89% 46-135%

# Blank Spike Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17413-LBS	R04124.D	1	08/02/06	NJ	08/01/06	OP17413	SR195

The QC reported here applies to the following samples:

Method: SW846 8270C

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
95-48-7	2-Methylphenol	500	257	51	48-90
	3&4-Methylphenol	1000	452	45	43-94
87-86-5	Pentachlorophenol	1000	888	89	62-120
95-95-4	2,4,5-Trichlorophenol	500	408	82	67-103
88-06-2	2,4,6-Trichlorophenol	500	399	80	68-104
106-46-7	1,4-Dichlorobenzene	500	350	70	46-96
121-14-2	2,4-Dinitrotoluene	500	408	82	64-107
118-74-1	Hexachlorobenzene	500	410	82	69-103
87-68-3	Hexachlorobutadiene	500	376	75	48-100
67-72-1	Hexachloroethane	500	354	71	41-98
98-95-3	Nitrobenzene	500	383	77	60-102
110-86-1	Pyridine	500	205	41	17-65

CAS No.	Surrogate Recoveries	BSP	Limits
367-12-4	2-Fluorophenol	31%	19-90%
4165-62-2	Phenol-d5	19%	10-68%
118-79-6	2,4,6-Tribromophenol	83%	36-137%
4165-60-0	Nitrobenzene-d5	80%	49-119%
321-60-8	2-Fluorobiphenyl	80%	45-118%
1718-51-0	Terphenyl-d14	84%	46-135%

5.2

5

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17413-MS	R04129.D	1	08/02/06	NJ	07/31/06	OP17413	SR195
OP17413-MSD	R04130.D	1	08/02/06	NJ	07/31/06	OP17413	SR195
F42421-2A	R04128.D	1	08/02/06	NJ	07/31/06	OP17413	SR195

The QC reported here applies to the following samples:

Method: SW846 8270C

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	F42421-2A ug/l	Spike Q	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
95-48-7	2-Methylphenol	ND	500	206	41	177	35*	15	40-102/25
	3&4-Methylphenol	257	1000	597	34*	518	26*	14	39-97/24
87-86-5	Pentachlorophenol	ND	1000	887	89	835	84	6	53-128/22
95-95-4	2,4,5-Trichlorophenol	ND	500	394	79	370	74	6	56-110/19
88-06-2	2,4,6-Trichlorophenol	ND	500	393	79	369	74	6	55-112/19
106-46-7	1,4-Dichlorobenzene	ND	500	360	72	325	65	10	43-102/24
121-14-2	2,4-Dinitrotoluene	ND	500	410	82	388	78	6	60-108/18
118-74-1	Hexachlorobenzene	ND	500	416	83	391	78	6	66-106/16
87-68-3	Hexachlorobutadiene	ND	500	387	77	348	70	11	46-107/26
98-95-3	Nitrobenzene	ND	500	386	77	341	68	12	50-107/25
110-86-1	Pyridine	ND	500	202	40	185	37	9	19-77/41

CAS No.	Surrogate Recoveries	MS	MSD	F42421-2A	Limits
367-12-4	2-Fluorophenol	23%	20%	22%	19-90%
4165-62-2	Phenol-d5	13%	11%	14%	10-68%
118-79-6	2,4,6-Tribromophenol	84%	79%	77%	36-137%
4165-60-0	Nitrobenzene-d5	78%	73%	66%	49-119%
321-60-8	2-Fluorobiphenyl	79%	74%	67%	45-118%
1718-51-0	Terphenyl-d14	86%	82%	69%	46-135%

## Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17413-DUP	R04127.D	1	08/02/06	NJ	07/31/06	OP17413	SR195
F42421-1A	R04126.D	1	08/02/06	NJ	07/31/06	OP17413	SR195

The QC reported here applies to the following samples:

Method: SW846 8270C

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	F42421-1A ug/l	DUP Q	ug/l	Q	RPD	Limits
95-48-7	2-Methylphenol	ND		ND		nc	
	3&4-Methylphenol	ND		ND		nc	
87-86-5	Pentachlorophenol	ND		ND		nc	
95-95-4	2,4,5-Trichlorophenol	ND		ND		nc	
88-06-2	2,4,6-Trichlorophenol	ND		ND		nc	
106-46-7	1,4-Dichlorobenzene	ND		ND		nc	
121-14-2	2,4-Dinitrotoluene	ND		ND		nc	
118-74-1	Hexachlorobenzene	ND		ND		nc	
87-68-3	Hexachlorobutadiene	ND		ND		nc	
67-72-1	Hexachloroethane	ND		ND		nc	
98-95-3	Nitrobenzene	ND		ND		nc	
110-86-1	Pyridine	ND		ND		nc	

CAS No.	Surrogate Recoveries	DUP	F42421-1A	Limits
367-12-4	2-Fluorophenol	23%	22%	19-90%
4165-62-2	Phenol-d5	13%	12%	10-68%
118-79-6	2,4,6-Tribromophenol	78%	83%	36-137%
4165-60-0	Nitrobenzene-d5	75%	79%	49-119%
321-60-8	2-Fluorobiphenyl	74%	76%	45-118%
1718-51-0	Terphenyl-d14	84%	89%	46-135%

5.4  
5



## GC Volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

## Method Blank Summary

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**Job Number:** F42307  
**Account:** ITVAVAB Shaw E & I, Inc.  
**Project:** Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GCD2898-MB	CD070182.D1		07/21/06	MM	n/a	n/a	GCD2898

The QC reported here applies to the following samples:

Method: SW846 8015

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	5.0	2.5	mg/kg	

CAS No.	Surrogate Recoveries		Limits
460-00-4	4-Bromofluorobenzene	82%	62-135%
98-08-8	aaa-Trifluorotoluene	89%	65-118%



# Blank Spike Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GCD2898-BS	CD070181.D1		07/21/06	MM	n/a	n/a	GCD2898

The QC reported here applies to the following samples:

Method: SW846 8015

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH-GRO (C6-C10)	20	19.7	99	66-122

CAS No.	Surrogate Recoveries	BSP	Limits
460-00-4	4-Bromofluorobenzene	96%	62-135%
98-08-8	aaa-Trifluorotoluene	99%	65-118%



# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F42301-1MS	CD070197.D	1	07/21/06	MM	n/a	n/a	GCD2898
F42301-1MSD	CD070198.D	1	07/21/06	MM	n/a	n/a	GCD2898
F42301-1	CD070189.D	1	07/21/06	MM	n/a	n/a	GCD2898

The QC reported here applies to the following samples:

Method: SW846 8015

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	F42301-1 mg/kg	Spike Q	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH-GRO (C6-C10)	ND	22.8	21.0	92	20.9	92	0	37-142/17

CAS No.	Surrogate Recoveries	MS	MSD	F42301-1	Limits
460-00-4	4-Bromofluorobenzene	101%	89%	80%	62-135%
98-08-8	aaa-Trifluorotoluene	105%	95%	85%	65-118%





## GC Semi-volatiles

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

7

## Method Blank Summary

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Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17353-MB	ST49793.D	1	07/28/06	NAF	07/25/06	OP17353	GST1443

The QC reported here applies to the following samples:

Method: SW846 8082

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	8.3	ug/kg	
11104-28-2	Aroclor 1221	ND	17	13	ug/kg	
11141-16-5	Aroclor 1232	ND	17	13	ug/kg	
53469-21-9	Aroclor 1242	ND	17	8.3	ug/kg	
12672-29-6	Aroclor 1248	ND	17	8.3	ug/kg	
11097-69-1	Aroclor 1254	ND	17	8.3	ug/kg	
11096-82-5	Aroclor 1260	ND	17	8.3	ug/kg	
11100-14-4	Aroclor 1268	ND	17	8.3	ug/kg	
	Total PCBs	ND	33		ug/kg	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	88%	52-136%
2051-24-3	Decachlorobiphenyl	101%	49-148%

7.1  
7

# Method Blank Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17353-MB	DD32907.D	1	07/31/06	NAF	07/25/06	OP17353	GDD919

The QC reported here applies to the following samples:

Method: SW846 8082

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	8.3	ug/kg	
11104-28-2	Aroclor 1221	ND	17	13	ug/kg	
11141-16-5	Aroclor 1232	ND	17	13	ug/kg	
53469-21-9	Aroclor 1242	ND	17	8.3	ug/kg	
12672-29-6	Aroclor 1248	ND	17	8.3	ug/kg	
11097-69-1	Aroclor 1254	ND	17	8.3	ug/kg	
11096-82-5	Aroclor 1260	ND	17	8.3	ug/kg	
11100-14-4	Aroclor 1268	ND	17	8.3	ug/kg	
	Total PCBs	ND	33		ug/kg	

CAS No.	Surrogate Recoveries	Limits	
877-09-8	Tetrachloro-m-xylene	105%	52-136%
2051-24-3	Decachlorobiphenyl	107%	49-148%

7.1  
7

# Method Blank Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17355-MB	ZF20823.D	1	07/27/06	ME	07/26/06	OP17355	GZF978

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries	Limits
84-15-1	o-Terphenyl	90% 57-115%

7.1  
7

# Leachate Blank Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17414-LB	KK13798.D	1	08/01/06	AA	08/01/06	OP17414	GKK523

The QC reported here applies to the following samples:

Method: SW846 8081A

F42307-1A, F42307-2A, F42307-3A, F42307-4A

CAS No.	Compound	Result	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	0.50	0.20	ug/l	
12789-03-6	Chlordane	ND	5.0	2.5	ug/l	
72-20-8	Endrin	ND	1.0	0.40	ug/l	
76-44-8	Heptachlor	ND	0.50	0.20	ug/l	
1024-57-3	Heptachlor epoxide	ND	0.50	0.20	ug/l	
72-43-5	Methoxychlor	ND	1.0	0.40	ug/l	
8001-35-2	Toxaphene	ND	25	15	ug/l	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	79%	60-138%
2051-24-3	Decachlorobiphenyl	80%	31-148%

7.2



# Leachate Blank Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17436-LB	TT01323.D	1	08/03/06	VS	08/02/06	OP17436	GTT53

The QC reported here applies to the following samples:

Method: SW846 8081A

F42307-5A

CAS No.	Compound	Result	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	0.50	0.20	ug/l	
12789-03-6	Chlordane	ND	5.0	2.5	ug/l	
72-20-8	Endrin	ND	1.0	0.40	ug/l	
76-44-8	Heptachlor	ND	0.50	0.20	ug/l	
1024-57-3	Heptachlor epoxide	ND	0.50	0.20	ug/l	
72-43-5	Methoxychlor	ND	1.0	0.40	ug/l	
8001-35-2	Toxaphene	ND	25	15	ug/l	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	99%	60-138%
2051-24-3	Decachlorobiphenyl	94%	31-148%

7.2  
7

# Blank Spike Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17414-LBS	KK13797.D	1	08/01/06	AA	08/01/06	OP17414	GKK523

The QC reported here applies to the following samples:

Method: SW846 8081A

F42307-1A, F42307-2A, F42307-3A, F42307-4A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
58-89-9	gamma-BHC (Lindane)	5	5.1	102	69-137
72-20-8	Endrin	5	5.0	100	78-134
76-44-8	Heptachlor	5	4.9	98	62-137
1024-57-3	Heptachlor epoxide	5	5.0	100	74-130
72-43-5	Methoxychlor	5	4.5	90	77-131

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	82%	60-138%
2051-24-3	Decachlorobiphenyl	90%	31-148%

73  
7

# Blank Spike Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17436-LBS <sup>a</sup>	TT01322.D	1	08/03/06	VS	08/02/06	OP17436	GTT53

The QC reported here applies to the following samples:

Method: SW846 8081A

F42307-5A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
58-89-9	gamma-BHC (Lindane)	5	6.1	122	69-137
72-20-8	Endrin	5	6.2	124	78-134
76-44-8	Heptachlor	5	7.1	142*	62-137
1024-57-3	Heptachlor epoxide	5	6.1	122	74-130
72-43-5	Methoxychlor	5	6.6	132*	77-131

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	101%	60-138%
2051-24-3	Decachlorobiphenyl	98%	31-148%

(a) Insufficient sample for MS/MSD.

7.3



# Blank Spike Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17353-BS	ST49792.D	1	07/28/06	NAF	07/25/06	OP17353	GST1443

The QC reported here applies to the following samples:

Method: SW846 8082

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Spike ug/kg	BSP ug/kg	BSP %	Limits
12674-11-2	Aroclor 1016	133	122	92	75-123
11096-82-5	Aroclor 1260	133	119	89	72-124

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	82%	52-136%
2051-24-3	Decachlorobiphenyl	103%	49-148%

7.3  
7

# Blank Spike Summary

Job Number: F42307  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17355-BS	ZF20822.D	1	07/27/06	ME	07/26/06	OP17355	GZF978

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH (C10-C28)	33.3	26.0	78	62-114

CAS No.	Surrogate Recoveries	BSP	Limits
84-15-1	o-Terphenyl	94%	57-115%

7.3  
7

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17414-MS	KK13802.D	1	08/01/06	AA	07/31/06	OP17414	GKK523
OP17414-MSD	KK13803.D	1	08/01/06	AA	07/31/06	OP17414	GKK523
F42421-2A	KK13801.D	1	08/01/06	AA	07/31/06	OP17414	GKK523

The QC reported here applies to the following samples:

Method: SW846 8081A

F42307-1A, F42307-2A, F42307-3A, F42307-4A

CAS No.	Compound	F42421-2A ug/l	Spike Q	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
58-89-9	gamma-BHC (Lindane)	ND	5	5.4	108	5.5	110	2	75-140/21
72-20-8	Endrin	ND	5	5.7	114	5.7	114	0	72-149/21
76-44-8	Heptachlor	ND	5	5.6	112	5.6	112	0	74-136/25
1024-57-3	Heptachlor epoxide	ND	5	5.5	110	5.3	106	4	75-138/21
72-43-5	Methoxychlor	ND	5	5.2	104	5.4	108	4	69-145/27

CAS No.	Surrogate Recoveries	MS	MSD	F42421-2A	Limits
877-09-8	Tetrachloro-m-xylene	85%	83%	81%	60-138%
2051-24-3	Decachlorobiphenyl	84%	85%	84%	31-148%

7.4



# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17353-MS	ST49796.D	1	07/28/06	NAF	07/25/06	OP17353	GST1443
OP17353-MSD	ST49797.D	1	07/28/06	NAF	07/25/06	OP17353	GST1443
F42161-4	ST49795.D	1	07/28/06	NAF	07/25/06	OP17353	GST1443

The QC reported here applies to the following samples:

Method: SW846 8082

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	F42161-4 ug/kg	Q	Spike ug/kg	MS ug/kg	MS %	MSD ug/kg	MSD %	RPD	Limits Rec/RPD
12674-11-2	Aroclor 1016	18 U		144	132	92	130	91	2	54-138/22
11096-82-5	Aroclor 1260	18 U		144	128	89	127	89	1	46-138/21

CAS No.	Surrogate Recoveries	MS	MSD	F42161-4	Limits
877-09-8	Tetrachloro-m-xylene	91%	85%	78%	52-136%
2051-24-3	Decachlorobiphenyl	97%	102%	94%	49-148%

7.4  
7

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17355-MS	ZF20841.D	1	07/27/06	ME	07/26/06	OP17355	GZF978
OP17355-MSD	ZF20842.D	1	07/27/06	ME	07/26/06	OP17355	GZF978
F42359-4 <sup>a</sup>	ZF20840.D	1	07/27/06	ME	07/26/06	OP17355	GZF978

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

CAS No.	Compound	F42359-4 mg/kg	Spike Q mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH (C10-C28)	19.5	37.2	73.4	145*	64.0	120	14	31-136/36

CAS No.	Surrogate Recoveries	MS	MSD	F42359-4	Limits
84-15-1	o-Terphenyl	97%	90%	81%	57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

7.4  
7

# Duplicate Summary

Job Number: F42307  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17414-DUP	KK13800.D	1	08/01/06	AA	07/31/06	OP17414	GKK523
F42421-1A	KK13799.D	1	08/01/06	AA	07/31/06	OP17414	GKK523

The QC reported here applies to the following samples:

Method: SW846 8081A

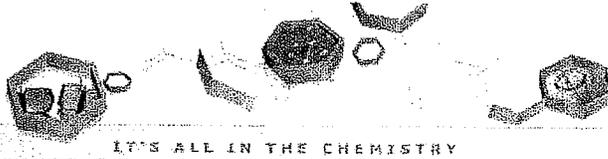
F42307-1A, F42307-2A, F42307-3A, F42307-4A

CAS No.	Compound	F42421-1A ug/l	DUP Q	F42421-1A ug/l	Q	RPD	Limits
58-89-9	gamma-BHC (Lindane)	ND		ND		nc	
12789-03-6	Chlordane	ND		ND		nc	
72-20-8	Endrin	ND		ND		nc	
76-44-8	Heptachlor	ND		ND		nc	
1024-57-3	Heptachlor epoxide	ND		ND		nc	
72-43-5	Methoxychlor	ND		ND		nc	
8001-35-2	Toxaphene	ND		ND		nc	

CAS No.	Surrogate Recoveries	DUP	F42421-1A	Limits
877-09-8	Tetrachloro-m-xylene	82%	85%	60-138%
2051-24-3	Decachlorobiphenyl	89%	85%	31-148%

7.5





IT'S ALL IN THE CHEMISTRY

## Metals Analysis

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Matrix Spike and Duplicate Summaries
- Blank Spike and Lab Control Sample Summaries
- Serial Dilution Summaries

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F42307  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP10008  
Matrix Type: LEACHATE

Methods: SW846 6010B  
Units: mg/l

Prep Date: 07/31/06 07/31/06 07/31/06

Metal	RL	IDL	MB raw	final	MB raw	final	MB raw	final
Aluminum	0.20	.018						
Antimony	0.0060	.0034						
Arsenic	0.020	.0028	-0.0032	<0.020	0.0060	<0.020	-0.00027	<0.020
Barium	1.0	.0004	-0.000060	<1.0	0.0031	<1.0	0.0026	<1.0
Beryllium	0.0050	.0004						
Cadmium	0.0050	.0002	0.000050	<0.0050	0.000030	<0.0050	-0.000050	<0.0050
Calcium	5.0	.042						
Chromium	0.010	.0006	-0.000020	<0.010	0.0028	<0.010	0.0	<0.010
Cobalt	0.050	.0006						
Copper	0.025	.0009						
Iron	0.30	.012						
Lead	0.050	.0017	0.0010	<0.050	0.0063	<0.050	0.0075	<0.050
Magnesium	5.0	.0043						
Manganese	0.015	.0006						
Molybdenum	0.050	.0013						
Nickel	0.040	.0008	anr					
Potassium	10	.01						
Selenium	0.10	.002	0.0012	<0.10	0.033	<0.10	0.029	<0.10
Silver	0.010	.0009	0.00023	<0.010	0.00047	<0.010	0.00072	<0.010
Sodium	10	.5						
Thallium	0.010	.0023						
Tin	0.050	.0031						
Vanadium	0.050	.0006						
Zinc	0.10	.0013						

Associated samples MP10008: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

8.1.1  
8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10008  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 07/31/06 07/31/06

Metal	F42269-1 Original	DUP	RPD	QC Limits	F42269-1 Original MS	Spikelot MPFLICP1	% Rec	QC Limits
Aluminum								
Antimony								
Arsenic	0.0	0.0	NC	0-20	0.0	2.3	2.0	115.0 80-120
Barium	0.039	0.039	0.0	0-20	0.039	2.0	2.0	98.1 80-120
Beryllium								
Cadmium	0.0	0.0	NC	0-20	0.0	0.049	0.050	98.0 80-120
Calcium								
Chromium	0.010	0.010	0.0	0-20	0.010	0.20	0.20	95.0 80-120
Cobalt								
Copper								
Iron								
Lead	0.0044	0.0044	0.0	0-20	0.0044	0.49	0.50	97.1 80-120
Magnesium								
Manganese								
Molybdenum								
Nickel	anr							
Potassium								
Selenium	0.052	0.053	1.9	0-20	0.052	2.3	2.0	112.4 80-120
Silver	0.0	0.0012	200.0(a)	0-20	0.0	0.058	0.050	116.0 80-120
Sodium								
Thallium								
Tin								
Vanadium								
Zinc								

Associated samples MP10008: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested  
 (a) RPD acceptable due to low duplicate and sample concentrations.

8.1.2  
**8**

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10008  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 07/31/06 07/31/06

Metal	F42269-1 Original	MSD	SpikeLot MPFLICP1	% Rec	MSD RPD	QC Limit	F42421-1A Original	DUP	RPD	QC Limits
Aluminum										
Antimony										
Arsenic	0.0	2.3	2.0	115.0	0.0	20	0.0	0.0	NC (a)	0-20
Barium	0.039	2.0	2.0	98.1	0.0	20	0.10	0.083	18.6	0-20
Beryllium										
Cadmium	0.0	0.048	0.050	96.0	2.1	20	0.0020	0.0021	4.9	0-20
Calcium										
Chromium	0.010	0.20	0.20	95.0	0.0	20	0.0062	0.0012	135.1(a)	0-20
Cobalt										
Copper										
Iron										
Lead	0.0044	0.49	0.50	97.1	0.0	20	0.0042	0.0	200.0(a)	0-20
Magnesium										
Manganese										
Molybdenum										
Nickel	anr									
Potassium										
Selenium	0.052	2.3	2.0	112.4	0.0	20	0.048	0.049	2.1	0-20
Silver	0.0	0.058	0.050	116.0	0.0	20	0.0013	0.0	200.0(a)	0-20
Sodium										
Thallium										
Tin										
Vanadium										
Zinc										

Associated samples MP10008: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested  
 (a) RPD acceptable due to low duplicate and sample concentrations.

8.1.2  
 8

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10008  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 07/31/06 07/31/06

Metal	BSP Result	Spikelot MPFLICP1 % Rec	QC Limits	BSP Result	Spikelot MPFLICP1 % Rec	QC Limits
Aluminum						
Antimony						
Arsenic	2.2	2.0 110.0	80-120	2.4	2.0 120.0	80-120
Barium	2.1	2.0 105.0	80-120	2.0	2.0 100.0	80-120
Beryllium						
Cadmium	0.051	0.050 102.0	80-120	0.051	0.050 102.0	80-120
Calcium						
Chromium	0.20	0.20 100.0	80-120	0.20	0.20 100.0	80-120
Cobalt						
Copper						
Iron						
Lead	0.51	0.50 102.0	80-120	0.52	0.50 104.0	80-120
Magnesium						
Manganese						
Molybdenum						
Nickel	anr					
Potassium						
Selenium	1.9	2.0 95.0	80-120	2.3	2.0 115.0	80-120
Silver	0.053	0.050 106.0	80-120	0.057	0.050 114.0	80-120
Sodium						
Thallium						
Tin						
Vanadium						
Zinc						

Associated samples MP10008: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

81.3  
**8**

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10008  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 07/31/06

Metal	BSP Result	Spikelot MPFLICPl % Rec	QC Limits
Aluminum			
Antimony			
Arsenic	2.2	2.0	110.0 80-120
Barium	2.1	2.0	105.0 80-120
Beryllium			
Cadmium	0.050	0.050	100.0 80-120
Calcium			
Chromium	0.20	0.20	100.0 80-120
Cobalt			
Copper			
Iron			
Lead	0.50	0.50	100.0 80-120
Magnesium			
Manganese			
Molybdenum			
Nickel	anr		
Potassium			
Selenium	2.1	2.0	105.0 80-120
Silver	0.051	0.050	102.0 80-120
Sodium			
Thallium			
Tin			
Vanadium			
Zinc			

Associated samples MP10008: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

8.1.3  
**8**

SERIAL DILUTION RESULTS SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10008  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: ug/l

Prep Date: 07/31/06

Metal	F42269-1 Original	SDL 1:5	RPD	QC Limits
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Aluminum				
Antimony				
Arsenic	0.00	0.00	NC	0-10
Barium	38.9	40.8	4.9	0-10
Beryllium				
Cadmium	0.00	0.00	NC	0-10
Calcium				
Chromium	10.5	9.81	6.3	0-10
Cobalt				
Copper				
Iron				
Lead	4.39	0.00	100.0 (a)	0-10
Magnesium				
Manganese				
Molybdenum				
Nickel	anr			
Potassium				
Selenium	51.6	44.7	13.3 (a)	0-10
Silver	0.00	5.00		0-10
Sodium				
Thallium				
Tin				
Vanadium				
Zinc				

Associated samples MP10008: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes

(\*) Outside of QC limits

(anr) Analyte not requested

(a) Percent difference acceptable due to low initial sample concentration (< 50 times IDL).

8.1.4  
**8**

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F42307  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP10014  
Matrix Type: LEACHATE

Methods: SW846 7470A  
Units: mg/l

Prep Date: 08/01/06 08/01/06 08/01/06

Metal	RL	IDL	MB raw	final	MB raw	final	MB raw	final
Mercury	0.0010	.00008	0.000015	<0.0010	0.00038	<0.010	-0.00027	<0.010

Associated samples MP10014: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

8.2.1  
8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10014  
 Matrix Type: LEACHATE

Methods: SW846 7470A  
 Units: mg/l

Prep Date: 08/01/06 08/01/06

Metal	F42421-1A Original DUP	RPD	QC Limits	F42421-1A Original MS	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.0	0.0	NC	0-20	0.0	0.031	0.030 103.3 80-120

Associated samples MP10014: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested

8.2.2  
**8**

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42307  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP10014  
Matrix Type: LEACHATE

Methods: SW846 7470A  
Units: mg/l

Prep Date: 08/01/06

Metal	F42421-1A Original MSD	SpikeLot HGFLWS1	% Rec	MSD RPD	QC Limit	
Mercury	0.0	0.031	0.030	103.3	0.0	20

Associated samples MP10014: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(N) Matrix Spike Rec. outside of QC limits  
(anr) Analyte not requested

8.2.2  
8

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F42307  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10014  
 Matrix Type: LEACHATE

Methods: SW846 7470A  
 Units: mg/l

Prep Date: 08/01/06 08/01/06

Metal	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.0030	0.0030	100.0	80-120	0.031	0.030	103.3	80-120

Associated samples MP10014: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

8.2.3

8

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F42307  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP10014  
Matrix Type: LEACHATE

Methods: SW846 7470A  
Units: mg/l

Prep Date: 08/01/06

Metal	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.030	0.030	100.0	80-120

Associated samples MP10014: F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

8.2.3

8



## General Chemistry

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## QC Data Summaries

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6

Includes the following where applicable:

- Method Blank and Blank Spike Summaries
- Duplicate Summaries
- Matrix Spike Summaries

METHOD BLANK AND SPIKE RESULTS SUMMARY  
GENERAL CHEMISTRY

Login Number: F42307  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

Analyte	Batch ID	RL	MB Result	Units	Spike Amount	BSP Result	BSP %Recov	QC Limits
Cyanide Reactivity	GP8160/GN21501			mg/kg	5.00	1.6	32.8	0-100%
Cyanide Reactivity	GP8160/GN21501	1.5	<1.5	mg/kg	5.00	1.9	38.2	0-100%
Sulfide Reactivity	GP8161/GN21502	50	<50	mg/kg	53.7	2.0	3.7	0-100%

Associated Samples:

Batch GP8160: F42307-1, F42307-2, F42307-3, F42307-4, F42307-5  
Batch GP8161: F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

9.1



DUPLICATE RESULTS SUMMARY  
GENERAL CHEMISTRY

Login Number: F42307  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

Analyte	Batch ID	QC Sample	Units	Original Result	DUP Result	RPD	QC Limits
Corrosivity as pH	GN21458	F42307-1		7.3	7.2		0-%
Ignitability (Flashpoint)	GN21505	F42224-1	Deg. F	>200	>200 (a)	0.0	0-38%
Solids, Percent	GN21440	F42301-1	%	92.2	92.6	0.4	0-30%

Associated Samples:

Batch GN21440: F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

Batch GN21458: F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

Batch GN21505: F42307-1, F42307-2, F42307-3, F42307-4, F42307-5

(a) Not ignitable.

9.2





IT'S ALL IN THE CHEMISTRY

## Misc. Forms

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## Custody Documents and Other Forms

(Accutest Laboratories Gulf Coast, Inc.)

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Includes the following where applicable:

- Chain of Custody

10





F42307

Ship Date: 2011.05  
Actual: 25 LB  
System: 253500NET200  
Account: 5710000000



From: Origin ID: (407)425-6700  
Aston Ben David  
ACCUTEST LABORATORIES  
4405 VINELAND ROAD SUITE C-16  
ORLANDO, FL 32811



BILL RECIPIENT

SHIP TO: (713)271-4700  
Sample Management  
Accutest Laboratories Gulf Coast  
10165 Harwin Drive  
Houston, TX 77036



Delivery Address Bar Code

PRIORITY OVERNIGHT

FRI

FORM 0301

Deliver By: 21 JUL 06

TRK# 7910 5746 6648

IAH AZ

77036 -TX-US

XHJGQA



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## GC Semi-volatiles

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### QC Data Summaries

(Accutest Laboratories Gulf Coast, Inc.)

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#### Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

## Method Blank Summary

Page 1 of 1

Job Number: F42307  
Account: ALSE Accutest Laboratories Southeast, Inc.  
Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6178-MB	DD57593.D	1	07/31/06	RC	08/01/06	OP6178	GDD1085

The QC reported here applies to the following samples:

Method: SW846 8151

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	Result	RL	MDL	Units	Q
94-75-7	2,4-D	ND	10	5.0	ug/l	
93-72-1	2,4,5-TP (Silvex)	ND	2.0	1.5	ug/l	

CAS No.	Surrogate Recoveries	Limits
19719-28-9	2,4-DCAA	45% 23-171%

11.1  
11

# Blank Spike Summary

**Job Number:** F42307  
**Account:** ALSE Accutest Laboratories Southeast, Inc.  
**Project:** ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6178-BS	DD57594.D	1	07/31/06	RC	08/01/06	OP6178	GDD1085

The QC reported here applies to the following samples:

Method: SW846 8151

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
94-75-7	2,4-D	20	19.6	98	44-152
93-72-1	2,4,5-TP (Silvex)	4	3.4	85	41-142

CAS No.	Surrogate Recoveries	BSP	Limits
19719-28-9	2,4-DCAA	94%	23-171%

11.2  
11

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42307  
 Account: ALSE Accutest Laboratories Southeast, Inc.  
 Project: ITVAVAB: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6178-MS	DD57597.D	1	07/31/06	RC	08/01/06	OP6178	GDD1085
OP6178-MSD	DD57598.D	1	07/31/06	RC	08/01/06	OP6178	GDD1085
F42421-2A	DD57596.D	1	07/31/06	RC	07/28/06	OP6178	GDD1085

The QC reported here applies to the following samples:

Method: SW846 8151

F42307-1A, F42307-2A, F42307-3A, F42307-4A, F42307-5A

CAS No.	Compound	F42421-2A ug/l	Spike Q	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
94-75-7	2,4-D	ND	20	5.2	26*	11.2	56	73*	28-144/25
93-72-1	2,4,5-TP (Silvex)	ND	4	3.6	90	3.2	80	12	25-137/24

CAS No.	Surrogate Recoveries	MS	MSD	F42421-2A	Limits
19719-28-9	2,4-DCAA	132%	113%	121%	23-171%

11.3  
11

**Grids 12, 13, 14  
Only – Summary  
of Full TCLP  
Results**

LabLink Analytical Data Report  
Paradise Creek 116539

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261.6/96)\*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time	
F41620-6	Aroclor 1016	12674-11-2	SW846 8082	ND		ug/kg	210		10	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	Aroclor 1221	11104-28-2	SW846 8082	ND		ug/kg	210		10	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	Aroclor 1232	11141-16-5	SW846 8082	ND		ug/kg	210		10	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	Aroclor 1242	53469-21-9	SW846 8082	ND		ug/kg	210		10	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	Aroclor 1248	12672-29-6	SW846 8082	ND		ug/kg	210		10	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	Aroclor 1254	11097-69-1	SW846 8082	ND		ug/kg	210		10	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	Aroclor 1260 (b)	11096-82-5	SW846 8082	999	J	ug/kg	210		10	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	TPH (C10-C28) (c)		SW846 8015 M	406		mg/kg	42		4	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	Aroclor 1268 (b)	11100-14-4	SW846 8082	512	J	ug/kg	210		10	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	Total PCBs		SW846 8082	1510		ug/kg	420		10	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	o-Terphenyl	84-15-1	SW846 8015 M	89		%		84	4	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	Tetrachloro-m-xylene	877-09-8	SW846 8082	66		%			10	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	Decachlorobiphenyl	2051-24-3	SW846 8082	106		%			10	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	TPH-GRO (C6-C10)		SW846 8015	6.92	J	mg/kg	7.8		1	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	4-Bromofluorobenzene	460-00-4	SW846 8015	123		%			1	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	aaa-Trifluorotoluene	98-08-8	SW846 8015	82		%			1	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	Ignitability (Flashpoint) (d)		SW846 1010	>200	>	Deg. F			1	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	Corrosivity as pH		SW846 CHAP7	10.6					1	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	Cyanide Reactivity		SW846 CHAP7	<1.9	<	mg/kg	1.9		1	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	Sulfide Reactivity		SW846 CHAP7	<50	<	mg/kg	50		1	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6	Solids, Percent		EPA 160.3 M	78.9		%			1	PC-TP-116539-GRID12	20-Jun-06	14:00	
F41620-6A	2,4-D	94-75-7	SW846 8151	ND		mg/l	0.0015		10	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	2,4,5-TP (Silvex)	93-72-1	SW846 8151	ND		mg/l	0.0002		1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	gamma-BHC (Lindane)	58-89-9	SW846 8081A	ND		mg/l	0.0005	0.4	1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Chlordane	12789-03-6	SW846 8081A	ND		mg/l	0.005	0.03	1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Endrin	72-20-8	SW846 8081A	ND		mg/l	0.001	0.02	1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Heptachlor	76-44-8	SW846 8081A	ND		mg/l	0.0005	0.008	1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Heptachlor epoxide	1024-57-3	SW846 8081A	ND		mg/l	0.0005	0.008	1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Methoxychlor	72-43-5	SW846 8081A	ND		mg/l	0.001	10	1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Toxaphene	8001-35-2	SW846 8081A	ND		mg/l	0.025	0.5	1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Tetrachloro-m-xylene	877-09-8	SW846 8081A	100		%			1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	2,4-DCAA	19719-28-9	SW846 8151	150		%			1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Decachlorobiphenyl	2051-24-3	SW846 8081A	96		%			1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Arsenic (I)	7440-38-2	SW846 6010B	0.0056	U	mg/l	0.02		5	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Barium	7440-39-3	SW846 6010B	2.2		mg/l		1	100	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Cadmium	7440-43-9	SW846 6010B	0.023		mg/l	0.005		1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Chromium	7440-47-3	SW846 6010B	0.0015	B	mg/l	0.01		5	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Lead	7439-92-1	SW846 6010B	0.28		mg/l	0.05		5	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Mercury	7439-97-6	SW846 7470A	0.0012	B	mg/l	0.01		0.2	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Selenium (I)	7782-49-2	SW846 6010B	0.04	U	mg/l	0.1		1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Silver	7440-22-4	SW846 6010B	0.0009	U	mg/l	0.01		5	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	2-Methylphenol	95-48-7	SW846 8270C	ND		mg/l	0.05	200	1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	3&4-Methylphenol		SW846 8270C	ND		mg/l	0.05	200	1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Pentachlorophenol	87-86-5	SW846 8270C	ND		mg/l	0.25	100	1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	2,4,5-Trichlorophenol	95-95-4	SW846 8270C	ND		mg/l	0.05	400	1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	2,4,6-Trichlorophenol	88-06-2	SW846 8270C	ND		mg/l	0.05	2	1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	1,4-Dichlorobenzene	106-46-7	SW846 8270C	ND		mg/l	0.05	7.5	1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	2,4-Dinitrotoluene	121-14-2	SW846 8270C	ND		mg/l	0.05	0.13	1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Hexachlorobenzene	118-74-1	SW846 8270C	ND		mg/l	0.05	0.13	1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Hexachlorobutadiene	87-68-3	SW846 8270C	ND		mg/l	0.05	0.5	1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Hexachloroethane	67-72-1	SW846 8270C	ND		mg/l	0.05	3	1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Nitrobenzene	98-95-3	SW846 8270C	ND		mg/l	0.05	2	1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Pyridine	110-86-1	SW846 8270C	ND		mg/l	0.1	5	1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	2-Fluorophenol	367-12-4	SW846 8270C	44		%			1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Phenol-d5	4165-62-2	SW846 8270C	27		%			1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	2,4,6-Tribromophenol	118-79-6	SW846 8270C	95		%			1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Nitrobenzene-d5	4165-60-0	SW846 8270C	87		%			1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	2-Fluorobiphenyl	321-60-3	SW846 8270C	91		%			1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Terphenyl-d14	1718-51-0	SW846 8270C	82		%			1	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Benzene	71-43-2	SW846 8260B	ND		mg/l	0.01	0.5	10	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Chlorobenzene	108-90-7	SW846 8260B	ND		mg/l	0.02	100	10	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Chloroform	67-66-3	SW846 8260B	ND		mg/l	0.02	6	10	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Carbon tetrachloride	56-23-5	SW846 8260B	ND		mg/l	0.02	0.5	10	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	1,1-Dichloroethylene	75-35-4	SW846 8260B	ND		mg/l	0.02	0.7	10	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	1,2-Dichloroethane	107-06-2	SW846 8260B	ND		mg/l	0.02	0.5	10	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	p-Dichlorobenzene	106-46-7	SW846 8260B	ND		mg/l	0.02	7.5	10	1	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Methyl ethyl ketone	78-93-3	SW846 8260B	ND		mg/l	0.1	200	10	1	PC-TP-116539-GRID12	20-Jun-06	14:00

**LabLink Analytical Data Report**  
**Paradise Creek 116539**

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261.6/96)\*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F41620-6A	Tetrachloroethylene	127-18-4	SW846 8260B	ND		mg/l	0.02	0.7	10	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Trichloroethylene	79-01-6	SW846 8260B	ND		mg/l	0.02	0.5	10	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Vinyl chloride	75-01-4	SW846 8260B	ND		mg/l	0.01	0.2	10	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Dibromofluoromethane	1868-53-7	SW846 8260B	105		%			10	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	Toluene-D8	2037-26-5	SW846 8260B	100		%			10	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	4-Bromofluorobenzene	460-00-4	SW846 8260B	104		%			10	PC-TP-116539-GRID12	20-Jun-06	14:00
F41620-6A	1,2-Dichloroethane-D4	17060-07-0	SW846 8260B	103		%			10	PC-TP-116539-GRID12	20-Jun-06	14:00

(b) Estimated value due to the presence of multiple overlapping Aroclor patterns.

(c) Petroleum hydrocarbon pattern extends beyond C28.

(d) Not ignitable

(e) Elevated reporting limits due to matrix interference.

(f) Outside control limits due to dilution.

(g) Result reported from PID.

(h) Outside control limits due to matrix interference.

(i) Elevated RL/MDL due to negative bias of Method Blank.

(j) Elevated RL/MDL due to positive bias of Method Blank.

(k) Elevated RL/MDL due to CRIA exceeding acceptance criteria.

*Found 2 results exceeding regulatory limits.*

*\*\* indicates result outside regulatory limits.*

\* Regulatory limits listed in this document have been obtained from the latest version of the regulations cited and are used for advisory purposes only. Accutest assumes no responsibility for errors in regulatory documents or changes to criteria detailed in later versions of the referenced regulation. It is the responsibility of the user to verify these limits before using or reporting any data.

# F41620

**CHAIN-OF-CUSTODY RECORD**

COC Number: 116539-6.20.06  
 Purchase Order Number:

The Shaw Group Inc.

<b>SHAW Environmental &amp; Infrastructure, INC. - 5700 Thurston Ave Suite 116B - Virginia Beach, VA 23455 - (757) 363-7190</b>										
Lab Location <b>Accutest</b>					Lab Reference Address <b>4409 Vineland Road Suite C-1, Orlando FL 32811 (407) 425-6700</b>					
Project Name <b>Paradise Creek</b>					Analysis Desired <b>Disposal Samples</b>					
Client Number <b>116539</b>					Client Contact <b>Natasha Kelley Sullivan (410) 528-7598</b>					
Client Rep <b>Shaw</b>					Project Manager <b>Taylor Sword</b>					
Item No.	Sample Location	Date	Time	State	Lat	Sample Description	Number of Containers	Full TOLP + ICI SW-948	PCBS SW-948 9802	TPH BROUERO SW-948 BDIEM
1	PC-TP-116539-GRD04	06/20/06	1000			Hard Pan/Wood Debris Soil	3 x 8 ounce, 2 x 4 ounce soil jar	X	X	X
2	PC-TP-116539-GRD06	06/20/06	1600			Hard Pan/Wood Debris Soil	3 x 8 ounce, 2 x 4 ounce soil jar	X	X	X
3	PC-TP-116539-GRD08	06/20/06	1600			Hard Pan/Wood Debris Soil	3 x 8 ounce, 2 x 4 ounce soil jar	X	X	X
4	PC-TP-116539-GRD10	06/20/06	1100			Hard Pan/Wood Debris Soil	3 x 8 ounce, 2 x 4 ounce soil jar	X	X	X
5	PC-TP-116539-GRD11	06/20/06	1300			Hard Pan/Wood Debris Soil	3 x 8 ounce, 2 x 4 ounce soil jar	X	X	X
6	PC-TP-116539-GRD12	06/20/06	1400			Hard Pan/Wood Debris Soil	3 x 8 ounce, 2 x 4 ounce soil jar	X	X	X
7										
8										
9										
10										

Transfer/Return Time Required: <b>7 Day TAT</b>		Sampled By: <b>Brooke Mourain, SHAW</b>		Comments		Laboratory Report No.	
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Date/Time	Transfer Requested By	Date	Time	Transfer Accepted By	Date	Time	Remarks
1	<b>Brooke Mourain</b>	06/21/2006	1500	<b>FX</b>			Summary Package Deliverables: EDD Excel *** FAX results to Natasha Sullivan (410) 528-7598
2	<b>FX</b>			<b>Jorge Cortez</b>	6/22/06	09:00	
3							
4							

2.4

**ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION**

ACCUTEST'S JOB NUMBER: F41620 CLIENT: SHAW PROJECT: Paradise Creek  
 DATE/TIME RECEIVED: 6/27/06 19:00 # OF COOLERS RECEIVED: 1 COOLER TEMPS: 2.4  
 METHOD OF DELIVERY: FEDEX UPS ACCUTEST COURIER GREYHOUND DELIVERY OTHER  
 AIRBILL NUMBERS: 85748739 8402

**COOLER INFORMATION**

- CUSTODY SEAL NOT PRESENT OR NOT INTACT
- CHAIN OF CUSTODY NOT RECEIVED (COC)
- ANALYSIS REQUESTED IS UNCLEAR OR MISSING
- SAMPLE DATES OR TIMES UNCLEAR OR MISSING
- TEMPERATURE CRITERIA NOT MET

**TRIP BLANK INFORMATION**

- TRIP BLANK NOT PROVIDED
- TRIP BLANK NOT ON COC
- TRIP BLANK INTACT
- TRIP BLANK NOT INTACT
- RECEIVED WATER TRIP BLANK
- RECEIVED SOIL TRIP BLANK

**MISC. INFORMATION**

NUMBER OF ENCORES? 0  
 NUMBER OF 5035 FIELD KITS? 0  
 NUMBER OR LAB FILTERED METALS? 0

SUMMARY OF COMMENTS: no date + time on soil jars

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**SAMPLE INFORMATION**

- SAMPLE LABELS PRESENT ON ALL BOTTLES
- CORRECT NUMBER OF CONTAINERS USED
- SAMPLE RECEIVED IMPROPERLY PRESERVED
- INSUFFICIENT VOLUME FOR ANALYSIS
- TIMES ON COC DON'T MATCH LABEL
- ID'S ON COC DON'T MATCH LABEL
- VOC VIALS HAVE HEADSPACE (MACRO BUBBLES)
- BOTTLES RECEIVED BUT ANALYSIS NOT REQUESTED
- NO BOTTLES RECEIVED FOR ANALYSIS REQUESTED
- UNCLEAR FILTERING INSTRUCTIONS
- UNCLEAR COMPOSITING INSTRUCTIONS
- SAMPLE CONTAINER(S) RECEIVED BROKEN
- % SOLIDS JAR NOT RECEIVED
- 5035 FIELD KIT FROZEN WITHIN 48 HOURS

LabLink Analytical Data Report  
Paradise Creek 116539

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261.6/96)\*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F42307-4A	2,4-D	94-75-7	SW846 8151	ND		mg/l	0.015	10	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	2,4,5-TP (Silvex)	93-72-1	SW846 8151	ND		mg/l	0.002	1	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	gamma-BHC (Lindane)	58-89-9	SW846 8081A	ND		mg/l	0.0005	0.4	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Chlordane	12789-03-6	SW846 8081A	ND		mg/l	0.005	0.03	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Endrin	72-20-8	SW846 8081A	ND		mg/l	0.001	0.02	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Heptachlor	76-44-8	SW846 8081A	ND		mg/l	0.0005	0.008	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Heptachlor epoxide	1024-57-3	SW846 8081A	ND		mg/l	0.0005	0.008	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Methoxychlor	72-43-5	SW846 8081A	ND		mg/l	0.001	10	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Toxaphene	8001-35-2	SW846 8081A	ND		mg/l	0.025	0.5	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Tetrachloro-m-xylene	877-09-8	SW846 8081A	99		%			1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	2,4-DCAA	19719-28-9	SW846 8151	107		%			1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Decachlorobiphenyl	2051-24-3	SW846 8081A	57		%			1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Arsenic (e)	7440-38-2	SW846 6010B	0.0056	U	mg/l	0.02	5	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Barium	7440-39-3	SW846 6010B	2.1		mg/l	1	100	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Cadmium	7440-43-9	SW846 6010B	0.0077		mg/l	0.005	1	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Chromium	7440-47-3	SW846 6010B	0.016		mg/l	0.01	5	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Lead	7439-92-1	SW846 6010B	0.17		mg/l	0.05	5	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Mercury	7439-97-6	SW846 7470A	0.001	U	mg/l	0.01	0.2	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Selenium (e)	7782-49-2	SW846 6010B	0.04	U	mg/l	0.1	1	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Silver	7440-22-4	SW846 6010B	0.0009	U	mg/l	0.01	5	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	2-Methylphenol	95-48-7	SW846 8270C	ND		mg/l	0.05	200	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	3,4-Methylphenol		SW846 8270C	ND		mg/l	0.05	200	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Pentachlorophenol	87-86-5	SW846 8270C	ND		mg/l	0.25	100	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	2,4,5-Trichlorophenol	95-95-4	SW846 8270C	ND		mg/l	0.05	400	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	2,4,6-Trichlorophenol	88-06-2	SW846 8270C	ND		mg/l	0.05	2	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	1,4-Dichlorobenzene	106-46-7	SW846 8270C	ND		mg/l	0.05	7.5	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	2,4-Dinitrotoluene	121-14-2	SW846 8270C	ND		mg/l	0.05	0.13	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Hexachlorobenzene	118-74-1	SW846 8270C	ND		mg/l	0.05	0.13	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Hexachlorobutadiene	87-68-3	SW846 8270C	ND		mg/l	0.05	0.5	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Hexachloroethane	67-72-1	SW846 8270C	ND		mg/l	0.05	3	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Nitrobenzene	98-95-3	SW846 8270C	ND		mg/l	0.05	2	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Pyridine	110-86-1	SW846 8270C	ND		mg/l	0.1	5	1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	2-Fluorophenol	367-12-4	SW846 8270C	27		%			1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Phenol-d5	4165-62-2	SW846 8270C	16		%			1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	2,4,6-Tribromophenol	118-79-6	SW846 8270C	83		%			1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Nitrobenzene-d5	4165-60-0	SW846 8270C	82		%			1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	2-Fluorobiphenyl	321-60-8	SW846 8270C	82		%			1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Terphenyl-d14	1718-51-0	SW846 8270C	87		%			1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Benzene	71-43-2	SW846 8260B	ND		mg/l	0.01	0.5	10	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Chlorobenzene	108-90-7	SW846 8260B	ND		mg/l	0.02	100	10	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Chloroform	67-66-3	SW846 8260B	ND		mg/l	0.02	6	10	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Carbon tetrachloride	56-23-5	SW846 8260B	ND		mg/l	0.02	0.5	10	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	1,1-Dichloroethylene	75-35-4	SW846 8260B	ND		mg/l	0.02	0.7	10	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	1,2-Dichloroethane	107-06-2	SW846 8260B	ND		mg/l	0.02	0.5	10	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	p-Dichlorobenzene	106-46-7	SW846 8260B	ND		mg/l	0.02	7.5	10	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Methyl ethyl ketone	78-93-3	SW846 8260B	ND		mg/l	0.1	200	10	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Tetrachloroethylene	127-18-4	SW846 8260B	ND		mg/l	0.02	0.7	10	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Trichloroethylene	79-01-6	SW846 8260B	ND		mg/l	0.02	0.5	10	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Vinyl chloride	75-01-4	SW846 8260B	ND		mg/l	0.01	0.2	10	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Dibromofluoromethane	1868-53-7	SW846 8260B	110		%			10	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	Toluene-D8	2037-26-5	SW846 8260B	102		%			10	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	4-Bromofluorobenzene	460-00-4	SW846 8260B	105		%			10	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4A	1,2-Dichloroethane-D4	17060-07-0	SW846 8260B	111		%			10	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	TPH (C10-C28)		SW846 8015 M	310		mg/kg	100		8	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	Aroclor 1016	12674-11-2	SW846 8082	ND		ug/kg	1300		50	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	Aroclor 1221	11104-28-2	SW846 8082	ND		ug/kg	1300		50	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	Aroclor 1232	11141-16-5	SW846 8082	ND		ug/kg	1300		50	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	Aroclor 1242	53469-21-9	SW846 8082	ND		ug/kg	1300		50	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	Aroclor 1248	12672-29-6	SW846 8082	ND		ug/kg	1300		50	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	Aroclor 1254	11097-69-1	SW846 8082	ND		ug/kg	1300		50	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	Aroclor 1260 (c)	11096-82-5	SW846 8082	4240	J	ug/kg	1300		50	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	Aroclor 1268 (c)	11100-14-4	SW846 8082	3370	J	ug/kg	1300		50	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	Total PCBs		SW846 8082	7610		ug/kg	2600		50	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	o-Terphenyl	84-15-1	SW846 8015 M	71		%	210		8	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	Tetrachloro-m-xylene (a)	877-09-8	SW846 8082	IND	*	%			50	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	Decachlorobiphenyl (a)	2051-24-3	SW846 8082	IND	*	%			50	PC-TP-116539-GRID0113	18-Jul-06	10:00

**LabLink Analytical Data Report**  
**Paradise Creek 116539**

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261.6/96)\*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F42307-4	TPH-GRO (C6-C10)		SW846 8015	ND		mg/kg	12		1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	4-Bromofluorobenzene	460-00-4	SW846 8015	84		%			1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	aaa-Trifluorotoluene	98-08-8	SW846 8015	84		%			1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	Ignitability (Flashpoint) (b)		SW846 1010	>200	>	Deg. F			1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	Corrosivity as pH		SW846 CHAP7	9.1					1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	Cyanide Reactivity		SW846 CHAP7	<2.0	<	mg/kg	2		1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	Sulfide Reactivity		SW846 CHAP7	<50	<	mg/kg	50		1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-4	Solids, Percent		EPA 160.3 M	64.3		%			1	PC-TP-116539-GRID0113	18-Jul-06	10:00
F42307-5A	2,4-D	94-75-7	SW846 8151	ND		mg/l	0.015	10	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	2,4,5-TP (Silvex)	93-72-1	SW846 8151	ND		mg/l	0.002	1	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	gamma-BHC (Lindane)	58-89-9	SW846 8081A	ND		mg/l	0.0005	0.4	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Chlordane	12789-03-6	SW846 8081A	ND		mg/l	0.005	0.03	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Endrin	72-20-8	SW846 8081A	ND		mg/l	0.001	0.02	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Heptachlor	76-44-8	SW846 8081A	ND		mg/l	0.0005	0.008	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Heptachlor epoxide	1024-57-3	SW846 8081A	ND		mg/l	0.0005	0.008	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Methoxychlor	72-43-5	SW846 8081A	ND		mg/l	0.001	10	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Toxaphene	8001-35-2	SW846 8081A	ND		mg/l	0.025	0.5	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Tetrachloro-m-xylene	877-09-8	SW846 8081A	78		%			1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	2,4-DCAA	19719-28-9	SW846 8151	102		%			1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Decachlorobiphenyl	2051-24-3	SW846 8081A	88		%			1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Arsenic (e)	7440-38-2	SW846 6010B	0.046		mg/l	0.02	5	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Barium	7440-39-3	SW846 6010B	1.5		mg/l	1	100	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Cadmium	7440-43-9	SW846 6010B	0.058		mg/l	0.005	1	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Chromium	7440-47-3	SW846 6010B	0.018		mg/l	0.01	5	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Lead	7439-92-1	SW846 6010B	3.5		mg/l	0.05	5	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Mercury	7439-97-6	SW846 7470A	0.001	U	mg/l	0.01	0.2	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Selenium (e)	7782-49-2	SW846 6010B	0.04	U	mg/l	0.1	1	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Silver	7440-22-4	SW846 6010B	0.0014	B	mg/l	0.01	5	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	2-Methylphenol	95-48-7	SW846 8270C	ND		mg/l	0.05	200	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	3&4-Methylphenol		SW846 8270C	ND		mg/l	0.05	200	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Pentachlorophenol	87-86-5	SW846 8270C	ND		mg/l	0.25	100	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	2,4,5-Trichlorophenol	95-95-4	SW846 8270C	ND		mg/l	0.05	400	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	2,4,6-Trichlorophenol	88-06-2	SW846 8270C	ND		mg/l	0.05	2	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	1,4-Dichlorobenzene	106-46-7	SW846 8270C	ND		mg/l	0.05	7.5	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	2,4-Dinitrotoluene	121-14-2	SW846 8270C	ND		mg/l	0.05	0.13	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Hexachlorobenzene	118-74-1	SW846 8270C	ND		mg/l	0.05	0.13	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Hexachlorobutadiene	87-68-3	SW846 8270C	ND		mg/l	0.05	0.5	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Hexachloroethane	67-72-1	SW846 8270C	ND		mg/l	0.05	3	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Nitrobenzene	98-95-3	SW846 8270C	ND		mg/l	0.05	2	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Pyridine	110-86-1	SW846 8270C	ND		mg/l	0.1	5	1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	2-Fluorophenol	367-12-4	SW846 8270C	27		%			1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Phenol-d5	4165-62-2	SW846 8270C	16		%			1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	2,4,6-Tribromophenol	118-79-6	SW846 8270C	80		%			1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Nitrobenzene-d5	4165-60-0	SW846 8270C	77		%			1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	2-Fluorobiphenyl	321-60-8	SW846 8270C	77		%			1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Terphenyl-d14	1718-51-0	SW846 8270C	75		%			1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Benzene	71-43-2	SW846 8260B	ND		mg/l	0.01	0.5	10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Chlorobenzene	108-90-7	SW846 8260B	ND		mg/l	0.02	100	10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Chloroform	67-66-3	SW846 8260B	ND		mg/l	0.02	6	10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Carbon tetrachloride	56-23-5	SW846 8260B	ND		mg/l	0.02	0.5	10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	1,1-Dichloroethylene	75-35-4	SW846 8260B	ND		mg/l	0.02	0.7	10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	1,2-Dichloroethane	107-06-2	SW846 8260B	ND		mg/l	0.02	0.5	10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	p-Dichlorobenzene	106-46-7	SW846 8260B	ND		mg/l	0.02	7.5	10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Methyl ethyl ketone	78-93-3	SW846 8260B	ND		mg/l	0.1	200	10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Tetrachloroethylene	127-18-4	SW846 8260B	ND		mg/l	0.02	0.7	10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Trichloroethylene	79-01-6	SW846 8260B	ND		mg/l	0.02	0.5	10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Vinyl chloride	75-01-4	SW846 8260B	ND		mg/l	0.01	0.2	10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Dibromofluoromethane	1868-53-7	SW846 8260B	111		%			10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	Toluene-D8	2037-26-5	SW846 8260B	103		%			10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	4-Bromofluorobenzene	460-00-4	SW846 8260B	102		%			10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5A	1,2-Dichloroethane-D4	17060-07-0	SW846 8260B	117		%			10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	TPH (C10-C28)		SW846 8015 M	215		mg/kg	44		4	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	Aroclor 1016	12674-11-2	SW846 8082	ND		ug/kg	210		10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	Aroclor 1221	11104-28-2	SW846 8082	ND		ug/kg	210		10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	Aroclor 1232	11141-16-5	SW846 8082	ND		ug/kg	210		10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	Aroclor 1242	53469-21-9	SW846 8082	ND		ug/kg	210		10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	Aroclor 1248 (d)	12672-29-6	SW846 8082	ND		ug/kg	420		10	PC-TP-116539-GRID014	18-Jul-06	11:00

**LabLink Analytical Data Report**  
**Paradise Creek 116539**

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261.6/96)<sup>a</sup>

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F42307-5	Aroclor 1254	11097-69-1	SW846 8082	ND		ug/kg	210		10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	Aroclor 1260 (c)	11096-82-5	SW846 8082	461	J	ug/kg	210		10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	Aroclor 1268 (c)	11100-14-4	SW846 8082	135	J	ug/kg	210		10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	Total PCBs		SW846 8082	597		ug/kg	420		10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	Tetrachloro-m-xylene	877-09-8	SW846 8082	119		%			10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	o-Terphenyl	84-15-1	SW846 8015 M	87		%	89		4	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	Decachlorobiphenyl	2051-24-3	SW846 8082	123		%			10	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	TPH-GRO (C6-C10)		SW846 8015	ND		mg/kg	7.9		1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	4-Bromofluorobenzene	460-00-4	SW846 8015	88		%			1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	aaa-Trifluorotoluene	98-08-8	SW846 8015	84		%			1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	Ignitability (Flashpoint) (b)		SW846 1010	>200	>	Deg. F			1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	Sulfide Reactivity		SW846 CHAP7	<50	<	mg/kg	50		1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	Corrosivity as pH		SW846 CHAP7	6.9					1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	Cyanide Reactivity		SW846 CHAP7	<1.8	<	mg/kg	1.8		1	PC-TP-116539-GRID014	18-Jul-06	11:00
F42307-5	Solids, Percent		EPA 160.3 M	76.9		%			1	PC-TP-116539-GRID014	18-Jul-06	11:00

(a) Outside control limits due to dilution.

(b) Not ignitable

(c) Estimated value due to the presence of multiple overlapping Aroclor patterns.

(d) Elevated reporting limits due to matrix interference.

(e) Elevated RL/MDL due to positive bias of Method Blank.

*Found \*results exceeding regulatory limits.*

\*\* Indicates result outside regulatory limits.

\* Regulatory limits listed in this document have been obtained from the latest version of the regulations cited and are used for advisory purposes only.

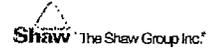
Accutest assumes no responsibility for errors in regulatory documents or changes to criteria detailed in later versions of the referenced regulation.

It is the responsibility of the user to verify these limits before using or reporting any data.

F42307

CHAIN-OF-CUSTODY RECORD

COC Number: 116539-7.18.06  
Purchase Order Number:



SHAW Environmental & Infrastructure, INC. - 5700 Thurston Ave Suite 116B - Virginia Beach, VA 23455 - (757) 363 7190

Client/Project Name		Field/Project Address		Analyses Desired						
Accutest		4406 Vineland Road Suite C-1, Orlando FL 32811 (407)428-6700								
Project Name		Sample Location								
Paradise Creek		Disposal Samples								
Project Number		Shaw Contract Number								
116539		Natasha Kelley Sullivan (410)529-7598								
Client Logo		Project Manager								
Shaw		Taylor Sword								
Draw No	Sample Location	Date	Time	Wet	Dry	Sample Description	Number of Containers	PAH TOLP + PCB SH-946	PCBs SH-946 8082	TPH DROPOSO SH-946 80108
1	PC-TP-116539-GRID007	07/18/06	0700		X		3 x 8 ounces, 2 x 4 ounces soil jar	X	X	X
2	PC-TP-116539-GRID008	07/18/06	0800		X		3 x 8 ounces, 2 x 4 ounces soil jar	X	X	X
3	PC-TP-116539-GRID009	07/18/06	0900		X		3 x 8 ounces, 2 x 4 ounces soil jar	X	X	X
4	PC-TP-116539-GRID0113	07/18/06	1000		X		3 x 8 ounces, 2 x 4 ounces soil jar	X	X	X
5	PC-TP-116539-GRID014	07/18/06	1100		X		3 x 8 ounces, 2 x 4 ounces soil jar	X	X	X
6										
7										
8										
9										
10										

Turnaround Time Required:	Sampled By:	SUBJECTS:	Laboratory Report No.:
14 Day TAT	Brooke Mourain, SHAW		

Transfer Number	Transfer Date/Time	Transfer Date/Time	Transfer Date/Time	Remarks
1	Brooke Mourain	7/19/2006	1600	Summary Package
2	WPS			Deliverables: EDD Excel
3				*** Fax results to Natasha Sullivan (410) 529-7598
4				

24

**ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION**

ACCUTEST'S JOB NUMBER: F42307 CLIENT: Shaw PROJECT: Paradise Creek  
 DATE/TIME RECEIVED: 1030 7/24/06 # OF COOLERS RECEIVED: 1 COOLER TEMPS: 2.4  
 METHOD OF DELIVERY: FEDEX  UPS  ACCUTEST COURIER GREYHOUND DELIVERY OTHER  
 AIRBILL NUMBERS: 12 65V 742 01 9200 1298

**COOLER INFORMATION**

- CUSTODY SEAL NOT PRESENT OR NOT INTACT
- CHAIN OF CUSTODY NOT RECEIVED (COC)
- ANALYSIS REQUESTED IS UNCLEAR OR MISSING
- SAMPLE DATES OR TIMES UNCLEAR OR MISSING
- TEMPERATURE CRITERIA NOT MET

**TRIP BLANK INFORMATION**

- TRIP BLANK NOT PROVIDED
- TRIP BLANK NOT ON COC
- TRIP BLANK INTACT
- TRIP BLANK NOT INTACT
- RECEIVED WATER TRIP BLANK
- RECEIVED SOIL TRIP BLANK

**MISC. INFORMATION**

NUMBER OF ENCORES ? 17  
 NUMBER OF 5035 FIELD KITS ? 2  
 NUMBER OR LAB FILTERED METALS ? 2

SUMMARY OF COMMENTS:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

TECHNICIAN SIGNATURE/DATE [Signature] 7/24/06 TECHNICIAN SIGNATURE/DATE \_\_\_\_\_

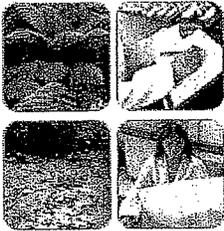
ASBD03/27/06

**Grids 12, 13, 14**  
**Additional**  
**Samples**  
**TPH- (C<sub>10</sub> – C<sub>28</sub>),**  
**pH, TCLP pb only**  
**Sampled 7/31/06**



IT'S ALL IN THE CHEMISTRY

08/09/06



**Technical Report for**

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Shaw E & I, Inc.

Paradise Creek

116539

Accutest Job Number: F42594

Sampling Date: 07/31/06

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Report to:

Shaw E & I, Inc.

natasha.sullivan@shawgrp.com

ATTN: Natasha Sullivan

Total number of pages in report: 45



Test results contained within this data package meet the requirements of the National Environmental Laboratory Accreditation Conference and/or state specific certification programs as applicable.

*Harry Behzadi*  
Harry Behzadi, Ph.D.  
Laboratory Director

Certifications: FL (DOH E83510), NC (573), NJ (FL002), MA (FL946), IA (366), LA (03051), KS (E-10327), SC, AK  
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Accutest Laboratories

### Sample Summary

Shaw E & I, Inc.

Job No: F42594

Paradise Creek  
Project No: 116539

Sample Number	Collected Date	Time By	Received	Matrix Code	Type	Client Sample ID
F42594-1	07/31/06	08:15 BM	08/01/06	SO	Soil	PC-TP-116539-GRID012A
F42594-2	07/31/06	08:30 BM	08/01/06	SO	Soil	PC-TP-116539-GRID012B
F42594-3	07/31/06	08:45 BM	08/01/06	SO	Soil	PC-TP-116539-GRID012C
F42594-4	07/31/06	09:00 BM	08/01/06	SO	Soil	PC-TP-116539-GRID013A
F42594-5	07/31/06	09:15 BM	08/01/06	SO	Soil	PC-TP-116539-GRID013B
F42594-6	07/31/06	09:30 BM	08/01/06	SO	Soil	PC-TP-116539-GRID013C
F42594-7	07/31/06	09:37 BM	08/01/06	SO	Soil	PC-TP-116539-GRID013D
F42594-8	07/31/06	09:45 BM	08/01/06	SO	Soil	PC-TP-116539-GRID014A
F42594-9	07/31/06	10:00 BM	08/01/06	SO	Soil	PC-TP-116539-GRID014B

Soil samples reported on a dry weight basis unless otherwise indicated on result page.



## Sample Results

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## Report of Analysis

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Report of Analysis

2.1  
2

Client Sample ID:	PC-TP-116539-GRID012A		Date Sampled:	07/31/06
Lab Sample ID:	F42594-1		Date Received:	08/01/06
Matrix:	SO - Soil		Percent Solids:	75.9
Method:	SW846 8015 M SW846 3550B			
Project:	Paradise Creek			

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL11784.D	4	08/03/06	MRE	08/02/06	OP17431	GLL438
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.6 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	639	43	26	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	91%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID012A	<b>Date Sampled:</b> 07/31/06
<b>Lab Sample ID:</b> F42594-1	<b>Date Received:</b> 08/01/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 75.9
<b>Project:</b> Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	0.62	D008	5.0	0.050	0.0017	mg/l	1	08/07/06	08/07/06 RS	SW846 6010B <sup>1</sup>

(1) Instrument QC Batch: MA5146  
 (2) Prep QC Batch: MP10055

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result > = MDL but < RL

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID012A	<b>Date Sampled:</b> 07/31/06
<b>Lab Sample ID:</b> F42594-1	<b>Date Received:</b> 08/01/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 75.9
<b>Project:</b> Paradise Creek	

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	75.9		%	1	08/04/06	CP	EPA 160.3 M
pH	7.7		su	1	08/02/06	CP	SW846 9045

---

RL = Reporting Limit

Report of Analysis

Client Sample ID:	PC-TP-116539-GRID012B	
Lab Sample ID:	F42594-2	Date Sampled: 07/31/06
Matrix:	SO - Soil	Date Received: 08/01/06
Method:	SW846 8015 M SW846 3550B	Percent Solids: 67.8
Project:	Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL11785.D	4	08/03/06	MRE	08/02/06	OP17431	GLL438
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.1 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	620	49	29	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	93%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected    MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID012B	<b>Date Sampled:</b> 07/31/06
<b>Lab Sample ID:</b> F42594-2	<b>Date Received:</b> 08/01/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 67.8
<b>Project:</b> Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	1.3	D008	5.0	0.050	0.0017	mg/l	1	08/07/06	08/07/06 RS	SW846 6010B <sup>1</sup>

- (1) Instrument QC Batch: MA5146
- (2) Prep QC Batch: MP10055

---

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result > = MDL but < RL

### Report of Analysis

Client Sample ID:	PC-TP-116539-GRID012B	Date Sampled:	07/31/06
Lab Sample ID:	F42594-2	Date Received:	08/01/06
Matrix:	SO - Soil	Percent Solids:	67.8
Project:	Paradise Creek		

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	67.8		%	1	08/04/06	CP	EPA 160.3 M
pH	7.5		su	1	08/02/06	CP	SW846 9045

RL = Reporting Limit

**Report of Analysis**

<b>Client Sample ID:</b>	PC-TP-116539-GRID012C	<b>Date Sampled:</b>	07/31/06
<b>Lab Sample ID:</b>	F42594-3	<b>Date Received:</b>	08/01/06
<b>Matrix:</b>	SO - Soil	<b>Percent Solids:</b>	68.6
<b>Method:</b>	SW846 8015 M SW846 3550B		
<b>Project:</b>	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL11786.D	4	08/03/06	MRE	08/02/06	OP17431	GLL438
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.2 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	407	48	29	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	93%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b>	PC-TP-116539-GRID012C	<b>Date Sampled:</b>	07/31/06
<b>Lab Sample ID:</b>	F42594-3	<b>Date Received:</b>	08/01/06
<b>Matrix:</b>	SO - Soil	<b>Percent Solids:</b>	68.6
<b>Project:</b>	Paradise Creek		

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	1.3	D008	5.0	0.050	0.0017	mg/l	1	08/07/06	08/07/06 RS	SW846 6010B <sup>1</sup>

(1) Instrument QC Batch: MA5146

(2) Prep QC Batch: MP10055

---

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result >= MDL but < RL

## Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID012C	<b>Date Sampled:</b> 07/31/06
<b>Lab Sample ID:</b> F42594-3	<b>Date Received:</b> 08/01/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 68.6
<b>Project:</b> Paradise Creek	

### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	68.6		%	1	08/04/06	CP	EPA 160.3 M
pH	7.5		su	1	08/02/06	CP	SW846 9045

RL = Reporting Limit

Report of Analysis

2.4  
2

<b>Client Sample ID:</b>	PC-TP-116539-GRID013A	<b>Date Sampled:</b>	07/31/06
<b>Lab Sample ID:</b>	F42594-4	<b>Date Received:</b>	08/01/06
<b>Matrix:</b>	SO - Soil	<b>Percent Solids:</b>	68.5
<b>Method:</b>	SW846 8015 M SW846 3550B		
<b>Project:</b>	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL11800.D	10	08/04/06	MRE	08/02/06	OP17431	GLL439
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.2 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	997	120	73	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	89%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit      J = Indicates an estimated value  
 RL = Reporting Limit      B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID013A	<b>Date Sampled:</b> 07/31/06
<b>Lab Sample ID:</b> F42594-4	<b>Date Received:</b> 08/01/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 68.5
<b>Project:</b> Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	2.3	D008	5.0	0.050	0.0017	mg/l	1	08/07/06	08/07/06 RS	SW846 6010B <sup>1</sup>

(1) Instrument QC Batch: MA5146  
(2) Prep QC Batch: MP10055

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result >= MDL but < RL

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID013A	<b>Date Sampled:</b> 07/31/06
<b>Lab Sample ID:</b> F42594-4	<b>Date Received:</b> 08/01/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 68.5
<b>Project:</b> Paradise Creek	

**General Chemistry**

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	68.5		%	1	08/04/06	CP	EPA 160.3 M
pH	8.4		su	1	08/02/06	CP	SW846 9045

---

RL = Reporting Limit

### Report of Analysis

<b>Client Sample ID:</b>	PC-TP-116539-GRID013B	<b>Date Sampled:</b>	07/31/06
<b>Lab Sample ID:</b>	F42594-5	<b>Date Received:</b>	08/01/06
<b>Matrix:</b>	SO - Soil	<b>Percent Solids:</b>	75.0
<b>Method:</b>	SW846 8015 M SW846 3550B		
<b>Project:</b>	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL11788.D	10	08/03/06	MRE	08/02/06	OP17431	GLL438
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.2 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	1150	110	66	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	84%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID013B	<b>Date Sampled:</b> 07/31/06
<b>Lab Sample ID:</b> F42594-5	<b>Date Received:</b> 08/01/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 75.0
<b>Project:</b> Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	1.6	D008	5.0	0.050	0.0017	mg/l	1	08/07/06	08/07/06 RS	SW846 6010B <sup>1</sup>

(1) Instrument QC Batch: MA5146

(2) Prep QC Batch: MP10055

---

**RL = Reporting Limit**      **MDL = Method Detection Limit**      **U = Indicates a result < MDL**  
**MCL = Maximum Contamination Level (40 CFR 261 6/96)**      **B = Indicates a result >= MDL but < RL**

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID013B	<b>Date Sampled:</b> 07/31/06
<b>Lab Sample ID:</b> F42594-5	<b>Date Received:</b> 08/01/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 75.0
<b>Project:</b> Paradise Creek	

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	75		%	1	08/04/06	CP	EPA 160.3 M
pH	8.4		su	1	08/02/06	CP	SW846 9045

RL = Reporting Limit

### Report of Analysis

<b>Client Sample ID:</b>	PC-TP-116539-GRID013C	
<b>Lab Sample ID:</b>	F42594-6	<b>Date Sampled:</b> 07/31/06
<b>Matrix:</b>	SO - Soil	<b>Date Received:</b> 08/01/06
<b>Method:</b>	SW846 8015 M SW846 3550B	<b>Percent Solids:</b> 77.7
<b>Project:</b>	Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL11791.D	4	08/03/06	MRE	08/02/06	OP17431	GLL438
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.4 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	256	42	25	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	91%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID013C	<b>Date Sampled:</b> 07/31/06
<b>Lab Sample ID:</b> F42594-6	<b>Date Received:</b> 08/01/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 77.7
<b>Project:</b> Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	0.63	D008	5.0	0.050	0.0017	mg/l	1	08/07/06	08/07/06 RS	SW846 6010B <sup>1</sup>

(1) Instrument QC Batch: MA5146

(2) Prep QC Batch: MP10055

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RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result >= MDL but < RL

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID013C	<b>Date Sampled:</b> 07/31/06
<b>Lab Sample ID:</b> F42594-6	<b>Date Received:</b> 08/01/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 77.7
<b>Project:</b> Paradise Creek	

#### General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	77.7		%	1	08/04/06	CP	EPA 160.3 M
pH	8.2		su	1	08/02/06	CP	SW846 9045

RL = Reporting Limit

**Report of Analysis**

<b>Client Sample ID:</b>	PC-TP-116539-GRID013D	<b>Date Sampled:</b>	07/31/06
<b>Lab Sample ID:</b>	F42594-7	<b>Date Received:</b>	08/01/06
<b>Matrix:</b>	SO - Soil	<b>Percent Solids:</b>	77.4
<b>Method:</b>	SW846 8015 M SW846 3550B		
<b>Project:</b>	Paradise Creek		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL11801.D	20	08/04/06	MRE	08/02/06	OP17431	GLL439
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.2 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	1310	210	130	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	0% <sup>b</sup>		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.  
 (b) Outside control limits due to dilution.

ND = Not detected    MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

2.7  
2

Client Sample ID:	PC-TP-116539-GRID013D	Date Sampled:	07/31/06
Lab Sample ID:	F42594-7	Date Received:	08/01/06
Matrix:	SO - Soil	Percent Solids:	77.4
Project:	Paradise Creek		

Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	4.3	D008	5.0	0.25	0.0085	mg/l	5	08/07/06	08/08/06 RS	SW846 6010B 1

(1) Instrument QC Batch: MA5150

(2) Prep QC Batch: MP10055

---

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result >= MDL but < RL

**Report of Analysis**

2.7  
2

<b>Client Sample ID:</b> PC-TP-116539-GRID013D	<b>Date Sampled:</b> 07/31/06
<b>Lab Sample ID:</b> F42594-7	<b>Date Received:</b> 08/01/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 77.4
<b>Project:</b> Paradise Creek	

**General Chemistry**

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	77.4		%	1	08/04/06	CP	EPA 160.3 M
pH	8.6		su	1	08/02/06	CP	SW846 9045

RL = Reporting Limit



**Report of Analysis**

<b>Client Sample ID:</b> PC-TP-116539-GRID014A	<b>Date Sampled:</b> 07/31/06
<b>Lab Sample ID:</b> F42594-8	<b>Date Received:</b> 08/01/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 75.2
<b>Method:</b> SW846 8015 M SW846 3550B	
<b>Project:</b> Paradise Creek	

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL11793.D	4	08/03/06	MRE	08/02/06	OP17431	GLL438
Run #2							

	Initial Weight	Final Volume
Run #1	30.3 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	271	44	26	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	85%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

**Report of Analysis**

<b>Client Sample ID:</b> PC-TP-116539-GRID014A	<b>Date Sampled:</b> 07/31/06
<b>Lab Sample ID:</b> F42594-8	<b>Date Received:</b> 08/01/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 75.2
<b>Project:</b> Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	0.67	D008	5.0	0.050	0.0017	mg/l	1	08/07/06	08/07/06 RS	SW846 6010B <sup>1</sup>

(1) Instrument QC Batch: MA5146  
 (2) Prep QC Batch: MP10055

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result > = MDL but < RL

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID014A	<b>Date Sampled:</b> 07/31/06
<b>Lab Sample ID:</b> F42594-8	<b>Date Received:</b> 08/01/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 75.2
<b>Project:</b> Paradise Creek	

**General Chemistry**

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	75.2		%	1	08/04/06	CP	EPA 160.3 M
pH	8.0		su	1	08/02/06	CP	SW846 9045

RL = Reporting Limit

Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID014B	<b>Date Sampled:</b> 07/31/06
<b>Lab Sample ID:</b> F42594-9	<b>Date Received:</b> 08/01/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 75.2
<b>Method:</b> SW846 8015 M SW846 3550B	
<b>Project:</b> Paradise Creek	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 <sup>a</sup>	LL11794.D	4	08/03/06	MRE	08/02/06	OP17431	GLL438
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.2 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	457	44	26	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	78%		57-115%		

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

### Report of Analysis

<b>Client Sample ID:</b> PC-TP-116539-GRID014B	<b>Date Sampled:</b> 07/31/06
<b>Lab Sample ID:</b> F42594-9	<b>Date Received:</b> 08/01/06
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> 75.2
<b>Project:</b> Paradise Creek	

**Metals Analysis, TCLP Leachate SW846 1311**

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed By	Method
Lead	0.66	D008	5.0	0.050	0.0017	mg/l	1	08/07/06	08/07/06 RS	SW846 6010B <sup>1</sup>

(1) Instrument QC Batch: MA5146

(2) Prep QC Batch: MP10055

RL = Reporting Limit      MDL = Method Detection Limit      U = Indicates a result < MDL  
 MCL = Maximum Contamination Level (40 CFR 261 6/96)      B = Indicates a result >= MDL but < RL

### Report of Analysis

<b>Client Sample ID:</b>	PC-TP-116539-GRID014B	<b>Date Sampled:</b>	07/31/06
<b>Lab Sample ID:</b>	F42594-9	<b>Date Received:</b>	08/01/06
<b>Matrix:</b>	SO - Soil	<b>Percent Solids:</b>	75.2
<b>Project:</b>	Paradise Creek		

**General Chemistry**

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Solids, Percent	75.2		%	1	08/04/06	CP	EPA 160.3 M
pH	8.0		su	1	08/02/06	CP	SW846 9045

RL = Reporting Limit



## Misc. Forms

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## Custody Documents and Other Forms

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Includes the following where applicable:

- Chain of Custody

CHAIN-OF-CUSTODY RECORD

COC Number: 116539-7.31.06  
 Purchase Order Number:

**F42594**

Shaw The Shaw Group Inc.

SHAW Environmental & Infrastructure, INC. - 5700 Thurston Ave Suite 116B - Virginia Beach, VA 23455 - (757) 363-7190

Lab. Designation		Reference Agency		Address		City/State/Zip		Phone/Fax		Analyst's Designation	
Accutest		4408 Vineland Road Suite C-1, Orlando FL 32811		Orlando, FL		32811		(407) 425-8700			
Project Name		Project Number		Project Lead's Name		Project Lead's Phone		Project Lead's Fax			
Paradise Creek		116539		Nataasha Kelley Sullivan		(410) 528-7698					
Client Name		Project Manager		Client Name		Project Manager		Client Name		Project Manager	
Shaw		Taylor Sword									
Item No.	Sample Location	Date	Time	Wet	Dry	Sample Description	Volume of Containers	TCAP Pb-Sw-046-1531-001006	TCAP Pb-Sw-046-1531-001006	TCAP Pb-Sw-046-1531-001006	TCAP Pb-Sw-046-1531-001006
1	PC-TP-116539-GRID012a	07/31/06	0815		X	3 point composite	1 x 8 ounce	X	X	X	
2	PC-TP-116539-GRID012b	07/31/06	0830		X	3 point composite	1 x 8 ounce	X	X	X	
3	PC-TP-116539-GRID012c	07/31/06	0845		X	3 point composite	1 x 8 ounce	X	X	X	
4	PC-TP-116539-GRID013a	07/31/06	0900		X	3 point composite	1 x 8 ounce	X	X	X	
5	PC-TP-116539-GRID013b	07/31/06	0915		X	3 point composite	1 x 8 ounce	X	X	X	
6	PC-TP-116539-GRID013c	07/31/06	0930		X	3 point composite	1 x 8 ounce	X	X	X	
7	PC-TP-116539-GRID013d	07/31/06	0937		X	3 point composite/duplicate	1 x 8 ounce	X	X	X	
8	PC-TP-116539-GRID014a	07/31/06	0945		X	3 point composite	1 x 8 ounce	X	X	X	
9	PC-TP-116539-GRID014b	07/31/06	1000		X	3 point composite	1 x 8 ounce	X	X	X	
10											
11											
12											
13											
14											
15											

Turnaround Time Required:	Sampled By:	REQUIREMENTS:	Laboratory Report No.:
<input type="checkbox"/> 1 week	Brooke Mourain, SHAW		

Item No.	Transfer/Relinquished By	Date	Time	Transfer/Accepted By	Date	Time	Remarks
1	Brooke Mourain	7/31/2006	1500	<i>Brooke Mourain</i>			Summary Package
2	<i>ULPS</i>			<i>Brooke Mourain</i>	8/1/06	1000	Deliverables: EDD Excel
3							*** Fax results to Nataasha Sullivan (410) 528-7598
4							

2.6

**ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION**

ACCUTEST'S JOB NUMBER: F42594 CLIENT: Shaw PROJECT: Paradise Creek  
 DATE/TIME RECEIVED: 8/1/06 10:00 # OF COOLERS RECEIVED: 1 COOLER TEMPS: 26  
 METHOD OF DELIVERY: FEDEX  UPS ACCUTEST COURIER GREYHOUND DELIVERY OTHER  
 AIRBILL NUMBERS: 12 66U 792 01 9788 3783

**COOLER INFORMATION**

- CUSTODY SEAL NOT PRESENT OR NOT INTACT
- CHAIN OF CUSTODY NOT RECEIVED (COC)
- ANALYSIS REQUESTED IS UNCLEAR OR MISSING
- SAMPLE DATES OR TIMES UNCLEAR OR MISSING
- TEMPERATURE CRITERIA NOT MET

**TRIP BLANK INFORMATION**

- TRIP BLANK NOT PROVIDED
- TRIP BLANK NOT ON COC
- TRIP BLANK INTACT
- TRIP BLANK NOT INTACT
- RECEIVED WATER TRIP BLANK
- RECEIVED SOIL TRIP BLANK

**MISC. INFORMATION**

NUMBER OF ENCORES ? 2  
 NUMBER OF 5035 FIELD KITS ? 2  
 NUMBER OR LAB FILTERED METALS ? 2

SUMMARY OF COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

TECHNICIAN SIGNATURE/DATE ALSE 8/1/06 TECHNICIAN SIGNATURE/DATE \_\_\_\_\_

ASBD03/27/06

3.1  
3



## GC Semi-volatiles

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### QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

## Method Blank Summary

Page 1 of 1

Job Number: F42594  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17431-MB	LL11780.D	1	08/03/06	MRE	08/02/06	OP17431	GLL438

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42594-1, F42594-2, F42594-3, F42594-4, F42594-5, F42594-6, F42594-7, F42594-8, F42594-9

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries	Limits
84-15-1	o-Terphenyl	102% 57-115%

4.1  
4

# Method Blank Summary

Job Number: F42594  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17431-MB	LL11799.D	1	08/04/06	MRE	08/02/06	OP17431	GLL439

4.1  
4

The QC reported here applies to the following samples: Method: SW846 8015 M

F42594-1, F42594-2, F42594-3, F42594-4, F42594-5, F42594-6, F42594-7, F42594-8, F42594-9

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries	Limits
84-15-1	o-Terphenyl	102% 57-115%

# Blank Spike Summary

Job Number: F42594  
Account: ITVAVAB Shaw E & I, Inc.  
Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17431-BS	LL11779.D	1	08/03/06	MRE	08/02/06	OP17431	GLL438

4.2  
4

The QC reported here applies to the following samples:

Method: SW846 8015 M

F42594-1, F42594-2, F42594-3, F42594-4, F42594-5, F42594-6, F42594-7, F42594-8, F42594-9

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH (C10-C28)	33.3	32.8	98	62-114

CAS No.	Surrogate Recoveries	BSP	Limits
84-15-1	o-Terphenyl	105%	57-115%

# Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F42594  
 Account: ITVAVAB Shaw E & I, Inc.  
 Project: Paradise Creek

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP17431-MS	LL11782.D	1	08/03/06	MRE	08/02/06	OP17431	GLL438
OP17431-MSD	LL11783.D	1	08/03/06	MRE	08/02/06	OP17431	GLL438
F42579-1	LL11781.D	1	08/03/06	MRE	08/02/06	OP17431	GLL438

4.3  
4

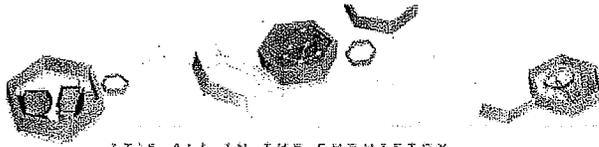
The QC reported here applies to the following samples:

Method: SW846 8015 M

F42594-1, F42594-2, F42594-3, F42594-4, F42594-5, F42594-6, F42594-7, F42594-8, F42594-9

CAS No.	Compound	F42579-1 mg/kg	Spike Q mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH (C10-C28)	ND	37.8	31.1	82	34.1	86	9	31-136/36

CAS No.	Surrogate Recoveries	MS	MSD	F42579-1	Limits
84-15-1	o-Terphenyl	93%	95%	92%	57-115%



IT'S ALL IN THE CHEMISTRY

## Metals Analysis

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Matrix Spike and Duplicate Summaries
- Blank Spike and Lab Control Sample Summaries
- Serial Dilution Summaries

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: F42594  
Account: ITVAVAB - Shaw E & I, Inc.  
Project: Paradise Creek

QC Batch ID: MP10055  
Matrix Type: LEACHATE

Methods: SW846 6010B  
Units: mg/l

Prep Date: 08/07/06 08/07/06

Metal	RL	IDL	MB raw	final	MB raw	final
Aluminum	0.20	.018				
Antimony	0.0060	.0034				
Arsenic	0.010	.0028				
Barium	1.0	.0004				
Beryllium	0.0050	.0004				
Cadmium	0.0050	.0002				
Calcium	5.0	.042				
Chromium	0.010	.0006				
Cobalt	0.050	.0006				
Copper	0.025	.0009				
Iron	0.30	.012				
Lead	0.050	.0017	-0.00017	<0.050	0.0052	<0.050
Magnesium	5.0	.0043				
Manganese	0.015	.0006				
Molybdenum	0.050	.0013				
Nickel	0.040	.0008				
Potassium	10	.01				
Selenium	0.050	.002				
Silver	0.010	.0009				
Sodium	10	.5				
Thallium	0.010	.0023				
Tin	0.050	.0031				
Vanadium	0.050	.0006				
Zinc	0.10	.0013				

Associated samples MP10055: F42594-1, F42594-2, F42594-3, F42594-4, F42594-5, F42594-6, F42594-7, F42594-8, F42594-9

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

5.1.1  
5

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42594  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10055  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 08/07/06 08/07/06

Metal	F42594-1 Original DUP	RPD	QC Limits	F42594-1 Original MS	Spikelot MPFLICPl % Rec	QC Limits
-------	--------------------------	-----	--------------	-------------------------	----------------------------	--------------

Aluminum						
Antimony						
Arsenic						
Barium						
Beryllium						
Cadmium						
Calcium						
Chromium						
Cobalt						
Copper						
Iron						
Lead	0.62	0.63	1.6	0-20	0.62 1.1	0.50 96.0 80-120
Magnesium						
Manganese						
Molybdenum						
Nickel						
Potassium						
Selenium						
Silver						
Sodium						
Thallium						
Tin						
Vanadium						
Zinc						

Associated samples MP10055: F42594-1, F42594-2, F42594-3, F42594-4, F42594-5, F42594-6, F42594-7, F42594-8, F42594-9

Results < IDL are shown as zero for calculation purposes

- (\*) Outside of QC limits
- (N) Matrix Spike Rec. outside of QC limits
- (anr) Analyte not requested

5.12  
5

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F42594  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10055  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: mg/l

Prep Date: 08/07/06

Metal	F42594-1 Original MSD	Spikelot MPFLICPl % Rec	MSD RPD	QC Limit
-------	--------------------------	----------------------------	------------	-------------

Aluminum						
Antimony						
Arsenic						
Barium						
Beryllium						
Cadmium						
Calcium						
Chromium						
Cobalt						
Copper						
Iron						
Lead	0.62	1.1	0.50	96.0	0.0	20
Magnesium						
Manganese						
Molybdenum						
Nickel						
Potassium						
Selenium						
Silver						
Sodium						
Thallium						
Tin						
Vanadium						
Zinc						

Associated samples MP10055: F42594-1, F42594-2, F42594-3, F42594-4, F42594-5, F42594-6, F42594-7, F42594-8, F42594-9

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested

5.12  
5

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F42594  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10055  
 Matrix Type: LEACHATE  
 Methods: SW846 6010B  
 Units: mg/l

Prep Date: 08/07/06 08/07/06

Metal	BSP Result	Spikelot MPFLICP1 % Rec	QC Limits	BSP Result	Spikelot MPFLICP1 % Rec	QC Limits
Aluminum						
Antimony						
Arsenic						
Barium						
Beryllium						
Cadmium						
Calcium						
Chromium						
Cobalt						
Copper						
Iron						
Lead	0.50	0.50	100.0	80-120	0.51	0.50 102.0 80-120
Magnesium						
Manganese						
Molybdenum						
Nickel						
Potassium						
Selenium						
Silver						
Sodium						
Thallium						
Tin						
Vanadium						
Zinc						

Associated samples MP10055: F42594-1, F42594-2, F42594-3, F42594-4, F42594-5, F42594-6, F42594-7, F42594-8, F42594-9

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

513  
5

SERIAL DILUTION RESULTS SUMMARY

Login Number: F42594  
 Account: ITVAVAB - Shaw E & I, Inc.  
 Project: Paradise Creek

QC Batch ID: MP10055  
 Matrix Type: LEACHATE

Methods: SW846 6010B  
 Units: ug/l

Prep Date: 08/07/06

Metal	F42594-1 Original SDL 1:5	RPD	QC Limits
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Aluminum				
Antimony				
Arsenic				
Barium				
Beryllium				
Cadmium				
Calcium				
Chromium				
Cobalt				
Copper				
Iron				
Lead	623	631	1.3	0-10
Magnesium				
Manganese				
Molybdenum				
Nickel				
Potassium				
Selenium				
Silver				
Sodium				
Thallium				
Tin				
Vanadium				
Zinc				

Associated samples MP10055: F42594-1, F42594-2, F42594-3, F42594-4, F42594-5, F42594-6, F42594-7, F42594-8, F42594-9

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

5.1.4  


LabLink Analytical Data Report  
Paradise Creek 116539

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261 6/96)\*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F42594-1	TPH (C10-C28)		SW846 8015 M	639		mg/kg	43		4	PC-TP-116539-GRID012A	31-Jul-06	8:15
F42594-1	o-Terphenyl	84-15-1	SW846 8015 M	91		%	86		4	PC-TP-116539-GRID012A	31-Jul-06	8:15
F42594-1	pH		SW846 9045	7.7		su			1	PC-TP-116539-GRID012A	31-Jul-06	8:15
F42594-1	Solids, Percent		EPA 160.3 M	75.9		%			1	PC-TP-116539-GRID012A	31-Jul-06	8:15
F42594-1	Lead	7439-92-1	SW846 6010B	0.62		mg/l	0.05	5	1	PC-TP-116539-GRID012A	31-Jul-06	8:15
F42594-2	TPH (C10-C28)		SW846 8015 M	620		mg/kg	49		4	PC-TP-116539-GRID012B	31-Jul-06	8:30
F42594-2	o-Terphenyl	84-15-1	SW846 8015 M	93		%	98		4	PC-TP-116539-GRID012B	31-Jul-06	8:30
F42594-2	pH		SW846 9045	7.5		su			1	PC-TP-116539-GRID012B	31-Jul-06	8:30
F42594-2	Solids, Percent		EPA 160.3 M	67.8		%			1	PC-TP-116539-GRID012B	31-Jul-06	8:30
F42594-2	Lead	7439-92-1	SW846 6010B	1.3		mg/l	0.05	5	1	PC-TP-116539-GRID012B	31-Jul-06	8:30
F42594-3	TPH (C10-C28)		SW846 8015 M	407		mg/kg	48		4	PC-TP-116539-GRID012C	31-Jul-06	8:45
F42594-3	o-Terphenyl	84-15-1	SW846 8015 M	93		%	97		4	PC-TP-116539-GRID012C	31-Jul-06	8:45
F42594-3	pH		SW846 9045	7.5		su			1	PC-TP-116539-GRID012C	31-Jul-06	8:45
F42594-3	Solids, Percent		EPA 160.3 M	68.6		%			1	PC-TP-116539-GRID012C	31-Jul-06	8:45
F42594-3	Lead	7439-92-1	SW846 6010B	1.3		mg/l	0.05	5	1	PC-TP-116539-GRID012C	31-Jul-06	8:45
F42594-4	TPH (C10-C28)		SW846 8015 M	997		mg/kg	120		10	PC-TP-116539-GRID013A	31-Jul-06	9:00
F42594-4	o-Terphenyl	84-15-1	SW846 8015 M	89		%	240		10	PC-TP-116539-GRID013A	31-Jul-06	9:00
F42594-4	pH		SW846 9045	8.4		su			1	PC-TP-116539-GRID013A	31-Jul-06	9:00
F42594-4	Solids, Percent		EPA 160.3 M	68.5		%			1	PC-TP-116539-GRID013A	31-Jul-06	9:00
F42594-4	Lead	7439-92-1	SW846 6010B	2.3		mg/l	0.05	5	1	PC-TP-116539-GRID013A	31-Jul-06	9:00
F42594-5	TPH (C10-C28)		SW846 8015 M	1150		mg/kg	110		10	PC-TP-116539-GRID013B	31-Jul-06	9:15
F42594-5	o-Terphenyl	84-15-1	SW846 8015 M	84		%	220		10	PC-TP-116539-GRID013B	31-Jul-06	9:15
F42594-5	pH		SW846 9045	8.4		su			1	PC-TP-116539-GRID013B	31-Jul-06	9:15
F42594-5	Solids, Percent		EPA 160.3 M	75		%			1	PC-TP-116539-GRID013B	31-Jul-06	9:15
F42594-5	Lead	7439-92-1	SW846 6010B	1.6		mg/l	0.05	5	1	PC-TP-116539-GRID013B	31-Jul-06	9:15
F42594-6	TPH (C10-C28)		SW846 8015 M	256		mg/kg	42		4	PC-TP-116539-GRID013C	31-Jul-06	9:30
F42594-6	o-Terphenyl	84-15-1	SW846 8015 M	91		%	85		4	PC-TP-116539-GRID013C	31-Jul-06	9:30
F42594-6	pH		SW846 9045	8.2		su			1	PC-TP-116539-GRID013C	31-Jul-06	9:30
F42594-6	Solids, Percent		EPA 160.3 M	77.7		%			1	PC-TP-116539-GRID013C	31-Jul-06	9:30
F42594-6	Lead	7439-92-1	SW846 6010B	0.63		mg/l	0.05	5	1	PC-TP-116539-GRID013C	31-Jul-06	9:30
F42594-7	TPH (C10-C28)		SW846 8015 M	1310		mg/kg	210		20	PC-TP-116539-GRID013D	31-Jul-06	9:37
F42594-7	o-Terphenyl (b)	84-15-1	SW846 8015 M	ND	*	%	430		20	PC-TP-116539-GRID013D	31-Jul-06	9:37
F42594-7	pH		SW846 9045	8.6		su			1	PC-TP-116539-GRID013D	31-Jul-06	9:37
F42594-7	Solids, Percent		EPA 160.3 M	77.4		%			1	PC-TP-116539-GRID013D	31-Jul-06	9:37
F42594-7	Lead	7439-92-1	SW846 6010B	4.3		mg/l	0.25	5	5	PC-TP-116539-GRID013D	31-Jul-06	9:37
F42594-8	TPH (C10-C28)		SW846 8015 M	271		mg/kg	44		4	PC-TP-116539-GRID014A	31-Jul-06	9:45
F42594-8	o-Terphenyl	84-15-1	SW846 8015 M	85		%	88		4	PC-TP-116539-GRID014A	31-Jul-06	9:45
F42594-8	pH		SW846 9045	8		su			1	PC-TP-116539-GRID014A	31-Jul-06	9:45
F42594-8	Solids, Percent		EPA 160.3 M	75.2		%			1	PC-TP-116539-GRID014A	31-Jul-06	9:45
F42594-8	Lead	7439-92-1	SW846 6010B	0.67		mg/l	0.05	5	1	PC-TP-116539-GRID014A	31-Jul-06	9:45
F42594-9	TPH (C10-C28)		SW846 8015 M	457		mg/kg	44		4	PC-TP-116539-GRID014B	31-Jul-06	10:00
F42594-9	o-Terphenyl	84-15-1	SW846 8015 M	78		%	88		4	PC-TP-116539-GRID014B	31-Jul-06	10:00
F42594-9	pH		SW846 9045	8		su			1	PC-TP-116539-GRID014B	31-Jul-06	10:00
F42594-9	Solids, Percent		EPA 160.3 M	75.2		%			1	PC-TP-116539-GRID014B	31-Jul-06	10:00
F42594-9	Lead	7439-92-1	SW846 6010B	0.66		mg/l	0.05	5	1	PC-TP-116539-GRID014B	31-Jul-06	10:00

(b) Outside control limits due to dilution.

Found 0 results exceeding regulatory limits.

\*\* Indicates result outside regulatory limits.

\* Regulatory limits listed in this document have been obtained from the latest version of the regulations cited and are used for advisory purposes only. Accutest assumes no responsibility for errors in regulatory documents or changes to criteria detailed in later versions of the referenced regulation. It is the responsibility of the user to verify these limits before using or reporting any data.

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

00001

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
610 Gilbert St., Norfolk, VA 23511-2737

Site

NWST Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757 449-2751

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

757 487-4867

9. Designated Facility Name and Site Address

WM-Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 766-3033

11. Waste Shipping Name and Description

a. DEBRIS

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

20

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction:

Actual Val.

Emergency Contact: Capital Environmental Services, Inc 302 652-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year

10 7 27 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

6 27

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

.

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

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**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest  
Document No.

00002

2. Page 1  
of

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMNA)  
1510 Gilbert St., Norfolk, VA 23511-2797

Site

MNSV Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757 448-2781

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

757 487-4687

9. Designated Facility Name and Site Address

WM-Bethel Sanitary Landfill  
100 North Park Ln  
Hampton, VA 23668

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 766-3039

11. Waste Shipping Name and Description

a. DEBRIS

12. Containers

No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

001

DT

20

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

CH 18

Transaction# 1262611

Actual Wt: 16-22

Emergency Contact: Capital Environmental Services Inc. 802 852-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year  
07 27 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
7 29 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.  
00-003

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Navy Paradise Creek

4. Generator's Phone (757) 445-8702

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED.

A. Transporter's Phone  
757 448-7761

7. Transporter 2 Company Name  
South Norfolk Trucking

8. US EPA ID Number  
NOT REQUIRED.

B. Transporter's Phone  
757 487-4867

9. Designated Facility Name and Site Address  
MM-Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED.

C. Facility's Phone  
757 766-3037

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. DEBRIS

001

70

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

CA 15

Transaction# 1762628

Actual Wt. 17.92

Emergency Contact: Capco Environmental Services, Inc. 502 852-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year

10 7 2006

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

7 2006

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

7 2006

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

7 2006

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

00004

2. Page 1

1 of

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (NRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:

NINCY Parkside Creek

4. Generator's Phone (757) 446-8708

5. Transporter 1 Company Name

O&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757 449-2781

7. Transporter 2 Company Name

Sum Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

757 457-4987

9. Designated Facility Name and Site Address

VM-Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 784-3058

11. Waste Shipping Name and Description

a.

DEBRIS

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

DT

001

2.0

T

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

HA (16)

Transaction# 1262630

Actual Wt 15.47

Emergency Contact: Capital Environmental Services, Inc 802 852-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year

07 27 00

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

00005

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (ONRMA)  
1510 Gilbert St., Norfolk, VA 23511-2787

Site:  
NNSV Paradise Creek

4. Generator's Phone (757) 446-8703

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone  
757 446-2781

7. Transporter 2 Company Name  
South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone  
757 487-4887

9. Designated Facility Name and Site Address  
Wm-Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23566

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone  
757 766-3533

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. DEBRIS 01570

001

20

No.	Type	Total Quantity	Unit Wt/Vol
001	DT	20	T
.	.	.	.
.	.	.	.
.	.	.	.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

4

Transaction# 1762629

Actual Yr 14.03

Emergency Contact: Capito Environmental Services Inc 302 552-8899

16. 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.

Printed/Typed Name

Signature

Month Day Year

07 27 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No.

00006

2. Page 1 of

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1910 Gilbert St., Norfolk, VA 23511-2737

Site:

NNSV Paradise Creek

4. Generator's Phone (757) 448-8763

5. Transporter 1 Company Name

C&P Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757 449-2751

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

757 467-4267

9. Designated Facility Name and Site Address

WM-Siethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 765-8936

11. Waste Shipping Name and Description

a. DEBRIS

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001 OT 2.0 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

01

Transaction# 1262631

Actual wt 1766

Emergency Contact: Capital Environmental Services, Inc. 802 862-8998

16. 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.

Printed/Typed Name

Signature

Month Day Year  
07 07 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Andre W. LACKY

Signature

[Signature]

Month Day Year  
07 27 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No. 00007

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander Navy Region Mid-Atlantic (COMNAVMAC)  
1510 Gilbert St., Norfolk, VA 23511-2787

Site

UNST/Paradise Creek

4. Generator's Phone ( 757 ) 448-8700

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757 449-2751

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

757 497-4997

9. Designated Facility Name and Site Address

WM-Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 786-3033

11. Waste Shipping Name and Description

a. DEBRIS

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001 20

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

RDR

Transaction#

1262624

Actual Wt:

28.55

Emergency Contact Capital Environmental Services, Inc. 802 552-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year

07 27 07

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

07 27 07

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

07 27 07

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

07 27 07

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No. **02008**

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (COMNAVMAC)  
1510 Gilbert St., Norfolk, VA 23514-2737

Site:

WNSY Paradise Creek

4. Generator's Phone (757) 445-6703

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757 449-2751

7. Transporter 2 Company Name

South Atlantic Waste

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

757 487-4447

9. Designated Facility Name and Site Address

VMJ Bethel Security Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 785-3033

11. Waste Shipping Name and Description

a. **DEBRIS**

12. Containers  
No. Type

001 DT

13. Total Quantity

20

14. Unit Wt/Vol

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**13**

Transaction#

Actual Wt.

1262632  
184.29

Emergency Contact: Capitol Environmental Services, Inc. 802 662-8899

16. 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.

Printed/Typed Name

Signature

Month Day Year

07 27 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

07 12 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No.

00009

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
NNEP Paradise Creek

4. Generator's Phone (757) 445-9702

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone  
757 442-2751

7. Transporter 2 Company Name  
South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone  
757 487-4957

9. Designated Facility Name and Site Address  
WM-Bethel Sanitary Landfill  
160 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone  
757 786-9036

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. DEBRIS METAL

..	DT	.....	T
----	----	-------	---

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction:

1262635  
20.16

Actual Wt

Emergency Contact: Capital Environmental Services, Inc. 302 852-8895

16. 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.

Printed/Typed Name

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

00000

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander Navy Region Mid-Atlantic (COMNAVMAC)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

INSEY Paradise Creek

4. Generator's Phone (757) 446-8703

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757 446-2761

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

757 487-4867

9. Designated Facility Name and Site Address

WM-Bethel Sanitary Landfill  
100 North Park Ln  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 766-3033

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. ~~NOT DOT, NON HAZARDOUS DEBRIS~~  
DEBRIS

001

20

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction# 1262683

Actual Wt 16.89

Emergency Contact: Capital Environmental Services, Inc. 302 652-8899

16. 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.

Printed/Typed Name

Signature

Month Day Year  
10 27 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No.

00011

2. Page 1

of

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMAL)

1510 Gilbert St., Norfolk, VA 23511-2787

Site

MSO / Paradise Creek

4. Generator's Phone (757) 445-8705

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757 442-2751

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

757 457-4997

9. Designated Facility Name and Site Address

AM-Bethel Sanitary Landfill

100 North Park Ln

Hampton, VA 23665

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 766-3033

11. Waste Shipping Name and Description

a. DEBRIS

12. Containers

No. Type

001

DT

13. Total Quantity

20

14. Unit Wt/Vol

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

18

Transaction# 1267687

Actual Vol. 23,43

Emergency Contact: Capital Environmental Services, Inc. 302 862-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year  
07 07 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No.

00012

2. Page 1  
1 of

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (ONRMA)

1510 Gilbert St. Norfolk, VA 23511-2737

Site:

NAE1 Paradise Creek

4. Generator's Phone ( 757 ) 445-8733

5. Transporter 1 Company Name

CSH Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757 449-2751

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

757 497-4897

9. Designated Facility Name and Site Address

WM-Bethel Sanitary Landfill

100 North Park La

Hampton, VA 23656

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 766-9633

11. Waste Shipping Name and Description

a.

I 3415

1 40

12. Containers

No. Type

DT

13. Total Quantity

001 70

14. Unit Wt/Vol

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

RDR #1

Transaction# 1262712

Actual Wt 26.98

Emergency Contact: Capital Environmental Services, Inc. 802 852-9999

16. 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.

Printed/Typed Name

Signature

Month Day Year

07 27 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No.

00013

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

NNSY Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757 448-2761

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

757 487-4867

9. Designated Facility Name and Site Address

WM-Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 766-3033

11. Waste Shipping Name and Description

a. DEBRIS 01570

12. Containers

No. Type

001 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

4

Transaction#: 726 2714

Actual Wt 18.1

Emergency Contact: Capital Environmental Services, Inc. 302 552-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year  
07 12 70

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

B M HART

Signature

*[Signature]*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

DANIELLE MARCUS

Signature

*[Signature]*

Month Day Year  
07 12 96

19. Discrepancy Indication Space

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

Printed/Typed Name

Maure Adams

Signature

*[Signature]*

Month Day Year  
11 12 70

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.  
000174

2. Page 1  
1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
NNSY Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED.

A. Transporter's Phone  
757 449-2761

7. Transporter 2 Company Name  
South Norfolk Trucking

8. US EPA ID Number  
NOT REQUIRED.

B. Transporter's Phone  
757 487-4867

9. Designated Facility Name and Site Address  
WM-Bethel Sanitary Landfills  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
NOT REQUIRED.

C. Facility's Phone  
757 766-3033

11. Waste Shipping Name and Description

12. Containers	13. Total	14. Unit
No.	Quantity	Wt/Vol

a. DRUMS 01570

001	20	T
..	..	..
..	..	..
..	..	..
..	..	..

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

01

Transaction#: 1262718

Actual Wt 19.24

Emergency Contact: Capital Environmental Services, Inc. 802 652-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year

07 27 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

07 27 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

17 17 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest  
Document No.  
**00015**

2. Page 1  
of

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2781**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4887**

9. Designated Facility Name and Site Address  
**WM-Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23666**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 766-3033**

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total  
Quantity  
14. Unit  
Wt/Vol

**a. DEBRIS**

**80/1** **DT** **20** **T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**3**  
Transaction#: **126 273 6**  
Actual Wt: **16.16**  
Emergency Contact: **Capitol Environmental Services, Inc. 302 852-8099**

16. 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.

Printed/Typed Name  
**R M HART**

Signature  
*R M Hart*

Month Day Year  
**07 27 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
**C SLADE**

Signature  
*C. Slade*

Month Day Year  
**07 27 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
**L. Adams**

Signature  
*L. Adams*

Month Day Year  
**1 12 06**

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest  
Document No.  
**00076**

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
NINSY Paradise Creek

4. Generator's Phone (757 ) 445-6703

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757 449-2781

7. Transporter 2 Company Name  
South Norfolk Trucking

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
757 487-4987

9. Designated Facility Name and Site Address  
WM-Ebethei Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 766-3033

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

**DEBRIS**

**001 20 T**

b. **0570**

c. . . . .

d. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**15**

Transaction# **1262728**

Actual Wt **1840**

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year

**8 27 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**RM HART**

Signature

*[Signature]*

Month Day Year

. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

**Rodrich Trotman**

Signature

*[Signature]*

Month Day Year

**7 27 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

**Karla Adams**

Signature

*[Signature]*

Month Day Year

**7 27 06**

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.  
00077

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
MNSY Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED.

A. Transporter's Phone  
757 449-2761

7. Transporter 2 Company Name  
South Norfolk Trucking

8. US EPA ID Number  
NOT REQUIRED.

B. Transporter's Phone  
757 497-4987

9. Designated Facility Name and Site Address  
WM-Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED.

C. Facility's Phone  
757 766-9033

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
001	DT	20	T
.	.	.	.
.	.	.	.
.	.	.	.

a. DEBRIS

001

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction# 126 279(3)  
Actual Wt 13.58

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year  
07 27 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
RM HART

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name  
Wanda Mate

Signature

Month Day Year  
7 27 06

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.  
00018

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
NNSY Paradise Creek

4. Generator's Phone ( 757 - ) 445-8703

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757 449-2761

7. Transporter 2 Company Name  
South Norfolk Trucking

8. US EPA ID Number  
NOT REQUIRED

B. Transporter's Phone  
757 487-4867

9. Designated Facility Name and Site Address  
WM-Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 766-3033

11. Waste Shipping Name and Description

12. Containers	13. Total Quantity	14. Unit Wt/Vol
a.		
b.		
c.		
d.		

DEBRIS C1570

001 20

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: 1262725  
Actual Wt: 21.10

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
R M Hart

Signature  
[Signature]

Month Day Year  
07 27 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
Melvin L. Glover Sr.

Signature  
[Signature]

Month Day Year  
07 27 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
Laura Adams

Signature  
[Signature]

Month Day Year  
07 27 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No.

10019

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone ( 757 ) 445-6703

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757 440-2701

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

757 497-4967

9. Designated Facility Name and Site Address

VM-Bethel Sanitary Landfill

100 North Park Ln.

Hampton, VA 23066

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 786-3033

11. Waste Shipping Name and Description

a.

01570?

12. Containers

No. Type

DT

13. Total Quantity

14. Unit Wt/Vol

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction# 1262722

Actual Wt 17,800

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

KM HART

Signature

[Signature]

Month Day Year

12 27 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

7 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Lawrence Adams

Signature

[Signature]

Month Day Year

11 17 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No. 00020

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

NNSY Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757 448-2781

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

757 487-4887

9. Designated Facility Name and Site Address

WM-Bethel Sanitary Landfill

100 North Park Ln.

Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 766-3033

11. Waste Shipping Name and Description

a. EBRLS C 1570

12. Containers  
No. Type

001 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

11

Transaction#: 1262254

Actual Wt: 19.98

Emergency Contact: Capital Environmental Services, Inc. 302 852-8898

16. 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.

Printed/Typed Name

R M Hart

Signature

[Signature]

Month Day Year

07 07 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

M. Six

Signature

[Signature]

Month Day Year

07 27 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

K Adams

Signature

[Signature]

Month Day Year

17 07 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED.**

Manifest  
Number  
**00021**

2. Page 1  
of

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
NNSY Paradise Creek

4. Generator's Phone ( 757 ) 445-6703

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number

**NOT REQUIRED.**

A. Transporter's Phone  
757 449-2781

7. Transporter 2 Company Name  
South Norfolk Trucking

8. US EPA ID Number

**NOT REQUIRED.**

B. Transporter's Phone  
757 487-4867

9. Designated Facility Name and Site Address  
WM-Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number

**NOT REQUIRED.**

C. Facility's Phone  
757 788-3033

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **DEBRIS**

**06.1** DT  
**20** T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: **1262269**  
Actual Wt: **22.78**

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name **B M HART**

Signature **B M HART**

Month Day Year  
**10 27 02**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **W FALLS**

Signature **W FALLS**

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name **Edna Adams**

Signature **Edna Adams**

Month Day Year

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED** Manifest Document No. **00022**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
 Commander, Navy Region Mid-Atlantic (CNRMA)  
 1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
 NNSY Paradise Creek

4. Generator's Phone (757) 445-8703

5. Transporter 1 Company Name  
 C&H Trucking

6. US EPA ID Number  
 NOT REQUIRED

A. Transporter's Phone  
 757 442-2761

7. Transporter 2 Company Name  
 South Norfolk Trucking

8. US EPA ID Number  
 NOT REQUIRED

B. Transporter's Phone  
 757 427-4987

9. Designated Facility Name and Site Address  
 VM-Bethel Sanitary Landfill  
 100 North Park La.  
 Hampton, VA 23668

10. US EPA ID Number  
 NOT REQUIRED

C. Facility's Phone  
 757 766-3033

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
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a. **DEBRIS**

001	DT	20	T
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b.

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c.

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d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional information  
 RDR #2  
 Transaction# 1262789  
 Actual Wt 26.30  
 Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name **BM HUNT**

Signature *[Signature]* Month **07** Day **12** Year **06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name **RANDALL ROGERSON**

Signature *[Signature]* Month **7** Day **29** Year **06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
 Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature *[Signature]* Month **11** Day **27** Year **06**

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.  
10023

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (ONRMA)  
1610 Gilbert St., Norfolk, VA 23611-1737

Site:  
W. BY Paradise Creek

4. Generator's Phone (757) 445-8703

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED.

A. Transporter's Phone  
757 448-2751

7. Transporter 2 Company Name  
South Norfolk Trucking

8. US EPA ID Number  
NOT REQUIRED.

B. Transporter's Phone  
757 437-3887

9. Designated Facility Name and Site Address  
VAJ-Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23665

10. US EPA ID Number  
NOT REQUIRED.

C. Facility's Phone  
757 765-2050

11. Waste Shipping Name and Description

a.  
DIBALS

12. Containers	13. Total Quantity	14. Unit Wt/Vol
No.	Type	
001	DT	70

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction# 1262792

Actual Wt

Emergency Contact: Capitol Environmental Services, Inc. 802 852-8099

16. 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.

Printed/Typed Name

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.  
00024

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

NNSY Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757 444-2781

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

767 487-4887

9. Designated Facility Name and Site Address

WM-Bethel Sanitary Landfill

100 North Park La.

Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 766-3033

11. Waste Shipping Name and Description

a. DEBRIS

b.

c.

d.

12. Containers  
No. Type

001 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16

Transaction#: 1262797

Actual Wt: 20.7

Emergency Contact: Capital Environmental Services, Inc. 302 852-8099

16. 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.

Printed/Typed Name

R. M. HANT

Signature

[Signature]

Month Day Year

07 27 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

07 27 06

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No.

00025

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

NNSY Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757 448-2751

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

757 487-4887

9. Designated Facility Name and Site Address

WM-Bethel Sanitary Landfill

100 North Park La.

Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 768-3033

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. DEBRIS 01570

001	DT	20	T
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b.   
 c. ✓   
 d. 19.24

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

14

Transaction#:

17.80 1268816

Actual Wt:

22.68

Emergency Contact: Capital Environmental Services, Inc. 302-662-8999

16. 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.

Printed/Typed Name

R M HART

Signature

*R M Hart*

Month Day Year

10 7 27 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Adwin P. Glover Sr.

Signature

*Adwin P. Glover Sr.*

Month Day Year

7 5 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

14

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

Printed/Typed Name

Laura Adams

Signature

*Laura Adams*

Month Day Year

1 7 07 10

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No. 00026

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

NNSY Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757 449-2761

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

757 487 4887

9. Designated Facility Name and Site Address

WM-Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 768-3033

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a.

DEBRIS

001

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

15

Transaction#: 1266208

Actual Wt: 19.94

Emergency Contact: Capitol Environmental Services, Inc. 302 862-8999

16. 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.

Printed/Typed Name

R M Hart

Signature

[Signature]

Month Day Year

07/27/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Fredrick Troutman

Signature

[Signature]

Month Day Year

7/27/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

.

19. Discrepancy Indication Space

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

Printed/Typed Name

Nalira Adams

Signature

[Signature]

Month Day Year

7/27/06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY



**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest  
Number: **00028**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-8703

Site:

NNSY Paradise Creek

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757 449-2781

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

757 487-4887

9. Designated Facility Name and Site Address

WM-Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 768-3033

11. Waste Shipping Name and Description

a. **DEBRIS**

12. Containers

No.

Type

13. Total  
Quantity

14. Unit  
Wt/Vol

001

DT

20

T

b. **01570**

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**4**

Transaction#: **1262825**

Actual Wt: **17,82**

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

**R M HART**

Signature

*[Signature]*

Month Day Year  
**07 27 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

**DOMENICK MARCUSI**

Signature

*[Signature]*

Month Day Year  
**07 27 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year  
**11 27 06**

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.  
00029

2. Page 1  
1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
NNSV Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED.

A. Transporter's Phone  
757 448-2761

7. Transporter 2 Company Name  
South Norfolk Trucking

8. US EPA ID Number  
NOT REQUIRED.

B. Transporter's Phone  
757 487-4867

9. Designated Facility Name and Site Address  
WM-Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED.

C. Facility's Phone  
757 788-3033

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. **DIBALS**

001 DT 20 T

11. Waste Shipping Name and Description	12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol
a. <b>DIBALS</b>	001 DT	20	T
b.			
c.			
d.			

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: 1262832  
Actual Wt: 26.16  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name **R M HART**

Signature *[Signature]*

Month Day Year  
07 27 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **M. Swin**

Signature *[Signature]*

Month Day Year  
07 27 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
07 27 06

00030

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No. 00001

2. Page 1

of

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

NNSY Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757 448-2761

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

757 487-4887

9. Designated Facility Name and Site Address

WM-Ethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 786-3033

11. Waste Shipping Name and Description

a. ~~NON-DEB~~ ~~NON-RES~~ ~~WASTE~~ ~~DEBALS~~  
DEBALS

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

55470

Transaction#: 1262875

Actual Wt: 16.23

Emergency Contact: Capital Environmental Services, Inc. 302 652-8988

16. 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.

Printed/Typed Name

Signature

Month Day Year  
07 27 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

R M HART

Signature

[Signature]

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Wanda Mates

Signature

Wanda Mates

Month Day Year  
10 27 06

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED. *0005*

Manifest Document No.

2. Page 1  
1 of

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

NNSY Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757 440-2761

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

757 487-4867

9. Designated Facility Name and Site Address

WM-Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 766-3033

11. Waste Shipping Name and Description

a. *DEBRIS 01570*

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

DT

*001*

*20*

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

*18*

Transaction# *1202849*

Actual Wt. *20.75*

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

*R M HART*

Signature

*[Signature]*

Month Day Year

*10 7 2006*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*B W FALLS*

Signature

*[Signature]*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

*Kurt Adams*

Signature

*[Signature]*

Month Day Year

*11 27 06*

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

00032

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest ID Number ~~457120~~

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
**NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703**

5. Transporter 1 Company Name  
**CBH Trucking**

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
**757 440-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED.**

B. Transporter's Phone  
**757 487-4887**

9. Designated Facility Name and Site Address  
**VM-Bethel Sanitary Landfill**  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
**757 766-3033**

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. **DEBRIS 01570**

**001** DT **20** T

b. . . . .

c. . . . .

d. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**16** Transaction#: Actual Wt:  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8090

16. 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.

Printed/Typed Name **BM Hart**

Signature *[Signature]*

Month Day Year **07 26 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Clyde Bate**

Signature *[Signature]*

Month Day Year **7 27 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name **Kalira Adams**

Signature *[Signature]*

Month Day Year **7 27 06**

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest No. **00033**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
NNSY Paradise Creek

4. Generator's Phone (757) 445-8703

5. Transporter 1 Company Name  
C&H Trucking

A. Transporter's Phone  
757 440-7761

6. US EPA ID Number  
NOT REQUIRED.

7. Transporter 2 Company Name  
South Norfolk Trucking

B. Transporter's Phone  
757 487-4867

8. US EPA ID Number  
NOT REQUIRED.

9. Designated Facility Name and Site Address  
WM Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

C. Facility's Phone  
757 766-3033

10. US EPA ID Number  
NOT REQUIRED.

11. Waste Shipping Name and Description  
a. DEBRIS 01570

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
001	DT	20	T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
01  
Transaction# 1262880  
Actual Wt: 19.18  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8099

16. 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.

Printed/Typed Name *R M HANT*

Signature *[Signature]* Month Day Year *07 27 06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name *Calvin Adams*

Signature *[Signature]* Month Day Year *10 27 06*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.  
0001-34

2. Page 1  
1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (COMNA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site  
Moby Paradise Creek

4. Generator's Phone (757) 445-8733

5. Transporter 1 Company Name  
CBH Trucking

6. US EPA ID Number  
NOT REQUIRED.

A. Transporter's Phone  
757-446-2781

7. Transporter 2 Company Name  
South Norfolk Trucking

8. US EPA ID Number  
NOT REQUIRED.

B. Transporter's Phone  
757-487-4497

9. Designated Facility Name and Site Address  
WM-Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED.

C. Facility's Phone  
757-766-3033

11. Waste Shipping Name and Description

a.  
DEBRIS

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
001	OT	24	T
.	.	.	.
.	.	.	.
.	.	.	.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

Transaction# 1262888  
Actual Wt 25.1 TONS

Emergency Contact: Capital Environmental Services, Inc. 802-552-8692

16. 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.

Printed/Typed Name

Signature

Month Day Year  
07/27/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

Printed by J. J. KELLER & ASSOCIATES, INC.  
Neenah, WI 54957-0368

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No. 0035

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

MNSY Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757 440-2781

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

757 487-4887

9. Designated Facility Name and Site Address

VM-Bethel Sanitary Landfill

100 North Park Ln.  
Hampton, VA 23665

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 786-3033

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. DEBRIS C1570

001 DT 70 T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

15

Transaction# 1262892

Actual Wt: 21.17

Emergency Contact: Capital Environmental Services, Inc. 902 852-8080

16. 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.

Printed/Typed Name

B.M. Hunt

Signature

[Signature]

Month Day Year

09 27 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

09 27 06

19. Discrepancy Indication Space

TRANSPORTER

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

09 27 06

FACILITY

Please use this form for use on elite (12-pitch) typewriter.

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No.

00036

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

NNSY Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757 442-2731

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

757 487-4267

9. Designated Facility Name and Site Address

VAM-Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 766-3035

11. Waste Shipping Name and Description

a.

DEBRIS

12. Containers  
No. Type

001 DT

13. Total Quantity

2.0

14. Unit Wt/Vol

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#

1262902

Actual Wt

22.79

Emergency Contact: Capital Environmental Services, Inc. 302 662-8990

16. 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.

Printed/Typed Name

W. J. Kelly

Signature

[Signature]

Month Day Year

07 27 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Robert J. Kelly

Signature

[Signature]

Month Day Year

9 27 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

.

19. Discrepancy Indication Space

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

Printed/Typed Name

Robert J. Kelly

Signature

[Signature]

Month Day Year

9 27 06

GENERATOR

TRANSPORTER

FACILITY

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

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest  
Document No.

00037

2. Page 1  
of

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:

NNSY Paradise Creek

4. Generator's Phone ( 757 ) 445-8702

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757 449-2781

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

757 487-4887

9. Designated Facility Name and Site Address

WM-Bethel Sanitary Landfill

100 North Park Ln.

Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 766-3033

11. Waste Shipping Name and Description

a. DSBALW

12. Containers

No.

Type

13. Total  
Quantity

14. Unit  
Wt/Vol

DT

100

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#

1262905

Actual Wt

16.98

Emergency Contact: Capital Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name

B.M. Haney

Signature

[Signature]

Month Day Year

07 27 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

DOMENICK MANESI

Signature

[Signature]

Month Day Year

07 27 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

. . .

19. Discrepancy Indication Space

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

Printed/Typed Name

JACK F. HANCOCK

Signature

[Signature]

Month Day Year

07 27 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED.**

Manifest Document No.  
**00038**

2. Page 1  
of

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
MNSY Paradise Creek

4. Generator's Phone ( 757 ) 448-8703

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757 448-2761

7. Transporter 2 Company Name  
South Norfolk Trucking

8. US EPA ID Number  
**NOT REQUIRED.**

B. Transporter's Phone  
757 487-4887

9. Designated Facility Name and Site Address  
WM-Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757 788-3033

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		
a.			
b.			
c.			
d.			

a. **DEBRIS**

001	DT	20	T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**3**

Transaction# **1262910**  
Actual Wt. **20.38**

Emergency Contact: Capital Environmental Services, Inc. 302 652-8900

16. 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.

Printed/Typed Name **R M Hart**

Signature **[Signature]**

Month . Day . Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **[Signature]**

Signature **[Signature]**

Month . Day . Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **[Signature]**

Signature **[Signature]**

Month . Day . Year

19. Discrepancy Indication Space

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

Printed/Typed Name **T W E D A K W E L L**

Signature **[Signature]**

Month **07** Day **27** Year **06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.** Manifest Document No. **00039**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
 Commander, Navy Region Mid-Atlantic (CNRMA)  
 1510 Gilbert St., Norfolk, VA 23511-2737  
 4. Generator's Phone ( 757 ) 445-8703

Site:  
 NNSY Paradise Creek

5. Transporter 1 Company Name  
 C&H Trucking

6. US EPA ID Number  
 NOT REQUIRED

A. Transporter's Phone  
 757 449-2764

7. Transporter 2 Company Name  
 South Norfolk Trucking

8. US EPA ID Number  
 NOT REQUIRED

B. Transporter's Phone  
 757 487-4887

9. Designated Facility Name and Site Address  
 WM-Bethel Sanitary Landfill  
 100 North Park La.  
 Hampton, VA 23666

10. US EPA ID Number  
 NOT REQUIRED

C. Facility's Phone  
 757 785-3033

11. Waste Shipping Name and Description

12. Containers	13. Total Quantity	W		
No.	Type			
a.	001	DT	20	
b.				
c.				
d.				

a. **DEBRIS**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: **1262913**  
 Actual Wt **19.58**  
 Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. **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

Printed/Typed Name **R M HART**

Signature *[Signature]*

Month Day  
 07 27 00

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **M. Smith**

Signature *[Signature]*

Month Day  
 . . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature *[Signature]*

Month Day  
 . . .

19. Discrepancy Indication Space

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

Printed/Typed Name **Tina Blackwell**

Signature *[Signature]*

Month Day  
 . . .

TRANSPORTER

FACILITY

TRANSPORTER #2

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

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED.**

Manifest Document No.  
**00010**

2. Page 1  
1 of

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
NAVY Paradise Creek

4. Generator's Phone ( 757 ) 446-8703

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757 448-2781

7. Transporter 2 Company Name  
South Norfolk Trucking

8. US EPA ID Number  
**NOT REQUIRED.**

B. Transporter's Phone  
757 487-4887

9. Designated Facility Name and Site Address  
WM-Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757 766-3033

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. DEBRIS O/S 70

001	DT	20	T
-----	----	----	---

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

18  
Transaction# 126 2920  
Actual Wt 21.78

Emergency Contact: Capital Environmental Services, Inc. 802 852-8999

16. 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.

Printed/Typed Name  
RAN HALL

Signature  
*[Signature]*

Month Day Year  
10 7 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
RAN HALL

Signature  
*[Signature]*

Month Day Year  
.

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. B. HALL

Signature  
*[Signature]*

Month Day Year  
10 7 06

FACILITY

GENERATOR

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

00041

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 885-5070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

DT

13. Total Quantity

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#

1262955

15

Net Weight

19.46

Emergency Contact: Capital Environmental Services, Inc. 302 552-8899

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

*[Signature]*

Month Day Year

07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Roderick Trotman

Signature

*[Signature]*

Month Day Year

7 28 06

19. Discrepancy Indication Space

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

Printed/Typed Name

Jack Blackwell

Signature

*[Signature]*

Month Day Year

11 18 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest  
Document No.

00042

2. Page 1  
of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Bob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 865-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001 DT

13. Total  
Quantity

20

14. Unit  
Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1262957

16

Net Weight 20.29

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

[Signature]

Month Day Year  
07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Cheryl Bates

Signature

[Signature]

Month Day Year  
7 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Jill Blackwell

Signature

[Signature]

Month Day Year  
07 28 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No. 00043

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23068

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#

1262965

188

Net Weight

21.2

Emergency Contact: Capital Environmental Services, Inc. 302 552-8999

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

[Signature]

Month Day Year  
07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

W FALLS

Signature

[Signature]

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year  
11 28 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest No. **00044**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-8703 Atty: Rob Schank

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking #14 KUE

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-5070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118538 14 Transaction# 1262971  
Net Weight 45980 22.99  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8098

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
Month Day Year  
07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
Quinton Cross

Signature  
Month Day Year  
07 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year  
7 28 06

GENERATOR TRANSPORTER FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No. **00045**

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-5703 Attn: Bob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-9781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23866

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-866-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001

DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#: 1262976

SS

Net Weight: 17.41

Emergency Contact: Capitol Environmental Services, Inc. 302-852-8999

16. 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.

Printed/Typed Name

DAVE TAYLOR

Signature

*[Signature]*

Month Day Year

07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

7 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. **00046**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
 Commander, Navy Region Mid-Atlantic (CNRMA)  
 1510 Gilbert St., Norfolk, VA 23511-2737

Site  
 Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
 C&H Trucking

A. Transporter's Phone  
 757-449-2761

6. US EPA ID Number  
 NOT REQUIRED

7. Transporter 2 Company Name

B. Transporter's Phone

8. US EPA ID Number

9. Designated Facility Name and Site Address  
 Bethel Sanitary Landfill  
 100 North Park La.  
 Hampton, VA 23666

C. Facility's Phone  
 757 866-6070

10. US EPA ID Number  
 NOT REQUIRED

11. Waste Shipping Name and Description

a.	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
Non RCRA, Non DOT Soil contaminated with Wood Debris	001	DT	7.0	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
 Project# 116539 Transaction# 1262979  
 11 Net Weight 20.43  
 Emergency Contact: Capital Environmental Services, Inc. 302 662-8999

16. 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.

Printed/Typed Name  
 DOUG TAYLOR

Signature  
 [Signature] Month Day Year  
 07 18 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name  
 MARIC

Signature  
 [Signature] Month Day Year  
 7 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
 Printed/Typed Name

Signature  
 [Signature] Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
 [Signature] Month Day Year  
 7 28 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document # 00047

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8733

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757-449-7781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

0.01 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118530

Transaction#

1262987

2

Net Weight

17.14

Emergency Contact: Capital Environmental Services, Inc. 802 852-8999

16. 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.

Printed/Typed Name

Dax Taylor

Signature

*Dax Taylor*

Month Day Year

10 7 2000

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

7 28 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.  
00048

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00.1 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1262985

RDR # 1

Net Weight 25.72

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year  
02 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year  
10 7 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document # 00079

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6700

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 885-0270

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 1262901

3

Net Weight: 17.75

Emergency Contact: Capital Environmental Services, Inc. 302 652-8988

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

*D. Taylor*

Month Day Year

07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Michael K. Glover SR

Signature

*Michael K. Glover SR*

Month Day Year

17 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication, Space

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

Printed/Typed Name

Signature

Month Day Year

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

08050

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site

Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001

DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#

1262984

Net Weight

18.74

Emergency Contact: Capital Environmental Services, Inc. 302 852-8989

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

[Signature]

Month Day Year

07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

[Signature]

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED.**

Manifest  
Document No. **00051**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED.**

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

**NOT REQUIRED.**

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED.**

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118530

Transaction#: 1262986

4

Net Weight: 16.38

Emergency Contact: Capital Environmental Services, Inc. 302 652-8890

16. 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.

Printed/Typed Name

Dove Taylor

Signature

*[Signature]*

Month Day Year  
07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

DOMENICK MANICCI

Signature

*[Signature]*

Month Day Year  
07 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

*[Signature]*

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

7 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

00052

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region (Mid-Atlantic) (COMNA) 1510 Gilbert St., Norfolk, VA 23511-2781

Site Paradise Creek

4. Generator's Phone (757) 445-2108

Attn: Rob Sandoz

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill 100 North Park Ln Hampton, VA 23656

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-935-8070

11. Waste Shipping Name and Description

a. Non RCRA Non DDT Soil contaminated with Wood Debris

12. Containers	13. Total Quantity	14. Unit Wt/Vol

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110538

Transaction# 00052

SNT 34

Net Weight 69680 22.03

Emergency Contact Capital Environmental Services Inc 267 662-8899

16. 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.

Printed/Typed Name: Doug Taylor Signature: [Signature] Month: 07 Day: 28 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name: [Signature] Signature: [Signature] Month: 07 Day: 28 Year: 06

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

19. Discrepancy Indication Space

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

Printed/Typed Name: [Signature] Signature: [Signature] Month: . Day: . Year: .

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

0003

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

Attn: Rob Schank

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#:

DAVIS #1

Net Weight:

Emergency Contact: Capital Environmental Services, Inc. 302 852-8998

16. 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.

Printed/Typed Name

Doug Taylor

Signature

D. Taylor

Month Day Year  
10 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document # 00054

2. Page 1 of 1

3. Generator's Name and Mailing Address  
 Commander, Navy Region Mid-Atlantic (CNRMA)  
 1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
 Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Scherr

5. Transporter 1 Company Name  
 C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2751

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
 100 North Park La.  
 Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 885-8070

11. Waste Shipping Name and Description

12. Containers  
 No. Type

13. Total  
 Quantity

14. Unit  
 Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT

20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1263002

48

Net Weight: 21.92

Emergency Contact: Capital Environmental Services, Inc. 302 852-8988

16. 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.

Printed/Typed Name

Signature

Month Day Year

DOCK TAYLOR

[Signature]

07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

7 28 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No. **09055**

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757-442-7781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757-885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.	Type
001	DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 176298

SHAW 01

Net Weight: 24.7

Emergency Contact: Capitol Environmental Services, Inc. 302 652-6999

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

*[Signature]*

Month Day Year

07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Rob Schenk

Signature

*[Signature]*

Month Day Year

.

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

.

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

7 28 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest  
Documents  
00006

2. Page 1  
of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8793

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 865-8370

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b. . . . .

c. . . . .

d. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539 Transaction# 1263029  
5110y #1 Net Weight 17.44  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8898

16. 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.

Printed/Typed Name: Dave Taylor Signature: D. Taylor Month: 07 Day: 28 Year: 05

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Wanda Mates Signature: Wanda Mates Month: 7 Day: 25 Year: 06

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

19. Discrepancy Indication Space

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

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

GENERATOR  
TRANSPORTER  
FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

00057

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2797

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8303 Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-444-2784

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-0070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

DT

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116538

Transaction# 1263010

15

Net Weight 19.73

Emergency Contact: Capital Environmental Services, Inc. 302-552-8999

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

*D. Taylor*

Month Day Year  
07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
1 7 28 0

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest  
00008

2. Page 1  
of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA, 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schank

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001

DT

13. Total  
Quantity

20

14. Unit  
Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1263021

16

Net Weight: 18.61

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8900

16. 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.

Printed/Typed Name

DOX TAYLOR

Signature

*[Signature]*

Month Day Year

07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Clyde Rojas

Signature

*[Signature]*

Month Day Year

07 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

.. .. .

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
11 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.  
00059

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob. Schank

5. Transporter 1 Company Name

C&H Trucking

#14-KUE

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757-445-2781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757-885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1263035

14

Net Weight 21.65

Emergency Contact: Capital Environmental Services, Inc. 302-852-8999

16. 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.

Printed/Typed Name

Doug Taylor

Signature

[Signature]

Month Day Year

07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Quinton Cross

Signature

[Signature]

Month Day Year

07 12 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

07 28 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

00060

2. Page 1

of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (COMNAVMAC)  
1616 Gilbert St. Norfolk, VA 23511-2727

4. Generator's Phone (757) 445-6705

Attn: Rob Schone

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-445-2731

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bermet Sanitary Landfill  
100 North Park Ln  
Hampton, VA 23065

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-5076

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Preservatives

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001

20

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project # 116539

Transaction #

1263037

Net Weight

17.12

Emergency Contact: Capital Environmental Services, Inc 802 852-2999

16. 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.

Printed/Typed Name

Signature

Month Day Year

Doug Taylor

[Signature]

07 25 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

[Signature] 07 25 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.** Manifest No. **00001**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
 Commander, Navy Region Mid-Atlantic (CNRMA)  
 1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
 Paradise Creek

4. Generator's Phone (757) 445-8702  
 Attn: Rob Schank

5. Transporter 1 Company Name  
 C&H Trucking

6. US EPA ID Number  
 NOT REQUIRED

7. Transporter 2 Company Name

8. US EPA ID Number  
 . . . . .

A. Transporter's Phone  
 757-442-2781

9. Designated Facility Name and Site Address  
 Bethel Sanitary Landfill  
 100 North Park La.  
 Hampton, VA 23666

10. US EPA ID Number  
 NOT REQUIRED

B. Transporter's Phone  
 C. Facility's Phone  
 757-865-8070

11. Waste Shipping Name and Description

12. Containers  
 No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
 14. Unit Wt/Vol  
 001 DT 20 T

b.

. . . . .

c.

. . . . .

d.

. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
 Project# 118538 Transaction# 1263036  
 18 Net Weight 21.12  
 Emergency Contact: Capital Environmental Services, Inc. 302 852-8980

16. 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.

Printed/Typed Name  
 DOUG TAYLOR

Signature

Month Day Year  
 09 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name

Signature

Month Day Year  
 . . . . .

18. Transporter 2 Acknowledgement of Receipt of Materials  
 Printed/Typed Name  
 H W FALLS

Signature

Month Day Year  
 . . . . .

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
 11 28 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED. 00002

Manifest  
Page No

2. Page 1  
of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 855-8070

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1263040

Net Weight: 20.67

Emergency Contact: Capitol Environmental Services, Inc-302 852-8999

16. 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.

Printed/Typed Name

DOCK TAYLOR

Signature

*[Signature]*

Month Day Year  
07 28 00

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
7 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
17 28 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest  
Documents  
00068

2. Page 1  
of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6702

Attn: Bob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2351

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

201

DOT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1263048

Net Weight 11.88

Emergency Contact: Capital Environmental Services, Inc. 302 652-2999

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

[Signature]

Month Day Year

07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

7 28 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED . 00064

Manifest  
Document No.

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-448-2784

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23665

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1263059

RDR # 1

Net Weight 27.52

Emergency Contact: Capital Environmental Services, Inc. 302-552-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year  
8 7 28 06

DOUG TAYLOR

[Signature]

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year  
7 28 06

ROBERTO ROSEN

[Signature]

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
11 28 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED** Manifest No. **00005**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
 Commander, Navy Region Mid-Atlantic (CNRMA)  
 1510 Gilbert St., Norfolk, VA 23611-2737

Site  
 Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Pat Schank

5. Transporter 1 Company Name  
 CRH Trucking

6. US EPA ID Number  
 NOT REQUIRED

A. Transporter's Phone  
 757-440-7781

7. Transporter 2 Company Name

8. US EPA ID Number  
 . . . . .

B. Transporter's Phone

9. Designated Facility Name and Site Address  
 Bethel Sanitary Landfill  
 100 North Park La.  
 Hampton, VA 23666

10. US EPA ID Number  
 NOT REQUIRED

C. Facility's Phone  
 757-885-8070

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
--------------------	------	--------------------	-----------------

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001	DT	20	T
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b.

.	.	.	.
---	---	---	---

c.

.	.	.	.
---	---	---	---

d.

.	.	.	.
---	---	---	---

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
 Project# 115539 Transaction# 1263065  
 Brown# 2 Net Weight 15.04  
 Emergency Contact: Capital Environmental Services, Inc. 302 652-8989

16. 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.

Printed/Typed Name  
 DOUG TAYLOR

Signature  
 Month Day Year  
 07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name

Signature  
 Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
 Printed/Typed Name

Signature  
 Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
 Month Day Year

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest No. 00006

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

.....

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

601 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

4

Transaction#:

126-3-84

Net Weight:

16-19

Emergency Contact: Capital Environmental Services, Inc. 302 552-8999

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

*[Signature]*

Month Day Year

07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

LOMERICK MANCUS

Signature

*[Signature]*

Month Day Year

07 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

07 28 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No.

00067

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757-449-2784

7. Transporter 2 Company Name

8. US EPA ID Number

.....

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757-985-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 126 3063

3

Net Weight 18.78

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

Dove Taylor

Signature

Dove Taylor

Month Day Year  
10 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No. 00068

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2757

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23056

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 855-8070

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 00068

SNT 34

Net Weight 59640

17.01

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8898

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

[Signature]

Month Day Year

07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Steve Coulter

Signature

[Signature]

Month Day Year

10 7 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

10 7 28 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

00009

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schank

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-855-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

1263074

DAVIS #1

Net Weight

21.66

Emergency Contact: Capital Environmental Services, Inc. 302-552-8099

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

[Signature]

Month Day Year

8 7 2006

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

7 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

[Signature]

Month Day Year

[Blank]

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

[Blank]

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

GP

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED. 000770

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)

1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schank

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill

100 North Park Ln.

Hampton, VA 23668

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-8370

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

001 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

1263091

48

Net Weight

22.44

Emergency Contact: Capital Environmental Services, Inc 302 562-8990

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

[Signature]

Month Day Year

07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

11 28 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document ID  
00071

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-442-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118638

15

Transaction#

1263103

Net Weight

12.9

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8989

16. 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.

Printed/Typed Name

Doug Taylor

Signature

*Doug Taylor*

Month Day Year

07 28 10

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Rodrick Troutman

Signature

*Rodrick Troutman*

Month Day Year

07 28 10

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

1 7 1 2006

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

00072

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander (New Region Mid-Atlantic) (CVRMA)

1510 Gilbert St. Norfolk, VA 23511-2797

Site:

Paradise Creek

4. Generator's Phone (757) 445-8700

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2751

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill

100 North Park La

Hampton, VA 23666

10. US-EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-6070

11. Waste Shipping Name and Description

a. Non-RCRA, Non-DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001	DT	20	T
-----	----	----	---

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116538

Transaction# 1763122

16

Net Weight 20.75

Emergency Contact: Capiti Environmental Services Inc 302-852-8888

16. 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.

Printed/Typed Name

Signature

Month Day Year

DOUG TAYLOR

[Signature]

8-22-06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

[Signature] 7 29 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest  
Document No. **00073**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schank

5. Transporter 1 Company Name

C&H Trucking #14 RLF

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 886-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001 DT

13. Total  
Quantity

20

14. Unit  
Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110500

Transaction# 1263132

14

Net Weight 23.67

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

D. Taylor

Month Day Year

07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Quinton C185K

Signature

Quinton C185K

Month Day Year

10 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

11 28 06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

00074

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander Navy Region Mid-Atlantic (COMNAVMAC)  
1510 Gilbert St. Norfolk, VA 23511-2737

Site:  
Parsons Creek

4. Generator's Phone (757) 445-8703

Attn: Rec. Section

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-410-2781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-866-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Waste Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project 115589

Transaction#

1263134

Net Weight

19.64

Emergency Contact: Capital Environmental Services, Inc. 302-852-8990

16. 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.

Printed/Typed Name

Signature

Month Day Year

JOE TAYLOR

[Signature]

07/28/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

07/28/06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No. 00075

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-5703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757-449-7784

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00.1

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118530

18

Transaction#

1263042

Net Weight

21.79

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

[Signature]

Month Day Year  
6.7.2006

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

R FALLS

Signature

[Signature]

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

[Signature]

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document # 00076

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8709

Attn: Ron Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

DT

20

T

b.  
c.  
d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1263151

SICOD #1

Net Weight 17

Emergency Contact: Capital Environmental Services, Inc. 302 652-8998

16. 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.

Printed/Typed Name

Doug Taylor

Signature

[Signature]

Month Day Year

07 12 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Wanda Metts

Signature

[Signature]

Month Day Year

07 12 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED** Manifest Document No. **00079**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
 Commander, Navy Region Mid-Atlantic (CNRMA)  
 1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
 Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
 C&H Trucking

6. US EPA ID Number  
 NOT REQUIRED

A. Transporter's Phone  
 757-440-3781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
 Bethel Sanitary Landfill  
 100 North Park La.  
 Hampton, VA 23666

10. US EPA ID Number  
 NOT REQUIRED

C. Facility's Phone  
 757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 2.0 T

b.

...

c.

...

d.

...

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
 Project# 110539 Transaction# 126 3143  
 01 Net Weight 19.47  
 Emergency Contact: Capital Environmental Services, Inc. 302 652-8989

16. 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.

Printed/Typed Name  
 DOUG TAYLOR

Signature  
 [Signature] Month Day Year  
 07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name  
 DOUG TAYLOR

Signature  
 [Signature] Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
 Printed/Typed Name

Signature  
 [Signature] Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
 Month Day Year

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest  
Doc # 00078

2. Page 1  
of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site #  
Paradise Creek

4. Generator's Phone (757) 445-5703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 855-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001 DT

13. Total  
Quantity

2.0

14. Unit  
Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

11

Transaction#

1263152

Net Weight

21.87

Emergency Contact: Capital Environmental Services, Inc 302 652-8999

16. 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.

Printed/Typed Name

Doug Taylor

Signature

[Signature]

Month Day Year  
07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year  
7 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

[Signature]

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest  
Copy Ref. No. **00073**

2. Page 1  
of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2757

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schank

5. Transporter 1 Company Name

CAH Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

.....

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757-885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
001	DT	20	T
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

ROR# 1

Transaction# 1263164

Net Weight 27.52

Emergency Contact: Capitol Environmental Services, Inc. 802 652-8999

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

*[Signature]*

Month	Day	Year
07	28	06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

RODOLFO ROGERSON

Signature

*[Signature]*

Month	Day	Year
07	28	06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month	Day	Year
.....	.....	.....

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month	Day	Year
7	28	06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No.

00080

2. Page 1  
of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

.....

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001 DT

13. Total  
Quantity

20

14. Unit  
Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#

1263183

Brown 2

Net Weight

18.78

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

Doak Taylor

Signature

*Doak Taylor*

Month Day Year

. . .

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

*[Signature]*

Month Day Year

. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

. . .

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

. . .

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No.

00081

2. Page 1  
of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schank

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757-445-2751

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001

DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110530

Transaction#

126 3185

3

Net Weight

17.98

Emergency Contact: Capital Environmental Services, Inc. 302 852-8990

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

*D. Taylor*

Month Day Year

07 28 05

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

HELEN H. GIBSON SR

Signature

*Helen H. Gibson Sr*

Month Day Year

7 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

*[Signature]*

Month Day Year

.. ..

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

.. ..

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No.

00082

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander (Law) Region Mid-Atlantic (DNRMA)  
1510 Gilbert St., Norfolk, VA 23503-2737

Site  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Bob Schenk

5. Transporter 1 Company Name

CSH Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757-445-3781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23660

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757-665-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DDT Soil contaminated with Wood Debris

12. Containers  
No. Type

061 20

13. Total Quantity

14. Unit Wt/Vol

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118538

Transaction# 1263172

Net Weight 23.19

DAVIS AI

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year

DAVE TAYLOR

[Signature]

07 20 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED. 0008

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2787

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6708

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23856

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-855-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001 DT 20 T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116530

Transaction# 2263184

4

Net Weight 15.7K

Emergency Contact: Capital Environmental Services, Inc. 302-852-8999

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

*[Signature]*

Month Day Year  
07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

DOMENICK MANCUSI

Signature

*[Signature]*

Month Day Year  
0 9 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
1 7 28 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document # **00084** 2. Page 1 of 1

3. Generator's Name and Mailing Address  
 Commander, Navy Region Mid-Atlantic (CNRMA)  
 1510 Gilbert St., Norfolk, VA 23511-2737  
 4. Generator's Phone (757) 445-8703 Attn: Rob Schank

Site:  
 Paradise Creek

5. Transporter 1 Company Name: **C&H Trucking** 6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: **757-449-2781**

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

B. Transporter's Phone:

9. Designated Facility Name and Site Address  
 Bethel Sanitary Landfill  
 100 North Park La.  
 Hampton, VA 23866 10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: **757 885-8070**

11. Waste Shipping Name and Description

12. Containers

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No.	Type	13. Total Quantity	14. Unit Wt/Vol
001	DT	20	T

b.

No.	Type	13. Total Quantity	14. Unit Wt/Vol

c.

No.	Type	13. Total Quantity	14. Unit Wt/Vol

d.

No.	Type	13. Total Quantity	14. Unit Wt/Vol

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
 Project# 116532 Transaction# 00084  
 SWF34 Net Weight: 21.38  
 Emergency Contact: Capital Environmental Services, Inc. 302 852-8899

16. 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.

Printed/Typed Name: **Doug Taylor**

Signature: *D. Taylor* Month Day Year: **07/28/06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name: **Steve Coulter**

Signature: *Steve Coulter* Month Day Year: **07/28/06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
 Printed/Typed Name:

Signature: Month Day Year:

19. Discrepancy Indication Space

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

Printed/Typed Name:

Signature: *[Signature]* Month Day Year: **7-28-06**

GENERATOR TRANSPORTER FACILITY

02

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No. 00085

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-5703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6.

US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8.

US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton VA 23666

10.

US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

DT

20

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115538

48

Transaction#:

1263195

Net Weight:

19.32

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

Doug Taylor

Signature

D. P. Taylor

Month Day Year  
07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

GENERATOR  
TRANSPORTER  
FACILITY

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

Printed/Typed Name

Signature

Month Day Year

TRANSPORTER #2

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

0086

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (COMRMA)  
1315 Giben St., Norfolk, VA 23511-2707

Sta.  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schork

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-445-1701

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Betha Sandary Landfill  
100 North Park La  
Hampton, VA 23066

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-886-8070

11. Waste Shipping Name and Description

a. Non RCRA Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118639

Transaction# 1263202

SHAWO 1

Net Weight 2374

Emergency Contact: Capital Environmental Services, Inc. 302-662-8996

16. 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.

Printed/Typed Name

Signature

Month Day Year

DOUG TAYLOR

[Signature]

07 08 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

[Signature]

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No.

00087

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander Navy Region Mid-Atlantic (CNRMIA)  
1610 Gibben St. Norfolk, VA 23511-2732

4. Generator's Phone (757) 445-8702

4th Fleet School

5. Transporter 1 Company Name

CGH Trucking

6.

US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757-442-2761

7. Transporter 2 Company Name

8.

US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10.

US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757-265-8070

11. Waste Shipping Name and Description

a. Non RCRA Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

BT

001

20

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

1263200

15

Net Weight

18-24

Emergency Contact: Capital Environmental Services, Inc 802-802-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year

Jane Taylor

J Taylor

07/28/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

Roderick Troutman

Roderick Troutman

07/28/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

FACILITY

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

Printed/Typed Name

Signature

Month Day Year

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Number

00088

2. Page 1  
of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-5703

Attn: Rob Schank

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757-445-2751

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

12. Containers  
No. Type

DT

13. Total  
Quantity

20

14. Unit  
Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118639

Transaction#

16

Net Weight

Emergency Contact: Capital Environmental Services, Inc. 302-852-8909

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

[Signature]

Month Day Year

07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

7 19 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

[Blank]

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

[Blank]

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED** Manifest Document No. **00089**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking **#14 KUE**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23656

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1263215  
14 Net Weight 23.97  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
Month Day Year  
10 27 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
Quinton Cross

Signature  
Month Day Year  
6 7 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest

00090

2. Page 1  
of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site  
Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23665

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 865-6070

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 1263100

SHAW 01

Net Weight: 24.02

Emergency Contact: Capital Environmental Services, Inc. 302 552-8099

16. 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.

Printed/Typed Name

DAK TAYLOR

Signature

*[Signature]*

Month Day Year

10 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*[Signature]*

Signature

Month Day Year

.

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

.

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

10 28 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

**NON-HAZARDOUS WASTE MANIFEST**

#91

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23058

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1263217

5

Net Weight 15.98

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
Dore Taylor

Signature  
D. Taylor

Month Day Year  
07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

#92

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schank

5. Transporter 1 Company Name

CAH Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23086

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-6070

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116530

Transaction#

1263239

Net Weight

18.44

01

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8900

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

[Signature]

Month Day Year

10 9 2006

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

#93

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED** Manifest Document No. **22**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703** Attn: **Rob Schonk**

5. Transporter 1 Company Name **C&H Trucking** 6. US EPA ID Number **NOT REQUIRED**

A. Transporter's Phone **757-449-2764**

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park Ln.**  
**Hampton, VA 23666**

10. US EPA ID Number **NOT REQUIRED** C. Facility's Phone **757 885-8070**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Non RCRA, Non DDT Soil contaminated with Wood Debris**

**001** **DT** **10** **T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# **110539** Transaction# **1263247**  
Net Weight **19.36**  
Emergency Contact: **Capital Environmental Services, Inc. 302 652-8999**

16. 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.

Printed/Typed Name **Doug Taylor**

Signature **[Signature]** Month Day Year . . .

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **[Signature]**

Signature **[Signature]** Month Day Year **7 28 95**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year . . .

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year . . .

GENERATOR  
TRANSPORTER  
FACILITY

TRANSPORTER #2

#94

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. . . . .

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number  
. . . . .

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

. . . . .

c.

. . . . .

d.

. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction#: 1263245  
Net Weight: 20.93  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
[Signature] Month Day Year  
07 28 00

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
K W Falls

Signature  
[Signature] Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year

GENERATOR  
TRANSPORTER  
FACILITY

#95

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23611-2737  
4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking  
6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666  
10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-0070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1263275  
RDR # 1 Net Weight 27.67  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name  
DOUG TAYLOR

Signature  
D. Taylor  
Month Day Year  
07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
RANDALL D ROGERSON

Signature  
Randall D. Rogerson  
Month Day Year  
07 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year  
7 28 06

GENERATOR  
TRANSPORTER  
FACILITY

# 96

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED** Manifest Document No. **10**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23088

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Rec# 118539

Transaction#: 1263253

DAVIS #1

Net Weight: 21.23

Emergency Contact: Capitol Environmental Services, Inc. 302 662-8999

16. 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.

Printed/Typed Name  
DOUG TAYLOR

Signature  
D. P. Taylor

Month Day Year  
07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
L. Grant

Signature  
L. Grant

Month Day Year  
7 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

# 97

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description  
a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

001 DT 20 T

11. Waste Shipping Name and Description	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol
a. Non RCRA, Non DOT Soil contaminated with Wood Debris	001	DT	20	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#: 1263292

SLCOG #1

Net Weight 16.18

Emergency Contact: Capitol Environmental Services, Inc. 302 652-9989

16. 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.

Printed/Typed Name  
DOUG TAYLOR

Signature  
D. Taylor

Month Day Year  
07 25 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
Wanda Motis

Signature  
Wanda Motis

Month Day Year  
07 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1  
of 1

*H98*

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23065

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539 Transaction# 1263285  
Net Weight: 17.12  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8880

16. 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.

Printed/Typed Name  
DOUG TAYLOR

Signature  
*D.P. Taylor* Month Day Year  
07 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
MICHAEL MARCUS

Signature  
*Michael Marcus* Month Day Year  
07 10 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year

GENERATOR

TRANSPORTER

FACILITY

# 99

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone (757) 445-5703 Attn: Rob Schonk

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-440-2761**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park Ln.**  
**Hampton, VA 23666**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 865-8070**

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

**001**

**DT**

**20**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# **116539**

Transaction# **1263286**

**3**

Net Weight **17.45**

Emergency Contact: **Capitol Environmental Services, Inc. 302 852-8000**

16. 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.

Printed/Typed Name  
**DOUG TAYLOR**

Signature  
*D. Taylor*

Month Day Year  
**07 20 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
*John P. Colver Sr*

Signature  
*John P. Colver Sr*

Month Day Year  
**7 20 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR  
TRANSPORTER  
FACILITY

#100

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-0070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

0.01 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110539

Transaction# 1263287

Brown 2

Net Weight 16.90

Emergency Contact: Capital Environmental Services, Inc. 302 862-8000

17.21

16. 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.

Printed/Typed Name  
DOUG TAYLOR

Signature  
D Taylor

Month Day Year  
07 25 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
AY

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

#101

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1010 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schora

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-446-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

.....

c.

.....

d.

.....

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transmittal# 1  
Net Weight 63.440 19.02  
Emergency Contact: Capital Environmental Services, Inc. 302-862-8000

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
[Signature] Month Day Year 07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
[Signature] Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
[Signature] Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
[Signature] Month Day Year

GENERATOR

TRANSPORTER

FACILITY

#102

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-3703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED.

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
NOT REQUIRED.

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23065

10. US EPA ID Number  
NOT REQUIRED.

C. Facility's Phone  
757-865-0070

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
--------------------	------	--------------------	-----------------

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

..	DT	20	T
----	----	----	---

b.

..	.	..	..
----	---	----	----

c.

..	.	..	..
----	---	----	----

d.

..	.	..	..
----	---	----	----

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110539      Transaction#: 1263288

48      Net Weight: 20.24

Emergency Contact: Capital Environmental Services, Inc. 302-652-8990

16. 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.

Printed/Typed Name  
Dox Taylor

Signature  
Dox Taylor

Month Day Year  
07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

#103

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-855-6070

11. Waste Shipping Name and Description

12. Containers	13. Total Quantity	14. Unit Wt/Vol
a. Non RCRA, Non DOT Soil contaminated with Wood Debris	20	T
b.		
c.		
d.		

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 1263318

SHAAN

Net Weight: 24.71

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
*[Signature]*

Month Day Year  
07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
Lester Shaw

Signature  
*[Signature]*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

#104

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone (**757**) **445-6703** Attn: **Rob Schork**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-440-2761**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23666**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 865-8070**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

**001** DT **20** T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# **115539** Transaction# **1263291**  
**15** Net Weight **18.53**  
Emergency Contact: **Capital Environmental Services, Inc. 302 852-8999**

16. 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.

Printed/Typed Name  
**DOUG TAYLOR**

Signature **D. Taylor** Month **07** Day **28** Year **06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year

GENERATOR

TRANSPORTER

FACILITY

#105

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone (757) **445-8703** Attn: **Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking** **NKUE**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-449-2781**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23665**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757-885-8070**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

**061** **DT** **20** **T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# **118539** Transaction# **1263847**  
**14** Net Weight: **18.79**  
Emergency Contact: **Capitol Environmental Services, Inc. 302 852-8000**

16. 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.

Printed/Typed Name  
**DOUG TAYLOR**

Signature *[Signature]* Month Day Year **07/28/06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
**Quinton Cross**

Signature *[Signature]* Month Day Year **07/28/06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

106  
Manifest  
Document No.

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1810 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone ( **757** ) **445-8703** Attn: **Rob Schenk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-449-2781**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park Ln.**  
**Hampton, VA 23666**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 865-6070**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		
<b>001</b>	<b>DT</b>	<b>20</b>	<b>T</b>
..	..	..	..
..	..	..	..
..	..	..	..

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# **116539** Transaction# **1263309**

Net Weight: **15.98**

Emergency Contact: **Capitol Environmental Services, Inc. 302 652-8999**

16. 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.

Printed/Typed Name  
**DAVE TAYLOR**

Signature  
*[Signature]* Month Day Year  
**07 28 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Name  
*[Signature]* Signature  
*[Signature]* Month Day Year

TRANSPORTER #2

GENERATOR

TRANSPORTER

#107

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1265434

CH 14

Net Weight: 21.58

Emergency Contact: Capitol Environmental Services, Inc. 302 562-9999

16. 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.

Printed/Typed Name  
DOUG TAYLOR

Signature  
[Signature]

Month Day Year  
12 08 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
D. Cross

Signature  
[Signature]

Month Day Year  
08 08 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. WATSON

Signature  
[Signature]

Month Day Year  
12 18 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

#108

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#:

1265441

SHA01

Net Weight:

24.16

Emergency Contact: Capital Environmental Services, Inc. 302 662-8999

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

[Signature]

Month Day Year

07 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Cylester Shaw

Signature

[Signature]

Month Day Year

. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

[Signature]

Month Day Year

. . .

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

[Signature]

Month Day Year

. . .

GENERATOR  
TRANSPORTER  
FACILITY

TRANSPORTER #2

**NON-HAZARDOUS WASTE MANIFEST**

109

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
 1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
**NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 448-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4887**

9. Designated Facility Name and Site Address  
**WM-Bethel Sanitary Landfill**  
 100 North Park La.  
 Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 768-3033**

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		

- a.
- b.
- c.
- d.

	DT	20	T	

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

CH 11

Transaction# **1265440**  
 Actual Wt **17.63**

Emergency Contact: Capital Environmental Services, Inc. 302 652-8899

16. 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.

Printed/Typed Name **BM HAZEN**

Signature *[Signature]*

Month Day Year  
**08 10 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **Mark**

Signature *[Signature]*

Month Day Year  
**8 5 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature *[Signature]*

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

110

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No. 2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-6703

Site:

NNSY Paradise Creek

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757 440-2761

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

757 487-4887

9. Designated Facility Name and Site Address

VM-Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757 766-3033

11. Waste Shipping Name and Description

a.

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
	DT	20	T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: 1265444  
Actual Wt: 15.58

Emergency Contact: Capital Environmental Services, Inc. 302 852-8499

16. 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.

Printed/Typed Name

*B.M. Han*

Signature

*B.M. Han*

Month Day Year

08 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

*T. Watson*

Signature

*T. Watson*

Month Day Year

08 08 06

GENERATOR

TRANSPORTER

FACILITY

#111

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**MNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2781**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**WM-Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23666**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 766-3033**

11. Waste Shipping Name and Description

12. Containers	13. Total Quantity	14. Unit Wt/Vol
a.	20	T
b.		
c.		
d.		

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Transaction#: **126 5446**

Actual Wt: **17.77**

Emergency Contact: **Capitol Environmental Services, Inc. 302 852-8099**

16. **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.

Printed/Typed Name **R.M. HART**

Signature *[Signature]*

Month Day Year  
**8 10 96**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **Chris Bates**

Signature *[Signature]*

Month Day Year  
**8 8 96**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name **T. Watson**

Signature *[Signature]*

Month Day Year  
**8 8 96**

GENERATOR

TRANSPORTER

FACILITY

#112

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23611-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
CSH Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# #112 126 5482  
SMT 34 Net Weight: 37.900 18.95  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8899

16. 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.

Printed/Typed Name  
DOUG TAYLOR

Signature [Signature] Month Day Year 01 08 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Steve Coulter

Signature [Signature] Month Day Year 11 08 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. WATSON

Signature [Signature] Month Day Year

GENERATOR

TRANSPORTER

FACILITY

#113

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-448-2781**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park Ln.**  
**Hampton, VA 23666**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 885-8070**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118530

Transaction# 1265433

**JAT 33**

Net Weight: 1555

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8990

16. 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.

Printed/Typed Name  
**DOUG TAYLOR**

Signature  
*[Signature]*

Month Day Year  
**08 08 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year  
**08 08 06**

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name  
**T. W. P. [Signature]**

Signature  
*[Signature]*

Month Day Year  
**08 08 06**

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

**NON-HAZARDOUS WASTE MANIFEST**

114

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 444-6703

Site:

NNSY Paradise Creek

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757 444-2781

7. Transporter 2 Company Name

South Norfolk Trucking

#28

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

757 487-4887

9. Designated Facility Name and Site Address

WM-Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 766-3033

11. Waste Shipping Name and Description

a.

b.

c.

d.

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

SNT 78

Transaction# 1265454

Actual Wt: 16.17

Emergency Contact: Capitol Environmental Services, Inc. 302 862-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

116

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**NNSY Paradise Creek**

4. Generator's Phone (757) 445-6703

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2761**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**WM-Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23666**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 766-3033**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

11. Waste Shipping Name and Description	12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol
a.	DT	20	T
b.			
c.			
d.			

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

15  
Transaction#: 126 8455  
Actual Wt: 18.45

Emergency Contact: Capital Environmental Services, Inc. 302 652-8899

16. 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.

Printed/Typed Name **BM Hunt**

Signature *BM Hunt*

Month Day Year  
**08 08 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **Rich Trotman**

Signature *Rich Trotman*

Month Day Year  
**08 08 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name **T WATSON**

Signature *T Watson*

Month Day Year  
**08 08 06**

GENERATOR  
TRANSPORTER  
FACILITY

117

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 449-2781**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 497-4987**

9. Designated Facility Name and Site Address  
**WM-Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23666**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 766-3033**

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

11. Waste Shipping Name and Description	12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol
a.	DT	20	T
b.			
c.			
d.			

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**RDR #1**

Transaction# **1265464**

Actual Wt **27.06 TONS**

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name **B M HART**

Signature **B M HART**

Month Day Year  
**08 08 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **RANDALL DROFFERSON**

Signature **Randall Drofferson**

Month Day Year  
**08 08 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

118

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
NNSY Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757 440-2701

7. Transporter 2 Company Name  
South Norfolk Trucking

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
757 487-4887

9. Designated Facility Name and Site Address  
VM-Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 766-3033

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

11. Waste Shipping Name and Description	12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol
a.	DT	2.0	T
b.			
c.			
d.			

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

MEKAG01

Transaction# 1265461

Actual Wt: 17.34

Emergency Contact: Capital Environmental Services, Inc. 302 652-6900

16. 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.

Printed/Typed Name

Signature

Month Day Year

08 08 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

119

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

NNSY Paradise Creek

4. Generator's Phone (757) 445-6703

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757 440-2761

7. Transporter 2 Company Name

South Norfolk Trucking

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

757 487-4867

9. Designated Facility Name and Site Address

WM-Bethel Sanitary Landfill

100 North Park La.

Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 788-3033

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

11. Waste Shipping Name and Description	12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol
a.	DT	20	T
b.			
c.			
d.			

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Turner 10

Transaction#: 1265467

Actual Wt: 67.71

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name: R M HANT

Signature: [Signature]

Month Day Year: 08/08/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: [Signature]

Signature: [Signature]

Month Day Year: . . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: [Signature]

Signature: [Signature]

Month Day Year: . . .

19. Discrepancy Indication Space

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

Printed/Typed Name: [Signature]

Signature: [Signature]

Month Day Year: 8-8-06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

120

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
**MNSY Paradise Creek**

4. Generator's Phone ( **767** ) **445-8703**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757 440-2781**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone  
**757 487-4867**

9. Designated Facility Name and Site Address  
**WM-Bethel Sanitary Landfill**  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 786-3033**

11. Waste Shipping Name and Description

a.  
b.  
c.  
d.

12. Containers	13. Total Quantity	14. Unit Wt/Vol
No.	Type	
	DT	T
		20

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

*Waven 11*

Transaction# **1265470**

Actual Wt **16.91**

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. **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.

Printed/Typed Name *R M Harris*

Signature *[Signature]*

Month Day Year  
**08 08 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature *TERRANCE SHEPPARD*

Month Day Year  
**08 08 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature *J. Sheppard*

Month Day Year  
**08 08 06**

19. Discrepancy Indication Space

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

Printed/Typed Name *T. White*

Signature *[Signature]*

Month Day Year  
**08 08 06**

GENERATOR

TRANSPORTER

FACILITY

121

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**NNSY Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**

5. Transporter 1 Company Name  
~~Can Trucking~~

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
**757 440-2781**

7. Transporter 2 Company Name  
**South Norfolk Trucking**

8. US EPA ID Number  
**NOT REQUIRED.**

B. Transporter's Phone  
**757 487-4887**

9. Designated Facility Name and Site Address  
**WM-Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23666**

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
**757 766-3033**

11. Waste Shipping Name and Description

No.	Type	13. Total Quantity	14. Unit Wt/Vol
a.	DT		T
b.			
c.			
d.			

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

**SWT29**

Transaction#: **126 8466**

Actual Wt: **14.48**

Emergency Contact: **Capitol Environmental Services, Inc. 302-652-8999**

16. 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.

Printed/Typed Name **RM HART**

Signature *[Signature]*

Month Day Year  
**06 08 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name **Dawn Edwards**

Signature *[Signature]*

Month Day Year  
**5 8 06**

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

122

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-440-2781**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23666**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 866-8070**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

DT  
**20** T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1265471  
**SMT32** Net Weight 15.79  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8000

16. 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.

Printed/Typed Name  
**Dave Taylor**

Signature  
**D. P. Taylor** Month Day Year  
**8 8 05**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year  
**8 8 05**

GENERATOR  
TRANSPORTER  
FACILITY

123

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 855-8970

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

OT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116639 Transaction# 126 5478  
Net Weight: 16.25  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name  
Dove Taylor

Signature  
DPTaylor

Month Day Year  
10 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. Watson

Signature  
T. Watson

Month Day Year  
8 8 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

124

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-855-6070

11. Waste Shipping Name and Description

12. Containers	13. Total Quantity	14. Unit Wt/Vol		
			No.	Type
a.	Non RCRA, Non DOT Soil contaminated with Wood Debris	DT	T	20
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project # 116539  
DAVIS 2

Transaction # 1248476  
Net Weight 23.94

Emergency Contact: Capital Environmental Services, Inc. 302-852-8998

16. 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.

Printed/Typed Name: Dave Taylor Signature: [Signature] Month Day Year: 8/8/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Yvette Engert Signature: [Signature] Month Day Year: . . .

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

19. Discrepancy Indication Space

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

Printed/Typed Name: T. WATSON Signature: [Signature] Month Day Year: 8/8/06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

# 125

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2784

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110630 Transaction# 1065468  
14 Net Weight ~~23.18~~ 23.18  
Emergency Contact: Capital Environmental Services, Inc. 302 552-8899

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
[Signature] Month Day Year  
08 08 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
Doug Taylor

Signature  
[Signature] Month Day Year  
08 08 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature  
[Signature] Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. Watson

Signature  
[Signature] Month Day Year  
08 08 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

126

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St. Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project # 118530

Transaction# 1265503

SHAWO1

Net Weight 24.92

Emergency Contact: Capitol Environmental Services, Inc. 302 552-8000

16. 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.

Printed/Typed Name

Signature

Month Day Year

DOUG TAYLOR

D. P. Taylor

10/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

Celestar Shaw

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

T. WATSON

[Signature]

17/8/06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

127

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 446-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 885-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110000

Transaction#: 1265494

11

Net Weight: 21.21

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
[Signature]

Month Day Year  
10 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
[Signature]

Signature  
[Signature]

Month Day Year  
10 10 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. WATSON

Signature  
[Signature]

Month Day Year  
8 9 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

128

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schank

5. Transporter 1 Company Name  
CSH Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La  
Hampton, VA 23668

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 885-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115558

Transaction#: 1248497

Net Weight: 17.41

Emergency Contact: Capital Environmental Services, Inc. 302 852-8888

16. 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.

Printed/Typed Name

Signature

Month Day Year

Doug Taylor

[Signature]

10/8/08 10/8

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

[Signature]

8/8/08

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**126**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 855-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DDT Soil contaminated with Wood Debris

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1265499  
16 Net Weight: 20.72  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8909

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
[Signature] Month Day Year  
10/8/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Chad Bates

Signature  
[Signature] Month Day Year  
4 8 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
[Signature] Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
[Signature] Month Day Year

GENERATOR

TRANSPORTER

FACILITY

130  
~~120~~

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1516 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 805-6070

11. Waste Shipping Name and Description

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
a. Non RCRA, Non DOT Soil contaminated with Wood Debris	20	T
b.		
c.		
d.		

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#

1265632

Net Weight

19.53

Emergency Contact: Capital Environmental Services, Inc. 302 652-8000

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
*D. Taylor*

Month Day Year  
08 08 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
Kirk Trotman

Signature  
*Kirk Trotman*

Month Day Year  
07 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. Watson

Signature  
*T. Watson*

Month Day Year  
08 08 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

131

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

A. Transporter's Phone  
757-449-2781

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name

B. Transporter's Phone

8. US EPA ID Number  
**NOT REQUIRED**

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

C. Facility's Phone  
757 885-8070

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description  
a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
b.  
c.  
d.

12. Containers	13. Total Quantity	14. Unit
No.	Type	Wt/Vol
	DT	20 T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1265527  
SWT 33 Net Weight 16.44  
Emergency Contact: Capital Environmental Services, Inc. 802 862-8090

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
D. Taylor  
Month Day Year  
08 08 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year  
08 08 06

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. WATSON

Signature  
T. Watson  
Month Day Year  
08 18 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

# 132

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1810 Gilbert St., Norfolk, VA 23511-2787

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8708 Attn: Rob Schook

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Ethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 865-8970

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

200

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#

132 1265528

Net Weight:

41620

20.81

SN134

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8899

16. 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.

Printed/Typed Name

Dave Taylor

Signature

D. Taylor

Month Day Year

12 8 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Dave Taylor

Signature

Dave Taylor

Month Day Year

12 8 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

T. Wilson

Signature

T. Wilson

Month Day Year

8 8 06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

133

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2727

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Bob Schrock

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

C&M Trucking

NOT REQUIRED.

757-441-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

SNT 28

9. Designated Facility Name and Site Address

10. US EPA ID Number

C. Facility's Phone

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

NOT REQUIRED.

757-885-8870

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

20

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#

1265529

SNT 28

Net Weight

16.71

Emergency Contact: Capital Environmental Services, Inc. 302-652-8928

16. 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.

Printed/Typed Name

Signature

Month Day Year

Doug Taylor

D. Taylor

08 08 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

R. Cluffee

R. Cluffee

1 8 2006

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

T. Watson

T. Watson

1 8 10 06

GENERATOR'S COPY

TRANSPORTER FACILITY

134

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6709 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23660

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Non RCRA, Non DOT Soil contaminated with Wood Debris		DT	20	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1265588  
RDR #1 Net Weight 28.83 TONS  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8900

16. 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.

Printed/Typed Name: Dave Taylor Signature: [Signature] Month Day Year: 09/08/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: RANDALL D ROSELOW Signature: [Signature] Month Day Year: 10/8/06

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name: Signature: Month Day Year:

GENERATOR

TRANSPORTER

FACILITY

135

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schrank

5. Transporter 1 Company Name: CSH Trucking  
6. US EPA ID Number: NOT REQUIRED

A. Transporter's Phone: 757-440-2781

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23665  
10. US EPA ID Number: NOT REQUIRED

C. Facility's Phone: 757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1265540  
SNT 29 Net Weight 18.58  
Emergency Contact: Capital Environmental Services, Inc. 302-552-8999

16. 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.

Printed/Typed Name: Dove Taylor

Signature: [Signature] Month Day Year: 08/08/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Dawn Edwards

Signature: [Signature] Month Day Year: 8/8/06

19. Discrepancy Indication Space

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

Printed/Typed Name: T. Mason

Signature: [Signature] Month Day Year: 8/8/06

GENERATOR

TRANSPORTER

FACILITY

136

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

20

T

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		
	DT	20	T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118639

Transaction# 1265841

MCKAY

Net Weight 19.47

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

Doug Taylor

Signature

*D. Taylor*

Month Day Year  
08 08 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

MCKAY'S HAULING LLC

Signature

*[Signature]*

Month Day Year  
08 08 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

T. WATSON

Signature

*[Signature]*

Month Day Year  
08 08 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

137

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone ( )

757 445-6703

Attn: Rob Schook

5. Transporter 1 Company Name

C&H Trucking

6.

US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2761

7. Transporter 2 Company Name

8.

US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
1100 North Park La.  
Hampton, VA 23666

10.

US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

SMT 32

Net Weight

Emergency Contact: Capital Environmental Services, Inc. 302 652-8900

16. 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.

Printed/Typed Name

D. J. Taylor

Signature

*D. J. Taylor*

Month Day Year

08 08 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

138

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2757

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6763 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking  
6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-446-2781

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668  
10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Non RCRA, Non DOT Soil contaminated with Wood Debris		DT	2.0	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110539

Transaction# 1245553

DAVIS #2

Net Weight 23.41

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name: Doug Taylor Signature: [Signature] Month: 08 Day: 08 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Wade Grant Signature: [Signature] Month: . Day: . Year: .

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name: Signature: Month: . Day: . Year: .

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

139

NON-HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NOT REQUIRED	Manifest Document No.	2. Page 1 of 1
3. Generator's Name and Mailing Address Command, Navy Region Mid-Atlantic (CNRMA) 1510 Gilber St., Norfolk, VA 23511-2737			Site: Paradise Creek	
4. Generator's Phone: 757 445-8703 Attn: Rob Schook		6. US EPA ID Number		A. Transporter's Phone
5. Transporter 1 Company Name C&H Trucking		NOT REQUIRED		757 440-2784
7. Transporter 2 Company Name		9. US EPA ID Number		B. Transporter's Phone
9. Designated Facility Name and Site Address Bethel Sanitary Landfill 100 North Park La. Hampton, VA 23666		10. US EPA ID Number		C. Facility's Phone
11. Waste Shipping Name and Description		NOT REQUIRED		757 865-8070
		12. Containers	13. Total Quantity	14. Unit Wt/Vol
a. Non RCRA, Non DOT Soil contaminated with Wood Debris		No.	Type	
			DT	2 @ T
b.				
c.				
d.				
D. Additional Descriptions for Materials Listed Above			E. Handling Codes for Wastes Listed Above	
15. Special Handling Instructions and Additional Information				
Project# 11f 530		Transaction#:		
31		Net Weight:		
Emergency Contact: Capitol Environmental Services, Inc. 302 652-6999				
16. 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.				
Printed/Typed Name Dave Taylor		Signature <i>D. Taylor</i>		Month Day Year 09/08/06
17. Transporter 1 Acknowledgement of Receipt of Materials			Signature	
Printed/Typed Name			Month Day Year	
18. Transporter 2 Acknowledgement of Receipt of Materials			Signature	
Printed/Typed Name			Month Day Year	
19. Discrepancy Indication Space				
20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 19.				
Printed/Typed Name		Signature		Month Day Year

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

140

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8700 Attn. Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 685-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1265567

TRANS-10

Net Weight: 17.54

Emergency Contact: Capital Environmental Services, Inc 302 852-8999

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

[Signature]

Month Day Year  
08 08 00

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
8 8 00

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

141

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-445-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110539 Transaction# 1265580  
Tower 1 Net Weight 20.25  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name  
DOUG TAYLOR

Signature  
DPTaylor  
Month Day Year  
8 8 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
T. Sheppard  
Month Day Year  
8 8 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Torena Sheppard  
Month Day Year  
8 8 06

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

142

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-5703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115639 Transaction# 1265574  
14 Net Weight 25.26  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8993

16. 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.

Printed/Typed Name  
Dore Taylor

Signature  
D. Taylor  
Month Day Year  
. . .

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
D. Cross

Signature  
D. Cross  
Month Day Year  
08 08 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year  
. . .

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year  
08 18 06

GENERATOR

TRANSPORTER

FACILITY

143

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schank

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116538

Transaction# 1265604

Net Weight: 23.37

Emergency Contact: Capital Environmental Services, Inc. 302-852-8899

16. 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.

Printed/Typed Name

DOUG TAYLOR

Signature

*[Signature]*

Month Day Year

08 08 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Mark

Signature

*[Signature]*

Month Day Year

8 08 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

J. MATSON

Signature

*[Signature]*

Month Day Year

8 18 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

144 124?

**NON-HAZARDOUS WASTE MANIFEST** 1. Generator's US EPA ID No. **NOT REQUIRED** Manifest Document No. 2. Page 1 of 1

3. Generator's Name and Mailing Address  
 Commander, Navy Region Mid-Atlantic (CNRMA)  
 1510 Gilbert St., Norfolk, VA 23511-2737  
 4. Generator's Phone (757) 445-8703 Attn: Rob Schonk  
 Site: Paradise Creek

5. Transporter 1 Company Name: C&H Trucking 6. US EPA ID Number: **NOT REQUIRED** A. Transporter's Phone: 757-449-2781

7. Transporter 2 Company Name: 8. US EPA ID Number: B. Transporter's Phone:

9. Designated Facility Name and Site Address: Bethel Sanitary Landfill, 100 North Park La., Hampton, VA 23666 10. US EPA ID Number: **NOT REQUIRED** C. Facility's Phone: 757 895-8070

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Non RCRA, Non DOT Soil contaminated with Wood Debris		DT		T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
 Project# 110539 Transaction# 1265611  
 Net Weight 18.79  
 Emergency Contact: Capital Environmental Services, Inc. 302 862-8899

16. 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.

Printed/Typed Name: Dave Taylor Signature: D.P. Taylor Month: . Day: . Year: .

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name: Signature: Month: . Day: . Year: .

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
 Printed/Typed Name: T. WILSON Signature: T. Wilson Month: 8 Day: 8 Year: 0

GENERATOR TRANSPORTER FACILITY

145

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 448-6793 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1265614  
16 Net Weight 22.03  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
D. Taylor  
Month Day Year  
08 08 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Lyndee Bates

Signature  
Lyndee Bates  
Month Day Year  
08 08 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year

GENERATOR

TRANSPORTER

FACILITY

146

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (767) 445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

DT

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116530

Transaction#

1265598

SHAW 01

Net Weight

27.46

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

Doug Taylor

Signature

D. Taylor

Month Day Year  
08 08 08

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Cyler Shaw

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

147

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNEMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 855-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#

Net Weight: 18.38

Emergency Contact: Capital Environmental Services, Inc. 302 862-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year

DOUG TAYLOR

[Signature]

05 08 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

149

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6700 Attn: Ron Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED.

A. Transporter's Phone  
757-439-7701

7. Transporter 2 Company Name

8. US EPA ID Number  
NOT REQUIRED.

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED.

C. Facility's Phone  
757-855-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118599 Transaction# 149  
SNT 34 Net weight: 42100 21.06  
Emergency Contact: Capital Environmental Services, Inc. 802 552-8899

16. 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.

Printed/Typed Name: Doug Taylor Signature: D. Taylor Month: 08 Day: 08 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Steve Coulter Signature: Steve Coulter Month: Day: Year:

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name: Signature: Month: Day: Year:

GENERATOR

TRANSPORTER

FACILITY

150

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone

757 965-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118930

Transaction# 1266120

11

Net Weight 19.6g

Emergency Contact: Capital Environmental Services, Inc. 302 682-8999

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
[Signature]

Month Day Year  
08 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
Mark

Signature  
[Signature]

Month Day Year  
8 10 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. WATSON

Signature  
[Signature]

Month Day Year  
8 10 06

GENERATOR

TRANSPORTER

FACILITY

157

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. . . . .

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 448-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
. . . . .

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
2.0 T

b.

. . . . .

c.

. . . . .

d.

. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118639 Transaction# 1266121  
15 Net Weight: 20.11  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8888

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
D. Taylor  
Month Day Year  
08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Rick Trotman

Signature  
Rick Trotman  
Month Day Year  
08/10/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year  
. . . . .

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. Watson

Signature  
T. Watson  
Month Day Year  
08/10/06

GENERATOR

TRANSPORTER

FACILITY

152

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23866

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 866-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 126 6123  
16 Net Weight 19.63  
Emergency Contact: Capitol Environmental Services, Inc. 302 862-8999

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
D.P. Taylor

Month Day Year  
08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
Cheryl Bates

Signature  
Cheryl Bates

Month Day Year  
8/10/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. Watson

Signature  
T. Watson

Month Day Year  
8/10/06

GENERATOR  
TRANSPORTER  
FACILITY

153

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2787

Site:  
Paradise Creek

4. Generator's Phone (757) 446-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23660

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-865-6070

11. Waste Shipping Name and Description

a.	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
Non RCRA, Non DOT Soil contaminated with Wood Debris		DT	20	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110530 Transaction#: 1266128  
18 Net Weight: 20.64  
Emergency Contact: Capital Environmental Services, Inc. 302-652-3999

16. 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.

Printed/Typed Name: Doug Taylor Signature: D.P. Taylor Month: 08 Day: 06 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Signature: Month: Day: Year:

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

19. Discrepancy Indication Space

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

Printed/Typed Name: T. WATSON Signature: Month: 10 Day: 06 Year: 06

TRANSPORTER #2

GENERATOR  
TRANSPORTER  
FACILITY

6:51

154

<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>NOT REQUIRED</b>	Manifest Document No.	2. Page 1 of 1
3. Generator's Name and Mailing Address Commander, Navy Region Mid-Atlantic (CNRMA) 1610 Gilbert St., Norfolk, VA 23511-2737			Site: Paradise Creek	
4. Generator's Phone (757) 445-8703 Attn: Rob Schonk		6. US EPA ID Number <b>NOT REQUIRED</b>	A. Transporter's Phone 757-448-2781	
5. Transporter 1 Company Name CR4 Trucking		7. Transporter 2 Company Name	B. Transporter's Phone	
9. Designated Facility Name and Site Address Bethel Sanitary Landfill 100 North Park Ln. Hampton, VA 23058		10. US EPA ID Number <b>NOT REQUIRED</b>	C. Facility's Phone 757 865-8070	
11. Waste Shipping Name and Description		12. Containers	13. Total Quantity	14. Unit Wt/Vol
a. Non RCRA, Non DOT Soil contaminated with Wood Debris		No. Type		T
b.				
c.				
d.				
D. Additional Descriptions for Materials Listed Above			E. Handling Codes for Wastes Listed Above	
15. Special Handling Instructions and Additional Information Project# 118538 Transaction# 154 1266138 SWT 34 Net Weight 42840 21.42 Emergency Contact: Capital Environmental Services, Inc. 302 652-8998				
16. 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.				
Printed/Typed Name Dore Taylor		Signature D.P. Taylor		Month Day Year . . .
17. Transporter 1 Acknowledgement of Receipt of Materials				
Printed/Typed Name Steve Carter		Signature Steve Carter		Month Day Year 8/10/00
18. Transporter 2 Acknowledgement of Receipt of Materials				
Printed/Typed Name		Signature		Month Day Year . . .
19. Discrepancy Indication Space				
20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.				
Printed/Typed Name T. Watson		Signature T. Watson		Month Day Year 8/00

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

155

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2797

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

C&M Trucking

NOT REQUIRED.

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

C. Facility's Phone

Bethel Sanitary Landfill

100 North Park Ln.

Hampton, VA 23666

NOT REQUIRED.

757-866-6070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No.

Type

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 1266 137

SNT33

Net Weight: 1658

Emergency Contact: Capital Environmental Services, Inc. 302 652-9000

16. 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.

Printed/Typed Name

Signature

Month Day Year

DOUG TAYLOR

[Signature]

08 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

T. WATSON

[Signature]

8 10 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

156

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 685-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1266138  
SNT29 Net Weight: 1843  
Emergency Contact: Capital Environmental Services, Inc. 302 662-8899

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
[Signature] Month Day Year 08 09 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Loren Edwards

Signature  
[Signature] Month Day Year 8 10 06

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. Watson

Signature  
[Signature] Month Day Year 8 10 06

GENERATOR  
TRANSPORTER  
FACILITY

157

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (767) 446-5703 Attn: Bob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-442-7761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln  
Hampton, VA 23066

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116339 Transaction# 1266142  
SN732 Net Weight: 18.41  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8050

16. 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.

Printed/Typed Name  
Dawn Taylor

Signature  
D. Taylor  
Month Day Year  
08/00/00

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. WATSON

Signature  
T. Watson  
Month Day Year  
7/10/06

GENERATOR

TRANSPORTER

FACILITY

158

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. . . . .

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8700 Attn: Rob Schenk

5. Transporter 1 Company Name  
CBH Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-445-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
. . . . .

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

2 DT 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project # 118350 Transaction# 1266145  
SN731 Net Weight 19.22  
Emergency Contact: Cantor Environmental Services, Inc. 302 852-8902

16. 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.

Printed/Typed Name  
Dale Taylor

Signature  
[Signature]

Month Day Year  
09/0/05

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. W. [Signature]

Signature  
[Signature]

Month Day Year  
8/10/06

GENERATOR

TRANSPORTER

FACILITY

159

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-855-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1266 146  
14 Net Weight: 23.94  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8899

16. 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.

Printed/Typed Name: Doug Taylor Signature: D. Taylor Month: 08 Day: 10 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Demetrius Martin Signature: Demetrius Martin Month: 08 Day: 10 Year: 06

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name: Signature: Month: Day: Year:

GENERATOR

TRANSPORTER

FACILITY

160

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8705 Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23068

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757 865-6070

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

20

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118533

Transaction# 1266648

SNT 28

Net Weight: 19.37

Emergency Contact: Capital Environmental Services, Inc. 502 852-8000

16. 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.

Printed/Typed Name

Signature

Month Day Year

12/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

12/10/06

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

161

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Bob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED.

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
NOT REQUIRED.

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number  
NOT REQUIRED.

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530  
SAT30  
Transaction# 1266156  
Net Weight 20.67  
Emergency Contact: Capital Environmental Services, Inc. 302-852-8999

Gross 66720  
Tare 25380  
Net 41340  
20.67 Ton

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
[Signature] Month Day Year  
08 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Wayne Baslow

Signature  
Wayne Baslow Month Day Year  
08 10 06

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. WATSON

Signature  
[Signature] Month Day Year  
08 10 06

GENERATOR

TRANSPORTER

FACILITY

162

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn. Rob Schonk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-448-2761

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23866

10. US EPA ID Number  
C. Facility's Phone: 757 865-0070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110539 Transaction# 1266177  
15 Net Weight 20.98  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8998

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
D.P. Taylor  
Month Day Year  
08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Rick Troutman

Signature  
Rick Troutman  
Month Day Year  
08/10/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year  
8/10/06

GENERATOR

TRANSPORTER

FACILITY

163

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

C&H Trucking

NOT REQUIRED.

757-445-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

C. Facility's Phone

Bethel Sanitary Landfill

100 North Park La.

Hampton, VA 23666

NOT REQUIRED.

757-865-0070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No.

Type

DT

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 2266179

16

Net Weight: 18.6g

Emergency Contact: Capital Environmental Services, Inc. 302-852-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year

Doug Taylor

DPTaylor

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

Tom Jones

Tom Jones

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

164

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schork

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-445-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1266181

11

Net Weight: 19.58

Emergency Contact: Capitol Environmental Services, Inc. 302-862-8009

16. 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.

Printed/Typed Name

DOVE TAYLOR

Signature

[Signature]

Month Day Year  
08 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year  
08 10 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

T. WATSON

Signature

[Signature]

Month Day Year  
11 10 06

GENERATOR

TRANSPORTER

FACILITY

165

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757 855-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116638 Transaction# 1266184  
18 Net Weight 20.81  
Emergency Contact Capital Environmental Services, Inc. 302 892-8085

16. 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.

Printed/Typed Name  
DOUG TAYLOR

Signature  
DPTaylor

Month Day Year  
08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. WATSON

Signature  
T. Watson

Month Day Year  
8/10/06

GENERATOR

TRANSPORTER

FACILITY

166

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23611-2737

Site  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 866-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1266209

SNT 33

Net Weight 1952

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

Doug Taylor

Signature

*D. Taylor*

Month Day Year

08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

08/10/06

19. Discrepancy Indication Space

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

Printed/Typed Name

T. WATSON

Signature

*T. Watson*

Month Day Year

08/10/06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

167

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 4

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-440-2781

7. Transporter 2 Company Name

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln  
Hampton, VA 23886

C. Facility's Phone: 757-866-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 1266 211  
SWT34 Net Weight 41500 20.75  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name: Dave Taylor

Signature: DPTaylor

Month Day Year: 08 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Steve Courney

Signature: Steve Courney

Month Day Year: 8 10 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name: T. WATSON

Signature: T. Watson

Month Day Year: 10 10 06

GENERATOR

TRANSPORTER

FACILITY

168

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23658

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 855-6070

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115538

Transaction# 1266 226

SWT 29

Net Weight 17.91

Emergency Contact: Capital Environmental Services, Inc. 302 852-8980

16. 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.

Printed/Typed Name

Doug Taylor

Signature

*D. Taylor*

Month Day Year

08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Lawrence Edwards*

Signature

*L. Edwards*

Month Day Year

08/10/06

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

169

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23514-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 448-8700 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23686

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118536 Transaction# 1266241  
14 Net Weight 24.33  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8989

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
[Signature]

Month Day Year  
08 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Dorothy [Signature]

Signature  
[Signature]

Month Day Year  
08 10 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

170

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2701

7. Transporter 2 Company Name

8. US EPA ID Number  
NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118538

Transaction# 1266232

SWT 32

Net Weight: 16.48

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name  
DOUG TAYLOR

Signature  
D.P. Taylor

Month Day Year  
08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. WATSON

Signature  
T. Watson

Month Day Year  
08/10/06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

171

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (COMNA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 446-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23606

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
767-895-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

..... OT ..... 20 T

b. ....

c. ....

d. ....

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1266239  
SNT 28 Net Weight 17.48  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name: Dave Taylor Signature: D.P. Taylor Month Day Year: 08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Signature: Month Day Year: .....

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: R. Cuffee Signature: R. Cuffee Month Day Year: 8/10/06

19. Discrepancy Indication Space

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

Printed/Typed Name: T. WATSON Signature: T. Watson Month Day Year: 10/10/06

GENERATOR

TRANSPORTER

FACILITY

172

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-3761

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23665

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA Non DOT Soil contaminated with Wood Debris

DT

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118520

Transaction# 1266249

Gross 61960  
Tare 25600  
Net 36360

SNT 30

Net Weight 18.18

18.18 Ton

Emergency Contact: Capital Environmental Services, Inc. 302 652-8099

16. 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.

Printed/Typed Name

Signature

Month Day Year

DOUG TAYLOR

D. Taylor

.....

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

WAYNE BASHAW

Wayne Bashaw

8 10 06

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

T. WATSON

T. Watson

8 10 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

173

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (787) 445-8703

Attn: Rob Schunk

5. Transporter 1 Company Name

C&H Trucking

6.

US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2761

7. Transporter 2 Company Name

8.

US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10.

US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 112535

Transaction# 1266252

SWT 31

Net Weight: 17.7

Emergency Contact: Capital Environmental Services, Inc. 302-852-8006

16. 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.

Printed/Typed Name

Signature

Month Day Year

08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

08/10/06

GENERATOR

TRANSPORTER

FACILITY

174

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

OT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110530

Transaction# 1766262

16

Net Weight: 20.36

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
D. Taylor

Month Day Year  
08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
T. Baker

Signature  
T. Baker

Month Day Year  
8/10/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. Watson

Signature  
T. Watson

Month Day Year  
10/10/06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

175

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2701

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DDT Soil contaminated with Wood Debris

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

DT  
20 T

b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1286350

15

Net Weight 20.11

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name  
Doug Taylor

Signature  
[Signature]

Month Day Year  
08 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
L. Adams

Signature  
[Signature]

Month Day Year  
08 18 06

GENERATOR

TRANSPORTER

FACILITY

176

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539 Transaction# 1268 282  
Net Weight 21.06  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
R M HUNT

Signature

Month Day Year  
06 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year  
08 10 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. WATSON

Signature

Month Day Year  
08 10 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

177

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-885-8070

11. Waste Shipping Name and Description

12. Containers  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No. Type  
DT  
20<sup>T</sup>

b.

No. Type

c.

No. Type

d.

No. Type

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1266287  
18 Net Weight: 22.41  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8890

16. 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.

Printed/Typed Name  
R M HAART

Signature  
Month Day Year  
08 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. WATSON

Signature  
Month Day Year  
10 10 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

**NON-HAZARDOUS WASTE MANIFEST**

178

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-3737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-445-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-883-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA Non DOT Soil contaminated with Wood Debris

DT  
20

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 112539

Transaction# 1266313

SMT 34

Net Weight 41100

20.55

Emergency Contact: Capital Environmental Services, Inc. 302 552-6199

16. 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.

Printed/Typed Name

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

179

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schank

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Ethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 126 6312

SWT 29

Net Weight 17.96

Emergency Contact: Capital Environmental Services, Inc. 302 652-8099

16. 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.

Printed/Typed Name

RM Hunt

Signature

[Signature]

Month Day Year

10 8 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Kevin Edwards

Signature

[Signature]

Month Day Year

8 17 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

. . .

19. Discrepancy Indication Space

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

Printed/Typed Name

T. WATSON

Signature

[Signature]

Month Day Year

8 10 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

180

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Bob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-442-3761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23086

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		
a.	Non RCRA, Non DOT Soil contaminated with Wood Debris	20	T
b.			
c.			
d.			

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115539 Transaction# 1226 323  
SWT33 Net Weight: 14.31  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8989

16. 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.

Printed/Typed Name Dove Taylor	Signature D. Taylor	Month Day Year 08/10/06
-----------------------------------	------------------------	----------------------------

17. Transporter 1 Acknowledgement of Receipt of Materials	Printed/Typed Name	Signature	Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials	Printed/Typed Name	Signature	Month Day Year
			08/10/06

19. Discrepancy Indication Space

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

Printed/Typed Name T. WATSON	Signature T. Watson	Month Day Year 08/10/06
---------------------------------	------------------------	----------------------------

GENERATOR

TRANSPORTER

FACILITY

181

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schrank

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-449-2761

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23665  
10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity: 2.0  
14. Unit Wt/Vol: T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction#: 1266321  
SWT 32 Net Weight: 15.13  
Emergency Contact: Capital Environmental Services, Inc. 302 662-8999

16. 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.

Printed/Typed Name: Doug Taylor

Signature: [Signature] Month: 08 Day: 10 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name: J. WATSON

Signature: [Signature] Month: 08 Day: 10 Year: 06

TRANSPORTER #2

GENERATOR  
TRANSPORTER  
FACILITY

182

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CARMA)  
1510 Gilbert St, Norfolk, VA 23511-2797

Site:

Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-445-3781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bahnet Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DDT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118889

Transaction# 1266333

SNT 28

Net Weight: 15.88

Emergency Contact: Capital Environmental Services, Inc. 802 852-8999

16. 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.

Printed/Typed Name

Doug Taylor

Signature

[Signature]

Month Day Year

08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

8/10/06

19. Discrepancy Indication Space

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

Printed/Typed Name

T. Watson

Signature

[Signature]

Month Day Year

8/10/06

GENERATOR

TRANSPORTER

FACILITY

183

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Ron Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115639 Transaction# 126 6328  
14 Net Weight 19.75  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name  
Dore Taylor

Signature  
D Taylor  
Month Day Year  
08 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Dore Taylor

Signature  
Dore Taylor  
Month Day Year  
08 10 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. WATSON

Signature  
T. Watson  
Month Day Year  
08 10 06

TRANSPORTER #2

GENERATOR  
TRANSPORTER  
FACILITY

184

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-5703 Attn: Rob Schonk

5. Transporter 1 Company Name  
CAH Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
20

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115530

Transaction# 1266341  
Net Weight 19.34 Ton

Drive 63900  
Tare 25220  
Net 38680  
19.34T

Emergency Contact: Capital Environmental Services, Inc. 302-852-8899

16. 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.

Printed/Typed Name *RM Han*

Signature *RM Han*

Month Day Year  
08/10/06

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year  
8/10/06

19. Discrepancy Indication Space

FACILITY

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

Printed/Typed Name  
T. WATSON

Signature *T. Watson*

Month Day Year  
8/10/06

TRANSPORTER #2

185

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Tackling

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110539 Transaction# 120 638-1  
SNT 31 Net Weight 18.47  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
J.M. HANCOCK

Signature  
Month Day Year  
08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Signature  
Month Day Year

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

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. WATSON

Signature  
Month Day Year  
8/10/06

GENERATOR

TRANSPORTER

FACILITY

186

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2797

Site:

Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

DT

20

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110538

Transaction#:

1266376

11

Net Weight:

19.88

Emergency Contact: Capitol Environmental Services, Inc. 802-852-8999

16. 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.

Printed/Typed Name

Rob Schonk

Signature

[Signature]

Month Day Year

08 | 10 | 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

8 | 10 | 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

. | . | .

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

. | . | .

TRANSPORTER

FACILITY

TRANSPORTER #2

187

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CMRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23068

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-885-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

. . . DT . 20 T

b.

. . . . .

c.

. . . . .

d.

. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 1266404  
18 Net Weight 18.97  
Emergency Contact: Capital Environmental Services, Inc. 302 862-8099

16. 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.  
Printed/Typed Name BM HART Signature [Signature] Month Day Year 08 10 08

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name Signature Month Day Year

TRANSPORTER #2

GENERATOR  
TRANSPORTER  
FAC

188

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-448-2781**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23668**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 885-6070**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

No. Type Total Quantity Unit Wt/Vol  
**DT 20 T**

b.

No. Type Total Quantity Unit Wt/Vol

c.

No. Type Total Quantity Unit Wt/Vol

d.

No. Type Total Quantity Unit Wt/Vol

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# 1266386  
16 Net Weight 18.22  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8888

16. 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.

Printed/Typed Name **B M Hunt**

Signature **B M Hunt** Month Day Year **08 10 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name **T. Watson**

Signature **T. Watson** Month Day Year **8 10 06**

GENERATOR

TRANSPORTER

FACILITY

108

189

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 767 ) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
767-448-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23656

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757-885-6070

11. Waste Shipping Name and Description

12. Containers	13. Total Quantity	14. Unit Wt/Vol
a.	20	T
b.		
c.		
d.		

Non RCRA, Non DOT Soil contaminated with Wood Debris

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118538

Transaction# 1266409

Net Weight 36700 1835

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name *Rob Schank*

Signature *[Signature]*

Month Day Year 08 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Steve Coulter*

Signature *[Signature]*

Month Day Year 08 10 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name *T. Watson*

Signature *[Signature]*

Month Day Year 08 10 06

GENERATOR

TRANSPORTER

FACILITY

190

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-442-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 855-5070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1266 409

SNT 29

Net Weight 16.89

Emergency Contact: Capital Environmental Services, Inc. 302 552-8999

16. 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.

Printed/Typed Name R M Hart

Signature [Signature]

Month Day Year 08 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name Dawn Edwards

Signature [Signature]

Month Day Year 8 10 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name T WATSON

Signature [Signature]

Month Day Year 8 10 06

GENERATOR

TRANSPORTER

FACILITY

191

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Bob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-442-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757 885-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

DT  
20 T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 1266425

SMT 33

Net Weight: 16.77

Emergency Contact: Capital Environmental Services, Inc. 302 552-8999

16. 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.

Printed/Typed Name

*RM Harris*

Signature

*[Signature]*

Month Day Year  
08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

*T. WATSON*

Signature

*[Signature]*

Month Day Year  
8/10/06

GENERATOR

TRANSPORTER

FACILITY

192

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767-449-2761**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23668**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 865-8070**

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

DT  
**20** T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1266430

14

Net Weight 21.99

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8899

16. 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.

Printed/Typed Name **RM HART**

Signature *[Signature]*

Month Day Year  
**08 10 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **SONENICK MANOSI**

Signature *[Signature]*

Month Day Year  
**08 10 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name **T. WATSON**

Signature *[Signature]*

Month Day Year  
**8 10 06**

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

193

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commodore, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schank

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: NOT REQUIRED

A. Transporter's Phone: 757-449-2781

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

B. Transporter's Phone: . . . . .

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666  
10. US EPA ID Number: NOT REQUIRED

C. Facility's Phone: 757 685-8070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

. . . . . DT 20 T

b. . . . .

. . . . .

c. . . . .

. . . . .

d. . . . .

. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1266438  
SNT 28 Net Weight 17.42  
Emergency Contact: Capital Environmental Services, Inc. 802 852-8000

16. 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.

Printed/Typed Name: R M HART

Signature: [Signature] Month Day Year: 08/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: . . . . .

Signature: . . . . . Month Day Year: . . . . .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: R. CUFFEE

Signature: R. Cuffee Month Day Year: 8/10/06

19. Discrepancy Indication Space

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

Printed/Typed Name: T. WATSON

Signature: [Signature] Month Day Year: 8/10/06

GENERATOR  
TRANSPORTER  
FACILITY

HP1

194

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
**Paradise Creek**

4. Generator's Phone (757) 445-6709 Attn: Rob Schonk

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-449-2781**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 865-6070**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unif Wt/Vol

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539  
**SNT 30**  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

Transaction# 1266442  
Net Weight 19.81

Does to 4,900  
Tare 25,250  
Net 19.81

16. 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.

Printed/Typed Name **R M HART**

Signature *R M Hart* Month Day Year **08/10/06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name **WAYNE BASHAW**

Signature *Wayne Bashaw* Month Day Year **08/10/06**

19. Discrepancy Indication Space

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

Printed/Typed Name **T. WATSON**

Signature *T. Watson* Month Day Year **08/10/06**

GENERATOR  
TRANSPORTER  
FACILITY

195

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: NOT REQUIRED

A. Transporter's Phone: 757-449-2781

7. Transporter 2 Company Name: \_\_\_\_\_  
8. US EPA ID Number: \_\_\_\_\_

B. Transporter's Phone: \_\_\_\_\_

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number: NOT REQUIRED  
C. Facility's Phone: 757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

OT 20 T

b. \_\_\_\_\_

\_\_\_\_\_

c. \_\_\_\_\_

\_\_\_\_\_

d. \_\_\_\_\_

\_\_\_\_\_

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction#: 1266443  
15 Net Weight: 19.23  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8090

16. 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.

Printed/Typed Name: R M Harris

Signature: [Signature] Month Day Year: 08 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Month Day Year: \_\_\_\_\_

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Month Day Year: \_\_\_\_\_

19. Discrepancy Indication Space

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

Printed/Typed Name: T. WATSON

Signature: [Signature] Month Day Year: 11 10 06

TRANSPORTER #2

8-10-06

GENERATOR  
TRANSPORTER  
FACILITY

196

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110539 Transaction# 1266460  
11 Net Weight 21.01  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8900

16. 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.

Printed/Typed Name *RM HART*

Signature *[Signature]*

Month Day Year  
08 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
08 10 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name *T. WATSON*

Signature *[Signature]*

Month Day Year  
08 10 06

GENERATOR  
TRANSPORTER  
FACILITY

197

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1  
of 1

3. Generator's Name and Mailing Address:

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-440-7761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23006

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757-865-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

DT  
20  
T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#

1266455

18

Net Weight

19.55

Emergency Contact: Capital Environmental Services, Inc. 302-552-8999

16. 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.

Printed/Typed Name

B.M. Hart

Signature

[Signature]

Month Day Year

08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

T. WATSON

Signature

[Signature]

Month Day Year

18/10/06

GENERATOR  
TRANSPORTER  
FACILITY

TRANSPORTER #2

198

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703** Attn: **Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-449-2761**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park Ln.**  
**Hampton, VA 23666**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 865-8070**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# **110530** Transaction# **1266 464**  
**31** Net Weight: **17.52**  
Emergency Contact: **Capitol Environmental Services, Inc. 302 852-8999**

16. 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.

Printed/Typed Name **RM HANT**

Signature *[Signature]* Month Day Year **08 10 05**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name **T. WATSON**

Signature *[Signature]* Month Day Year **12 10 06**

GENERATOR

TRANSPORTER

FACILITY

199

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23665

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# 1269405  
SAT 32 Net Weight 17.7  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8000

16. 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.  
Printed/Typed Name *RM Kant* Signature *RM Kant* Month Day Year 08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name *T. WATSON* Signature *T. Watson* Month Day Year 18/10/06

GENERATOR  
TRANSPORTER  
FACILITY

200

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1266479  
16 Net Weight 20.25  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8989

16. 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.

Printed/Typed Name R M Hart

Signature [Signature] Month Day Year 08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name Tom Bates

Signature [Signature] Month Day Year 8/10/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name L Adams

Signature [Signature] Month Day Year 10/10/06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

201

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23660

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1266486  
34 Net Weight 42500 21.29  
Emergency Contact: Capital Environmental Services, Inc. 302-552-8000

16. 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.

Printed/Typed Name  
B M Hart

Signature  
Month Day Year  
08 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Steve Cauther

Signature  
Month Day Year  
8 10 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name  
L Adams  
Signature  
Month Day Year  
8 10 06

GENERATOR  
TRANSPORTER  
FACILITY

202

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
DT T

b.

20

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# 1266487  
295nt Net Weight 17.94  
Emergency Contact: Capital Environmental Services, Inc. 302 952-8999

16. 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.  
Printed/Typed Name *R M Hunt* Signature *R M Hunt* Month Day Year 08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Dawn Edwards* Signature *Dawn Edwards* Month Day Year 08/10/06

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name *J Adams* Signature *J Adams* Month Day Year 08/10/06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

203

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone (**757**) **445-6703** Attn: **Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-440-2764**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park Ln.**  
**Hampton, VA 23866**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 865-8070**

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

13. Total Quantity  
**20**

14. Unit Wt/Vol  
**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 118539** **Transaction# 1266802**  
**SWT 33** **Net Weight 1784**  
**Emergency Contact, Capital Environmental Services, Inc. 302 652-8999**

16. 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.

Printed/Typed Name **RM HART**

Signature *[Signature]*

Month Day Year  
**08 10 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
**08 10 06**

19. Discrepancy Indication Space

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

Printed/Typed Name **K Adams**

Signature *[Signature]*

Month Day Year  
**10 10 06**

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

204

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
151A Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-0070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction#: 1266503  
14 Net Weight: 23.33  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8898

16. 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.

Printed/Typed Name R M HANT

Signature [Signature]

Month Day Year 08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name DOMENICK MANCINI

Signature [Signature]

Month Day Year 08/10/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name Adams

Signature [Signature]

Month Day Year 10/10/06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

205

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1266504  
SWT28 Net Weight: 17.03  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8000

16. 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.

Printed/Typed Name *R.M. Hart*

Signature *[Signature]* Month Day Year 08 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *R. Cluffee*

Signature *[Signature]* Month Day Year 8 10 06

19. Discrepancy Indication Space

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

Printed/Typed Name *R. Adams*

Signature *[Signature]* Month Day Year 8 11 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

200

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23068

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No. Type Total Quantity Unit Wt/Vol  
... DT 20 T

b.

No. Type Total Quantity Unit Wt/Vol

c.

No. Type Total Quantity Unit Wt/Vol

d.

No. Type Total Quantity Unit Wt/Vol

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116538 Transaction# 1266529  
SWT 28 Net Weight: 16.49  
Emergency Contact Capital Environmental Services, Inc. 302 662-8900

16. 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.

Printed/Typed Name  
RM HARRIS

Signature  
RM Harris  
Month Day Year  
08/1/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
R. CUFFEE

Signature  
R. Cuffee  
Month Day Year  
8/1/06

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. WATSON

Signature  
T. Watson  
Month Day Year  
8/1/06

GENERATOR

TRANSPORTER

FACILITY

207

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757-865-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

DT

20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116538

Transaction# 1266538

14

Net Weight: 22.50

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8990

16. 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.

Printed/Typed Name

R M HART

Signature

*R M Hart*

Month Day Year  
08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Q. Cross

Signature

*Q. Cross*

Month Day Year  
08 11 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

T. WATSON

Signature

*T. Watson*

Month Day Year  
08 11 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

208

**N-HAZARDOUS  
STE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone (757) 446-6703 Attn: Rob Schenk

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking

A. Transporter's Phone  
757-442-2781

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name

B. Transporter's Phone

8. US EPA ID Number

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

C. Facility's Phone  
757-685-8070

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description  
a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
b.  
c.  
d.

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
	DT		T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1266534  
11 Net Weight 19.90  
Emergency Contact: Capitol Environmental Services, Inc. 302-652-8999

16. 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.

Printed/Typed Name *RM HART*

Signature *[Signature]*

Month Day Year  
12 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
12 11 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name *T. WATSON*

Signature *[Signature]*

Month Day Year  
12 11 06

GENERATOR  
TRANSPORTER  
FACILITY

209

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1  
of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schank

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-3761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

DT 20 T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115539

16

Transaction#

1266537

Net Weight:

19,45

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

R M Hant

Signature

[Signature]

Month Day Year

08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

T. Bates

Signature

[Signature]

Month Day Year

11 11 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

T. WATSON

Signature

[Signature]

Month Day Year

11 11 06

TRANSPORTER

FACILITY

TRANSPORTER #2

210

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name **C&H Trucking**  
6. US EPA ID Number **NOT REQUIRED**

A. Transporter's Phone  
**767-449-2761**

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23060**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 865-8070**

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

DT  
**20** T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# **116530** Transaction# **1266538**  
**15** Net Weight **17.99**  
Emergency Contact: Capital Environmental Services, Inc. 302 652-6999

16. 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.

Printed/Typed Name **R M Hunt**

Signature **[Signature]** Month Day Year **08/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Rick [Signature]**

Signature **[Signature]** Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name **T. WATSON**

Signature **[Signature]** Month Day Year **8/11/06**

GENERATOR

TRANSPORTER

FACILITY

211

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
CBH Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23586

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

... DT 20 T

b.

...

c.

...

d.

...

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1206544  
SWT 34 Net Weight: 41500 2075  
Emergency Contact: Capital Environmental Services, Inc. 302-652-8998

16. 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.

Printed/Typed Name  
RM Hant

Signature  
RM Hant  
Month Day Year  
08/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Steve Coulter

Signature  
Steve Coulter  
Month Day Year  
8/11/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. Watson

Signature  
T. Watson  
Month Day Year  
8/11/06

GENERATOR

TRANSPORTER

FACILITY

212

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone ( **757** ) **445-5703** / **Attn: Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-449-2761**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23666**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 865-8070**

11. Waste Shipping Name and Description

12. Containers No. Type

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

13. Total Quantity  
**20**

14. Unit Wt/Vol  
**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# **118539** Transaction# **1266545**  
**SNT 29** Net Weight: **17.18**  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name **RM HART**

Signature *[Signature]* Month Day Year **08/1/06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Dawn Edwards**

Signature *[Signature]* Month Day Year **8/1/06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name **T. WATSON**

Signature *[Signature]* Month Day Year **8/1/06**

GENERATOR  
TRANSPORTER  
FACILITY

213

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703** Attn: **Rob Schenk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-449-2761**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23066**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 885-8070**

11. Waste Shipping Name and Description

12. Containers No. Type

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

13. Total Quantity  
**20**

14. Unit Wt/Vol  
**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# **116539** Transaction# **1766548**  
**SNT 33** Net Weight: **1770**  
Emergency Contact: **Capitol Environmental Services, Inc. 302 852-8000**

16. 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.

Printed/Typed Name **R M HANT**

Signature *[Signature]*

Month Day Year  
**08 11 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
**T. INATSON**

Signature *[Signature]*

Month Day Year  
**11 11 06**

GENERATOR

TRANSPORTER

FACILITY

214

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-442-2761**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23666**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 865-6070**

11. Waste Shipping Name and Description

12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

12. Containers No. Type Total Quantity Unit Wt/Vol  
... DT 20 T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118538 Transaction# 1266549  
**SNT32** Net Weight: 16.97  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8990

16. 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.

Printed/Typed Name  
**R M HART**

Signature  
*[Signature]* Month Day Year  
**08/11/06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
**T. WATSON**

Signature  
*[Signature]* Month Day Year  
**11/14/06**

GENERATOR  
TRANSPORTER  
FACILITY

215

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23065

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757-865-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

DT  
70 T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project # 118539

Transaction#: 1266553

Net Weight 16-21

Emergency Contact: Capitol Environmental Services, Inc. 902 652-8090

16. 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.

Printed/Typed Name

Rm Hart

Signature

*[Signature]*

Month Day Year  
08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

T. Watson

Signature

*[Signature]*

Month Day Year  
8 11 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

216

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
20  
14. Unit Wt/Vol  
T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1266854  
4 Net Weight 18.08  
Emergency Contact Capitol Environmental Services, Inc. 302 652-8909

16. 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.

Printed/Typed Name R M HART

Signature [Signature] Month Day Year 08/1/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name [Signature]

Signature [Signature] Month Day Year 08/1/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name T. WATSON

Signature [Signature] Month Day Year 8/1/06

GENERATOR  
TRANSPORTER  
FACILITY

217

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23060

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118538

Transaction# 1266587

18

Net Weight 20.62

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name R M HART

Signature [Signature]

Month Day Year 08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name [Signature]

Signature [Signature]

Month Day Year 8 11 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name [Signature]

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name T. WATSON

Signature [Signature]

Month Day Year 18 11 06

GENERATOR

TRANSPORTER

FACILITY

218

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2797  
4. Generator's Phone (757) 445-6709 Attn: Rob Schonk

Site:  
Paradise Creek

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-449-2761

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666  
10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757 885-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non-RCRA, Non DOT Soil contaminated with Wood Debris

DT 28 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1266560  
10 Net Weight 19.02  
Emergency Contact: Capital Environmental Services, Inc. 502 552-3038

16. 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.

Printed/Typed Name: R M Hester

Signature: [Signature] Month Day Year: 08/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name: T. WATSON

Signature: [Signature] Month Day Year: 08/11/06

GENERATOR

TRANSPORTER

FACILITY

219

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-448-3781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Gethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

. . . DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115530

3

Transaction#

1266581

Net Weight

17.18

Emergency Contact: Capital Environmental Services, Inc. 802 862-8999

16. 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.

Printed/Typed Name

RM Hart

Signature

[Signature]

Month Day Year  
08/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Malcolm J. Spivey

Signature

[Signature]

Month Day Year  
08/11/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

T. Watson

Signature

[Signature]

Month Day Year  
08/11/06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

220

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 748-5703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23660

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DDT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

DT

20

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118630

Transporter# 1266585

14

Net Weight 22.40

Emergency Contact: Capitol Environmental Services, Inc. 302 852-4999

16. 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.

Printed/Typed Name

RM HART

Signature

[Signature]

Month Day Year

08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

G. Cross

Signature

[Signature]

Month Day Year

08/11/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

T. WATSON

Signature

[Signature]

Month Day Year

08/11/06

TRANSPORTER

FACILITY

221

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1818 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 446-8709 Attn: Rich Schenk

5. Transporter 1 Company Name  
C&R Trucking

6. US EPA ID Number  
NOT REQUIRED.

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number  
NOT REQUIRED.

C. Facility's Phone  
757-805-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non SCRA Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Reg # 119570 Transaction# 1266590  
28 snl Net Weight 17.05  
Emergency Contact Capital Environmental Services Inc 302-552-8898

16. 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.

Printed/Typed Name  
SM 11/17

Signature  
[Signature]

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
R. Luffel

Signature  
R. Luffel

Month Day Year  
8 11 01

19. Discrepancy Indication Space

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

Printed/Typed Name  
T. Watson

Signature  
[Signature]

Month Day Year  
8 11 01

GENERATOR

TRANSPORTER

FACILITY

222

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking  
6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2781

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23060  
10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-885-0070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

OT 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1266596  
11 Net Weight 19.66  
Emergency Contact: Capitol Environmental Services, Inc. 802 852-8399

16. 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.

Printed/Typed Name R M Hart

Signature [Signature] Month Day Year 08/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name [Signature]

Signature [Signature] Month Day Year 08/11/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name T. WATSON

Signature [Signature] Month Day Year 08/11/06

GENERATOR  
TRANSPORTER  
FACILITY

TRANSPORTER #2

223

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-7781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-965-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

No.	Type	Total Quantity	Unit Wt/Vol
..	DT	2.0	T
..	..	..	..
..	..	..	..
..	..	..	..

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118530

Transactions:

1266 599

16

Net Weight:

19.75

Emergency Contact: Capitol Environmental Services, Inc. 802 652-9989

16. 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.

Printed/Typed Name

R M Hunt

Signature

[Signature]

Month Day Year  
05 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year  
05 11 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

WATSON

Signature

[Signature]

Month Day Year  
05 11 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

224

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2727

4. Generator's Phone (767) 445-6703

Attn: Bob Schenk

Site:  
Paradise Creek

5. Transporter 1 Company Name

CSH Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

767-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-866-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

. . . OT . . . 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116939

15

Transaction#

1266612

Net Weight

21.35

Emergency Contact: Capital Environmental Services Inc. 802 562-8008

16. 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.

Printed/Typed Name

RM HART

Signature

[Signature]

Month Day Year

08 11 00

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

225

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 443-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23058

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-889-8070

11. Waste Shipping Name and Description

12. Containers	13. Total Quantity	14. Unit Wt/Vol
a.	2.0	T
b.		
c.		
d.		

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118529  
Transporter# 1266621  
SN134  
Net Weight 42420 21.21  
Emergency Contact: Capito Environments Services, Inc. (702) 542-8800

16. 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.

Printed/Typed Name  
M. H. H.

Signature  
Month Day Year  
08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
Steve Brown

Signature  
Month Day Year  
08 11 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year

GENERATOR

TRANSPORTER

FACILITY

226

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. . . . .

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1010 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8700 Amy Rob Schack

5. Transporter 1 Company Name C&H Trucking 6. US EPA ID Number NOT REQUIRED

A. Transporter's Phone 757-445-2781

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone 757-885-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

. . . . . DT . . . . . 7.0 T

b.

. . . . . . . . . . .

c.

. . . . . . . . . . .

d.

. . . . . . . . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118633 Transaction# 1266619  
NET 29 Net Weight 16.75  
Emergency Contact: Capital Environmental Services, Inc. 302-652-8000

16. 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.

Printed/Typed Name *RM HART*

Signature *[Signature]* Month Day Year 08/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Douglas Edwards*

Signature *[Signature]* Month Day Year 8/11/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year

GENERATOR

TRANSPORTER

FACILITY

227

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b. . . . .

c. . . . .

d. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116639

Transaction# 1266628

SNT33

Net weight 1645

Emergency Contact: Capital Environmental Services, Inc. 302.582.8093

16. 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.

Printed/Typed Name R M Hagan

Signature [Signature] Month Day Year 08/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year

GENERATOR

TRANSPORTER

FACILITY

228

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Bob Schrank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED.

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED.

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118839 Transaction# 1206626  
SWT 32 Net Weight 17.14  
Emergency Contact: Capital Environmental Services, Inc. 302-852-8900

16. 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.  
Printed/Typed Name *RM HART* Signature *[Signature]* Month Day Year 08/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name Signature Month Day Year

GENERATOR

TRANSPORTER

FACILITY

229

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2757

Site:

Paradise Creek

4. Generator's Phone (757) 445-8702

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-448-2751

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
400 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 885-8070

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Mixed Debris

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118579

Transcript# 12666639

5

Net Weight: 17.63

Emergency Contact: Capital Environmental Services Inc 302 882-8909

16. 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.

Printed/Typed Name

LEW HARRIS

Signature

[Signature]

Month Day Year

08/16/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

10/16/06

GENERATOR

TRANSPORTER

FACILITY

230

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1

of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1810 Gilbert St., Norfolk, VA 23514-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 446-8703

Attn: Rob Schrock

5. Transporter 1 Company Name

CAH Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-446-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Harrison, VA 23606

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-895-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

. . . . . DT . 20 T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118599

Transaction# 12666647

4

Net Weight 18.05

Emergency Contact: Capital Environmental Services, Inc. 802-557-8999

16. 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.

Printed/Typed Name

RM HART

Signature

[Signature]

Month Day Year

08/11/05

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Jonathan M...

Signature

[Signature]

Month Day Year

08/11/05

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

. . . . .

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

. . . . .

GENERATOR

TRANSPORTER

FACILITY

231

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6706 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 1206683  
18 Net Weight 21.50  
Emergency Contact: Caprol Environmental Services, Inc. 302-857-8980

16. 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.

Printed/Typed Name R.M. HART

Signature [Signature] Month Day Year 08 17 08

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name [Signature]

Signature [Signature] Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name [Signature]

Signature [Signature] Month Day Year 08 17 08

GENERATOR

TRANSPORTER

FACILITY

232

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6705 Attn: Rob Schrock

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-443-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln. # 4  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-888-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 113530 Transaction# 1266669  
14 Net Weight: 24.36  
Emergency Contact: Capital Environmental Services (no. 302-652-8900)

16. 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.  
Printed/Typed Name: *R M Hunt* Signature: *[Signature]* Month: 08 Day: 10 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: *D. Cross* Signature: *[Signature]* Month: 08 Day: 10 Year: 06

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name: Signature: Month: Day: Year:

GENERATOR

TRANSPORTER

FACILITY

233

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
CRH Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 855-8370

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project # 118538  
Transaction# 1266693  
3  
Net Weight 17.48  
Emergency Contact: Capto: Environmental Services Inc 502 852-8900

16. 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.

Printed/Typed Name  
Rm Hart

Signature  
*[Signature]*

Month Day Year  
08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
*[Signature]*

Signature  
*[Signature]*

Month Day Year  
08 11 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR  
TRANSPORTER  
FACILITY

236

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8700 Attn: Bob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED.

A. Transporter's Phone  
757-449-7751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED.

C. Facility's Phone  
757-365-6070

11. Waste Shipping Name and Description

12. Containers No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
20  
14. Unit Wt/Vol  
T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110590 Transaction# 1266689  
10 Net Weight 21.65  
Emergency Contact: Capital Environmental Services Inc. 502 853-8900

16. 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.

Printed/Typed Name  
R M HART

Signature  
Month Day Year  
10/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year

GENERATOR

TRANSPORTER

FACILITY

235  
280

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1515 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8700 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 855-8070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

.. . 20 T

b.

.. .

c.

.. .

d.

.. .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project # 116639  
305 NT  
Emergency Contact: Capital Environmental Services, Inc 802 852-8006  
12666 97  
Net Weight 20.29

16. 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.

Printed/Typed Name  
Rm Hunt

Signature  
Month Day Year  
08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Wayne Baskin

Signature  
Month Day Year  
08 11 06

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year

GENERATOR  
TRANSPORTER  
FACILITY

736

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (767) 445-8703 Attn: Bob Schank

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

767-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

767-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

No.	Type	Total Quantity	Unit Wt/Vol
28	DT	28	T
.	.	.	.
.	.	.	.
.	.	.	.
.	.	.	.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project # 115533

Transaction # 1266695

28 SMT

Net Weight 17.61

Emergency Contact: Capital Environmental Services, Inc. 802-852-8500

16. 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.

Printed/Typed Name

RAM [Signature]

Signature

[Signature]

Month Day Year

08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

08 11 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

R. [Signature]

Signature

[Signature]

Month Day Year

08 11 06

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

08 11 06

GENERATOR

TRANSPORTER

FACILITY

237

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2757

Site:

Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

767-666-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

DT

20

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110658

Transaction# 1266703

11

Net Weight 21.13

Emergency Contact: Decon Environmental Services, Inc. 302-652-8845

16. 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.

Printed/Typed Name

R. M. Hines

Signature

[Signature]

Month Day Year

08 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

08 10 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

08 10 06

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

08 10 06

TRANSPORTER

FACILITY

TRANSPORTER #2

238

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. . . . .

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, New Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 446-8702 Attn: Rob Schone

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757.440.2761

7. Transporter 2 Company Name

8. US EPA ID Number  
.

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757.885-8070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

. . . DT . 20 T

b.

. . . . .

c.

. . . . .

d.

. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project # 16630 Transaction# 1266709  
16 Net Weight 21. -  
Emergency Contact: Capital Environmental Services, Inc 302.652-8990

16. 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.

Printed/Typed Name *R M Hart*

Signature *R M Hart* Month Day Year *DEC 10 09*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *T. [unclear]*

Signature *T. [unclear]* Month Day Year *8 11 09*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year

GENERATOR

TRANSPORTER

FACILITY

239

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (COMRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (787) 446-8103

Attn: Rob Schook

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

787-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Sol contaminated with Wood Debris

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

10

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project # 118528

Transaction #

1266715

15

Net Weight:

12.4

Emergency Contact: Capital Environmental Services Inc. 302-862-8000

16. 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.

Printed/Typed Name

BRUCE HANT

Signature

[Signature]

Month Day Year

08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

240

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23611-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 444-8703

Attn: Bob Ervink

5. Transporter 1 Company Name

CEH Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-7783

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23660

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

DT  
20

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transmittal 1266718

29

Net weight: 17.24

Emergency Contact: Capital Environmental Services, Inc. 802-652-8098

16. 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.

Printed/Typed Name

R M Ervink

Signature

*R M Ervink*

Month Day Year

08/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

John Edwards

Signature

*John Edwards*

Month Day Year

08/11/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

08/11/06

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

08/11/06

GENERATOR

TRANSPORTER

FACILITY

241

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)

1610 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-8763

Attn: Rob Strunk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-448-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

General Sanitary Landfill

100 North Park Ln.

Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-895-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

20

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project # 116532

Transaction#

1266727

SNT 34

Net Weight

40320

20.16

Emergency Contact: Capto Environmental Services, Inc. 312-602-3800

16. 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.

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

08/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

8/13/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

8/13/06

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

8/11/06

TRANSPORTER

FACILITY

242

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (COMRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 446-8702

Attn: Ron Schank

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-446-3781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

20

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Frage# 116519

Trans count

1266 ~~736~~ 736

33

Net Weight 17.03

Emergency Contact: Capital Environmental Services Inc. 707 852-8000

16. 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.

Printed/Typed Name

RM HART

Signature

[Signature]

Month Day Year

10/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

11/11/06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

243

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Asst. Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-448-2751

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-855-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

. . . DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 117552

Transaction# 1244738

32

Net Weight: 17.15

Emergency Contact: Coastal Environmental Services, Inc. 757-855-8035

16. 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.

Printed/Typed Name

AM Hart

Signature

[Signature]

Month Day Year

08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

08 11 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

244

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (COMRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (767) 446-6703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
781-448-2791

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton VA 23669

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
OT 20 T

b.

13. Total Quantity  
14. Unit Wt/Vol

c.

13. Total Quantity  
14. Unit Wt/Vol

d.

13. Total Quantity  
14. Unit Wt/Vol

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539  
Transaction# 1266747  
Net Weight 17.29  
Emergency Contact: Capital Environmental Services, Inc. 202 651-6196

16. 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.

Printed/Typed Name  
RM HAAT

Signature  
Month Day Year  
08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year

GENERATOR

TRANSPORTER

FACILITY

245

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 443-6703 Attn: Rob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

... DT ... T

24

b. ...

c. ...

d. ...

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1266753  
4 Net Weight 17.85  
Emergency Contact: Capital Environmental Services, Inc. 902 562-8993

16. 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.

Printed/Typed Name *R M Hart*

Signature *R M Hart* Month Day Year 08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Thomas...*

Signature *Thomas...* Month Day Year 08 11 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year

GENERATOR

TRANSPORTER

FACILITY

246

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-PT03 Attn: Bob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757.440.2781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757.685.8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

b.

c.

d.

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

. . . . . 20 . . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115530

18

Transaction# 1266764

Net Weight 19.60

Emergency Contact: Caprol Environmental Services, Inc. 302.662.3990

16. 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.

Printed/Typed Name

R M HART

Signature

*R M Hart*

Month Day Year

08/1/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R W FALK*

Signature

*R W Falk*

Month Day Year

. . . . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

. . . . .

19. Discrepancy Indication Space

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

Printed/Typed Name:

Signature

Month Day Year

. . . . .

GENERATOR

TRANSPORTER

FACILITY

247

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-8700

Attn: Rob Schonk

Site

Paradise Creek

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-585-6070

11. Waste Shipping Name and Description

a. Non PCRA, Non DDT Sol contaminated with Wood Debris

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

20 T

11. Waste Shipping Name and Description	12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol
a. Non PCRA, Non DDT Sol contaminated with Wood Debris	20 DT	20	T
b.			
c.			
d.			

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project # 118631

14

Transaction# 1266760

Net Weight 23.27

Emergency Contact: Capital Environmental Services, Inc 802 853-8900

16. 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.

Printed/Typed Name

R M HART

Signature

[Signature]

Month Day Year

08/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

D Cross

Signature

[Signature]

Month Day Year

08/10/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

248

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
CSM Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-5781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-965-0070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110590

Transaction# 1266789

10

Net Weight 18.79

Emergency Contact: Capital Environmental Services, Inc. 502-552-8900

16. 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.

Printed/Typed Name R M Hart

Signature [Signature]

Month Day Year 08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year 08 11 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

249

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNIRMA)  
1510 Gilbert St., Norfolk, VA 23511-2787

Site:  
Paradise Creek

4. Generator's Phone (757) 448-8793 Attn: Rob Schenk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-440-2731

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Self contaminated with Wood Debris

DT  
20

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project # 110578  
SNT 28  
Transaction: 1266788  
Net Weight: 15.61  
Emergency Contact: Capwin Environmental Services, Inc. 800-852-2886

16. 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.

Printed/Typed Name: [Signature]

Signature: [Signature]

Month Day Year: 08/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year: 8/11/06

GENERATOR

TRANSPORTER

FACILITY

250

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Bob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2784

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23080

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8970

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
DT  
20 T

b.

13. Total Quantity  
14. Unit Wt/Vol

c.

13. Total Quantity  
14. Unit Wt/Vol

d.

13. Total Quantity  
14. Unit Wt/Vol

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115830 Transaction# 1266800  
3 Net Weight 17.07  
Emergency Contact: Capitol Environmental Services, Inc 802-687-8899

16. 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.

Printed/Typed Name *RM Hart*

Signature *[Signature]* Month Day Year 08/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Michael G. Moore SR.*

Signature *[Signature]* Month Day Year 08/11/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]* Month Day Year 08/11/06

GENERATOR

TRANSPORTER

FACILITY

170

251

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

OT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project 115039

Transaction 1266792

Case 61900

Tare 12780

Net 49120

SNT 30

Net Weight

24.56 T.

Emergency Contact: Capital Environmental Services, Inc. 202 852-8000

16. 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.

Printed/Typed Name

R M Hunt

Signature

[Signature]

Month Day Year  
08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

William Baseman

Signature

[Signature]

Month Day Year  
8 11 06

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year  
8 11 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

252

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (767) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

767-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

DT  
20 T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118635

Transaction#

1266802

16

Net Weight

20.46

Emergency Contact: Capitol Environmental Services, Inc. 302-852-8900

16. 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.

Printed/Typed Name

RM HART

Signature

[Signature]

Month Day Year

08/1/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

08/1/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

08/1/06

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

08/1/06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

253

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, New Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
O&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 985-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
20  
14. Unit Wt/Vol  
T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project # 18539  
SOST 29  
Transaction # 1266811  
Net Weight 17.72  
Emergency Contact: Capital Environmental Services Inc. 802 457-8965

16. 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.

Printed/Typed Name  
RM Hunt

Signature  
Month Day Year  
08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
T. Owen Edwards

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month

GENERATOR

TRANSPORTER

FACILITY

254

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23511-3737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Bob Schenk

5. Transporter 1 Company Name

CRH Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-564-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

20 T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project # 118538

Transaction # 1266806

11

Net Weight 2046

Emergency Contact: Capital Environmental Services, Inc. 302-652-8888

16. 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.

Printed/Typed Name Ron Hunt

Signature [Handwritten Signature]

Month Day Year 08/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name [Handwritten Name]

Signature [Handwritten Signature]

Month Day Year 8/11/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name [Handwritten Name]

Signature [Handwritten Signature]

Month Day Year 8/11/06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

255

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schook

5. Transporter 1 Company Name

C&H Trucking

6.

US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8.

US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10.

US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-685-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

. . . . . OT

13. Total Quantity

2.0

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 150522

Transaction# 1266817

15

Net Weight 21.83

Emergency Contact: Capitol Environmental Services, Inc. 302-862-8000

16. 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.

Printed/Typed Name

Ray Hartz

Signature

[Signature]

Month Day Year  
02 17 00

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year  
02 17 00

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

256

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8700 Attn: Bob Schenk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED.**

A. Transporter's Phone: 757-449-2781

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23085

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone: 757-885-8170

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity: 70  
14. Unit Wt/Vol: T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project # 118535  
Transaction 1266820  
34  
Net Weight 42020 20.01  
Emergency Contact: Capital Environmental Services, Inc. 302-852-8609

16. 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.

Printed/Typed Name: R M HART

Signature: [Signature] Month Day Year: 10/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: [Signature]

Signature: [Signature] Month Day Year: [Signature]

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name: [Signature]

Signature: [Signature] Month Day Year: 10/11/06

GENERATOR

TRANSPORTER

FACILITY

257

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site  
Paradise Creek

4. Generator's Phone (757) 446-8703 Attn. Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hangeon, VA 23688

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
OT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 145539 Transaction# 1246831  
33 Net Weight: 17.61  
Emergency Contact: Capital Environmental Services Inc. 802-552-5088

16. 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.

Printed/Typed Name  
RM Hart

Signature  
*[Signature]*

Month Day Year  
09/1/00

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

258

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.  
.....

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-8703 Attn: Rob Schrock

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2751

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-895-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
.. OT .. 20 T

b.

.. ..

c.

.. ..

d.

.. ..

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110539  
32  
Transaction# 1244830  
Net Weight: 17.17  
Emergency Contact: Capital Environmental Services Inc 202 852-8800

16. 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.

Printed/Typed Name  
Rm Hart

Signature  
Month Day Year  
08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year  
08 11 06

GENERATOR

TRANSPORTER

FACILITY

259

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schank

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Harrison, VA 23066

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 117530

Transaction#

1266839

Net Weight

18.24

Emergency Contact: Capital Environmental Services, Inc. 302-652-2000

16. 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.

Printed/Typed Name

R M Hart

Signature

[Signature]

Month Day Year

08/11/08

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

08/11/08

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

260

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-8703

Attn: Rob Schenk

Site:  
Paradise Creek

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-895-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110539

Transaction# 1266838

14

Net Weight 22.86

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8899

16. 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.

Printed/Typed Name

Rm HART

Signature

[Signature]

Month Day Year  
08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year  
08 11 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

261

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23068

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

... .. DT

13. Total Quantity

7.0

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project 110626

Transaction#

1266846

4

Net Weight

18.10

Emergency Contact: Capital Environmental Services, Inc. 302-662-9388

16. 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.

Printed/Typed Name

RM Hart

Signature

[Signature]

Month Day Year  
08/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

1

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year  
10/11/06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

262

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No. . . . .

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site  
Paradise Creek

4. Generator's Phone (767) 445-8703

5. Transporter 1 Company Name  
CSA Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
187.443.2761

7. Transporter 2 Company Name

8. US EPA ID Number  
. . . . .

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23060

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
767.982.8178

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
20  
14. Unit Wt/Vol  
T

b.

. . . . .

c.

. . . . .

d.

. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project #18536  
18  
Parcel # 1266850  
Net Weight 20.84  
Emergency Contact: Capt. Environmental Services Inc. 513.513.6089

16. 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.

Printed/Typed Name  
KIM HART

Signature  
[Signature] Month Day Year  
08/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
[Signature]

Signature  
[Signature] Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
[Signature] Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
[Signature] Month Day Year  
8/11/06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

263

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schunk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
DT 20 T

b.

13. Total Quantity  
14. Unit Wt/Vol

c.

13. Total Quantity  
14. Unit Wt/Vol

d.

13. Total Quantity  
14. Unit Wt/Vol

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1206887  
10 Net Weight 18.23  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8889

16. 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.

Printed/Typed Name  
Rob Schunk

Signature  
Month Day Year  
08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name  
Signature  
Month Day Year  
9 16 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

264

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Army Bpt School

5. Transporter 1 Company Name

CAH Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-7781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bechel Sanitary Landfill  
100 North Park La  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

DT

T

20

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118530

Transaction# 12606883

SNIT 28

Net Weight 16.44

Emergency Contact: Capital Environmental Services Inc 802 852-8490

16. 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.

Printed/Typed Name

R M HART

Signature

[Signature]

Month Day Year

08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

R. CUFFEE

Signature

R. Cuffee

Month Day Year

8 11 06

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

8 11 06

GENERATOR

TRANSPORTER

FACILITY

265

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8709 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23060

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 895-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DDT Soil contaminated with Wood Debris

DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118639 Transaction# 1266886  
16 Net Weight 17.42  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name  
RM Hart

Signature  
Month Day Year  
08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
C. Hines

Signature  
Month Day Year  
8 11 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year  
12 11 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

266

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **NOT REQUIRED**      Manifest Document No.      2. Page 1 of 1

3. Generator's Name and Mailing Address  
 Commander, Navy Region Mid-Atlantic (CNRMA)  
 1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
 Paradise Creek

4. Generator's Phone (757) 445-9703      Attn: Rob Bostank

5. Transporter 1 Company Name: **C&H Tanking**      6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: **757-449-2781**

7. Transporter 2 Company Name:      8. US EPA ID Number: **NOT REQUIRED**

B. Transporter's Phone:

9. Designated Facility Name and Site Address  
 Bethel Sanitary Landfill  
 100 North Park Ln.  
 Hampton, VA 23068

10. US EPA ID Number: **NOT REQUIRED**      C. Facility's Phone: **757-895-8010**

11. Waste Shipping Name and Description

12. Containers No.      Type      13. Total Quantity      14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No.      Type: **DT**      Total Quantity: **20**      Unit Wt/Vol: **T**

b.      c.      d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
 Project# 118638      Transaction#      Net Weight:  
**SNT 30**

**Gross 63020**  
**Tare 25320**  
**Net 37700**  
**18.85 Ton**

16. 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.

Printed/Typed Name: **RM HART**

Signature: *[Signature]*      Month Day Year: **08/1/06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name:      Signature:      Month Day Year:

18. Transporter 2 Acknowledgement of Receipt of Materials  
 Printed/Typed Name: **W. J. ...**      Signature: *[Signature]*      Month Day Year: **8/1/06**

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
 Printed/Typed Name: *[Signature]*      Signature: *[Signature]*      Month Day Year: **8/1/06**

267

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-5703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118536 Transaction# 1266897  
3 Net Weight: 15.85  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8998

16. 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.

Printed/Typed Name  
B M HART

Signature

Month Day Year  
08/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Robert G. Jones Sr.

Signature

Month Day Year  
08/11/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
08/11/06

GENERATOR

TRANSPORTER

FACILITY

268

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23886

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-885-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115530 Transaction# 1266901  
Net Weight 19.06  
Emergency Contact: Capital Environmental Services, Inc. 302-852-8990

16. 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.

Printed/Typed Name R M HAIT

Signature [Signature]

Month Day Year 08/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name [Signature]

Signature [Signature]

Month Day Year 08/11/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name [Signature]

Signature [Signature]

Month Day Year 11/11/06

GENERATOR

TRANSPORTER

FACILITY

269

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 855-8070

11. Waste Shipping Name and Description

12. Containers

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No. Type Total Quantity Unit Wt/Vol  
DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115538 Transaction# 1266900  
Net Weight: 17.4  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name  
R M Hart

Signature  
Month Day Year  
08/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name  
Signature  
Month Day Year

GENERATOR

TRANSPORTER

FACILITY

270

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Bob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23806

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

1266910

Net Weight

20.59

Emergency Contact: Capital Environmental Services, Inc. 302-852-8999

16. 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.

Printed/Typed Name

R M HART

Signature

[Signature]

Month Day Year

08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

[Signature]

GENERATOR

TRANSPORTER

FACILITY

271

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CRFMMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6708 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 855-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
20  
14. Unit Wt/Vol  
T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project # 118539  
34  
Transcount # 266908  
Net Weight: 40840 2042  
Emergency Contact: Capital Environmental Services, Inc. 502 852-6090

16. 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.

Printed/Typed Name  
B M Frost

Signature  
[Signature] Month Day Year  
08 11 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
[Name]

Signature  
[Signature] Month Day Year  
8 11 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature  
[Signature] Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
[Name]

Signature  
[Signature] Month Day Year  
8 11 06

GENERATOR

TRANSPORTER

FACILITY

272

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1010 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 446-6703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Seton Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-446-8070

11. Waste Shipping Name and Description

a. Non RCRA Non DOT Bui contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

DT

70

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project # 118530

Transaction#

1266909

33

Net Weight 16.79

Emergency Contact: Capital Environmental Services, Inc. 802-852-6909

16. 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.

Printed/Typed Name

Rm Huet

Signature

[Signature]

Month Day Year

08/1/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

08/1/06

COPY

GENERATOR

TRANSPORTER

FACILITY

273

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

OT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115590

Transaction# 1240911

32

Net Weight 17.79

Emergency Contact: Capitol Environmental Services, Inc. 302 862-8890

16. 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.

Printed/Typed Name  
RM Hart

Signature

Month Day Year  
08/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
8/11/06

GENERATOR

TRANSPORTER

FACILITY

274

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 446-8703

Attn: Bob Schenk

5. Transporter 1 Company Name

CRH Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Betnet Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118598

4

Transaction#

1266917

Net Weight

17.6

Emergency Contact: Capital Environmental Services, Inc. 302-852-8599

16. 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.

Printed/Typed Name

J M HART

Signature

[Signature]

Month Day Year  
08 11 05

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

275

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. ....

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (COMNA) 1610 Gilbert St., Norfolk, VA 23511-2137

Site:  
Paradise Creek

4. Generator's Phone (767) 449-8703 Attn: Bob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
767-449-2701

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-885-8070

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a.			
b.			
c.			
d.			

a. Non RCRA, Non DOT Soil contaminated with Mixed Debris

20

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project # 118830  
Transaction# ~~278~~ 1266921  
Net Weight 2144  
Emergency Contact: Capitol Environmental Services, Inc. 302-851-6882

16. 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.

Printed/Typed Name  
Bob Schenk

Signature  
*[Signature]*

Month Day Year  
09/11/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
C&H Trucks

Signature  
*[Signature]*

Month Day Year  
.....

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year  
.....

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
*[Signature]*

Month Day Year  
08/11/06

GENERATOR

TRANSPORTER

FACILITY

COPY

276

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2764

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116030

Transaction# 1266957

Net Weight 17.5

Emergency Contact: Capital Environmental Services, Inc. 302-862-8009

16. 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.

Printed/Typed Name

BM Haney

Signature

[Signature]

Month Day Year

08/20/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

10/1/06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

277

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23514-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

C&H Trucking

NOT REQUIRED

757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

C. Facility's Phone

Gether Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

NOT REQUIRED

757 865-8070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

Type

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115539

Transaction# 1266958

SMT 34

Net Weight 39.460

19.73

Emergency Contact: Capital Environmental Services, Inc. 302 862-8888

16. 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.

Printed/Typed Name

RM Hart

Signature

[Signature]

Month Day Year  
08 12 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Steve Carther

Signature

[Signature]

Month Day Year  
8 12 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year  
8 12 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

278

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schrak

5. Transporter 1 Company Name

C&M Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bemel Sanitary Landfill  
100 North Park La  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

DT

20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1266960

28 SNT

Net Weight 17.46

Emergency Contact: Capital Environmental Services, Inc. 302-852-8899

16. 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.

Printed/Typed Name

R M HART

Signature

*[Signature]*

Month Day Year

08 12 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

R. Luffee

Signature

*[Signature]*

Month Day Year

08 12 06

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

08 12 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

279

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2797

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-7761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23686

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
20  
14. Unit Wt/Vol  
T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118538 Transaction# 1266 959  
16 Net Weight 18.4  
Emergency Contact: Capital Environmental Services, Inc. 302 862-8999

16. 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.

Printed/Typed Name  
RM HART

Signature  
*[Signature]*

Month Day Year  
08 12 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
T. Bates

Signature  
*[Signature]*

Month Day Year  
8 12 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
*[Signature]*

Month Day Year  
8 12 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

280

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-8709 Attn: Rob Schank

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking

7. Transporter 2 Company Name

A. Transporter's Phone  
757-440-2781

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

C. Facility's Phone  
757-885-8078

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118536 Transaction# 1266961  
14 Net Weight: 22.57  
Emergency Contact: Capital Environmental Services, Inc. 302-852-8898

16. 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.

Printed/Typed Name  
R M HART

Signature  
R M HART

Month Day Year  
08/20/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Q. Cross

Signature  
Q. Cross

Month Day Year  
08/20/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

281

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
20

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project # 115530  
Transaction# 1266965  
Net Weight 19.9  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name  
RM Hays

Signature  
Month Day Year  
08/20/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
Rick Truitt

Signature  
Month Day Year  
08/17/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

282

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)

1310 Gilbert St., Norfolk, VA 23511-2787

4. Generator's Phone (757) 445-5703

Attn: Rob Schenk

Site:

Paradise Creek

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2784

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill

100 North Park La.

Hampton, VA 23060

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-866-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

DT

2.0

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118639

Transaction#: 1266968

Net Weight: 16.98

Emergency Contact: Capitol Environmental Services, Inc. 302-652-8899

16. 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.

Printed/Typed Name

RM HART

Signature

[Signature]

Month Day Year

08/17/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

08/17/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

10/12/06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

283

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2797

Site:  
Paradise Creek

4. Generator's Phone (757) 446-8703 Attn: Rob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116630

Transaction# 1266968

SWT 33

Net Weight: 17.61

Emergency Contact: Capital Environmental Services, Inc. 302 652-8898

16. 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.

Printed/Typed Name  
RM Hartz

Signature

Month Day Year  
08 12 00

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year  
08 12 00

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
08 12 00

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

284

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-445-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
700 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

DT

2.0

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118530

Transaction# ~~1297~~ 1266972

Net Weight: 1797

Emergency Contact: Capitol Environmental Services, Inc. 302-662-8999

16. 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.

Printed/Typed Name

Rm Hart

Signature

[Signature]

Month Day Year

08/21/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Dawn Edwards

Signature

[Signature]

Month Day Year

8/12/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

Month Day Year

8/18/06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

285

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8793 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-442-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No. Type  
DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116596

Transaction# 1266981

18

Net Weight 20.98

Emergency Contact: Capital Environmental Services, Inc. 302 862-8989

16. 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.

Printed/Typed Name  
RM HART

Signature

Month Day Year  
12 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
JW FALLS

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
12 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

286

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-4703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-446-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton VA 23866

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110538

Transaction#

1266977

31

Net Weight

17.93

Emergency Contact: Capital Environmental Services, Inc. 302-852-8898

16. 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.

Printed/Typed Name

RM HART

Signature

*RM Hart*

Month Day Year

08/20/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Carl's Overton

Signature

*Carl's Overton*

Month Day Year

8/12/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

287

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: NOT REQUIRED

A. Transporter's Phone: 757-449-2781

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066  
10. US EPA ID Number: NOT REQUIRED

C. Facility's Phone: 757 855-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 2.0 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115539 Transaction# 1266976  
Net Weight 18.44  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8909

16. 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.

Printed/Typed Name: RM HART

Signature: [Signature] Month Day Year: 08/12/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: [Signature]

Signature: [Signature] Month Day Year: 8/12/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year: 8/12/06

GENERATOR

TRANSPORTER

FACILITY

288

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. . . . .

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St. Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 449-8703 Attn: Eric Schrank

5. Transporter 1 Company Name  
CSH Training

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
. . . . .

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-855-8170

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA Non DOT Soil contaminated with Wood Debris

. . . . . DT . . . . . 20 7

b.

. . . . .

c.

. . . . .

d.

. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project 118539 Transaction# 1266978  
32 Net Weight 15.87  
Emergency Contact Capital Environmental Services, Inc. 302-852-8690

16. 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.

Printed/Typed Name R. M. HART

Signature [Signature] Month Day Year 08/17/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature [Signature] Month Day Year 08/18/06

GENERATOR  
TRANSPORTER  
FACILITY

289

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1310 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8708 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 855-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1266579

DAVIS #1

Net Weight 18-28

Emergency Contact: Capital Environmental Services, Inc. 302 652-8800

16. 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.

Printed/Typed Name  
RM HART

Signature

Month Day Year  
12 20 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
12 20 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

290

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-8703 Attn: Bob Schonk

5. Transporter 1 Company Name C&H Trucking

6. US EPA ID Number **NOT REQUIRED**

7. Transporter 2 Company Name

8. US EPA ID Number **NOT REQUIRED**

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number **NOT REQUIRED**

11. Waste Shipping Name and Description  
a. Non RCRA, Non DOT Soil contaminated with Wood Debris

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1266991

Net Weight: 18.34

Emergency Contact: Capital Environmental Services, Inc. 302 652-8909

16. 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.

Printed/Typed Name *RM HART*

Signature *[Signature]*

Month Day Year 08/12/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

291

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
1510 Gilbert St., Norfolk, VA 23611-2737

Site:  
**Paradise Creek**

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**767-440-2781**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 885-8070**

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

13. Total Quantity  
**20**

14. Unit Wt/Vol  
**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# **1266992**  
**116** Net Weight: **19.66**  
Emergency Contact: Capital Environmental Services, Inc. 802-852-8988

16. 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.

Printed/Typed Name **RM HART**

Signature **[Signature]**

Month Day Year **08 21 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **T. Bates**

Signature **[Signature]**

Month Day Year **8 12 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year **10 12 06**

GENERATOR

TRANSPORTER

FACILITY

292

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1

of 1

Site:  
Paradise Creek

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (COMRMA)  
1810 Gilbert St., Norfolk, VA 23511-2767

4. Generator's Phone (757) 445-8703

attn: Bob Schane

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-640-2181

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23663

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-886-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers-

No. Type

13. Total Quantity

14. Unit Wt/Vol

20

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project 118019

Transporter

Net Weight

SNT 30

Emergency Contact: Capital Environmental Services Inc. 512-852-8900

Gross 61,730  
Tare 25,520  
NET 36,210  
18.13 Ton

16. 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.

Printed/Typed Name

RAM H20

Signature

[Signature]

Month Day Year

09/10/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

09/10/06

GENERATOR

TRANSPORTER

FACILITY

293

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1010 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-8703 Attn: Bob Schock

Site  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-855-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA Non DOT Soil contaminated with Blood Debris

13. Total Quantity  
14. Unit Wt/Vol  
20 T

b.

13. Total Quantity  
14. Unit Wt/Vol

c.

13. Total Quantity  
14. Unit Wt/Vol

d.

13. Total Quantity  
14. Unit Wt/Vol

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Properly 18000  
34  
Transactions 1266996  
Net Weight 39.100 19.55  
Emergency Contact: Capital Environmental Services, Inc. 800-824-8924

16. 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.

Printed/Typed Name  
B/M/4707

Signature  
Month Day Year  
12 12 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature  
Month Day Year  
7 12 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year  
7 12 06

GENERATOR  
TRANSPORTER  
FACILITY

294

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1267881

14

Net Weight: 22.69

Emergency Contact: Capitol Environmental Services, Inc. 302-652-8099

16. 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.

Printed/Typed Name

R M HART

Signature

[Signature]

Month Day Year  
08 12 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

D. Cross

Signature

[Signature]

Month Day Year  
10 01 20 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
12 12 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

295

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 440-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non FCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

.. DT

20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project # 18639

Transaction# 1267004

28 SMT

Net Weight 17.67

Emergency Contact: Capital Environmental Services, Inc. 802-652-4396

16. 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.

Printed/Typed Name

*R.M. Hart*

Signature

*R.M. Hart*

Month Day Year  
08 12 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*R. L. Smith*

Signature

*R. L. Smith*

Month Day Year  
08 12 06

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
12 12 06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

296

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110539  
Transaction#: 1267006  
Net Weight: 19.44  
Emergency Contact: Capital Environmental Services, Inc. 302-552-8888

16. 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.

Printed/Typed Name  
RM HART

Signature  
Month Day Year  
08/21/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
Rick Troutman

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year  
18/12/06

GENERATOR

TRANSPORTER

FACILITY

297

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (COMREMA)  
1610 Gilbert St., Norfolk, VA 23511-2787

Site:  
Paradise Creek

4. Generator's Phone (757) 446-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-446-2191

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Harrison, VA 23068

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

857-365-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

20

ST

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project # 1531

Site address

33

Net Weight 1680

Emergency Contact: Capital Environmental Services, Inc. 800-851-8001

16. 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.

Printed/Typed Name

RM Hunt

Signature

[Signature]

Month Day Year

12 17 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

12 19 06

TRANSPORTER

FACILITY

298

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name

CAH Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

**NOT REQUIRED**

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers	13. Total Quantity	14. Unit
No.	Type	Wt/Vol
	DT	20 T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

4

Transaction#:

1267049

Net Weight:

17.21

Emergency Contact: Capital Environmental Services, Inc. 802.652-8000

16. 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.

Printed/Typed Name

RM HART

Signature

*RM Hart*

Month Day Year

08 | 12 | 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Robert Schenk*

Signature

*Robert Schenk*

Month Day Year

08 | 12 | 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

08 | 12 | 06

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

08 | 12 | 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

299

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1518 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23056

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-865-0070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project # 115339  
Transfer work 1267009  
Net Weight 17.93  
Emergency Contact: Capital Environmental Services, Inc. 802-562-8820

16. 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.

Printed/Typed Name  
Ron Hovet

Signature  
Month Day Year  
08 12 05

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
D. J. ...

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year

GENERATOR

TRANSPORTER

FACILITY

300

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone (**757**) **445-6703** Attn: **Rob Schank**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-440-2781**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23666**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757-856-8070**

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

**20** **T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 116538** **Transaction# 1267011**  
**Net Weight 21.85**  
**Emergency Contact: Capital Environmental Services, Inc. 302 852-8000**

16. 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.

Printed/Typed Name **RM HART**

Signature **[Signature]** Month Day Year **08 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Mark**

Signature **[Signature]** Month Day Year **08 12 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year **08 12 06**

GENERATOR

TRANSPORTER

FACILITY

301

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 885-5070

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

20

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project # 115500

Transaction#

31

Net Weight

Emergency Contact: Capital Environmental Services Inc 802 352-8000

16. 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.

Printed/Typed Name

RM/H40

Signature

[Signature]

Month Day Year  
08 12 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Carl W. Creston

Signature

Carl W. Creston

Month Day Year  
08 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year  
10 19 06

GENERATOR

TRANSPORTER

FACILITY

303

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1267018  
DAVIS #1 Net Weight 19.88  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name  
RM HART

Signature  
*[Signature]*

Month Day Year  
08 17 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
*[Signature]*

Month Day Year  
11 17 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

304

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

C&H Trucking

**NOT REQUIRED**

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

C. Facility's Phone

Bethel Sanitary Landfill

100 North Park La.

Hampton, VA 23666

**NOT REQUIRED**

757-865-6070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No. Type

DT

20

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1267020

18

Net Weight 21.85

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

RM HART

Signature

*RM Hart*

Month Day Year

08 12 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

KW Falls

Signature

*KW Falls*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

08 12 06

TRANSPORTER #2

TRANSPORTER FACILITY

305

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CHIRMA)  
1510 Gilbert St., Norfolk, VA 23511-2757

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6700 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23886

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DDT Soil contaminated with Wood Debris

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DT  
20

T

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116538 Transaction# 1267096  
SMT 28 Net Weight 19.28  
Emergency Contact: Capital Environmental Services, Inc. 800-255-2000 7033954975

16. 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.  
Printed/Typed Name RM Haver Signature [Signature] Month 08 Day 14 Year 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name R. Luffee Signature R. Luffee Month 08 Day 14 Year 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month 08 Day 14 Year 06

GENERATOR

TRANSPORTER

FACILITY

300

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1

of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (COMNA)
1510 Gilbert St., Norfolk, VA 23511-2737

Site: Paradise Creek

4. Generator's Phone (757) 245-8709

Attn: Bob Schenk

5. Transporter 1 Company Name

CS&K Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-7781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill
100 North Park Ln.
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Sol contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

20 DT

20

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Regulation 116520

Transaction# 1267141

SMT 28

Net Weight 19.69

Emergency Contact: Caprol Environmental Services, Inc. 302-752-8699

16. 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.

Printed/Typed Name

R M HART

Signature

[Signature]

Month Day Year

09/14/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

09/14/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

R. G. [Signature]

Signature

[Signature]

Month Day Year

09/14/06

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

09/14/06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

307

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (COMRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 448-8703

Attn: Rob Schwab

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La  
Hampton, VA 23060

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001

DT

13. Total Quantity

2.0

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project # 18536

Transaction 12267228

SNT 28

Net Weight 17.89

Emergency Contact: Capital Environmental Services, Inc. 802-657-8889

16. 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.

Printed/Typed Name

KM Hart

Signature

[Signature]

Month Day Year  
08 14 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

R. [Signature]

Signature

[Signature]

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year  
06 14 06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

308

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (707) 446-8103

Ann. Est. Stamp

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

787-440-9784

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Henric, VA 23060

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757-822-6000

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

. . . . . DT . . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118520

Manifest# 1267312

SMT # 25

Net Weight 19.16

Emergency Contact: Capital Environmental Services, Inc. 800-883-2644

16. 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.

Printed/Typed Name

SM HAZ

Signature

[Signature]

Month Day Year

. . . . .

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

. . . . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

. . . . .

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

7 14 11

GENERATOR

TRANSPORTER

FACILITY

309 2109

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 20511-2797

Site  
Paradise Ocean

4. Generator's Phone (767) 448-8753 Attn: Rob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED.

A. Transporter's Phone  
767-448-1761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23665

10. US EPA ID Number  
NOT REQUIRED.

C. Facility's Phone  
767-985-8070

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

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b.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project 118030  
SNIT-25  
12267384  
20.21  
Emergency Contact: Capital Environmental Services, Inc. 800.331.2666

16. 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.

Printed/Typed Name  
R.M. [Signature]

Signature  
Month Day Year  
07/14/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year

GENERATOR  
TRANSPORTER  
FACILITY

310

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID-Number  
NOT REQUIRED.

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23665

10. US EPA ID Number  
NOT REQUIRED.

C. Facility's Phone  
757 855-6070

11. Waste Shipping Name and Description

12. Containers	13. Total Quantity	14. Unit Wt/Vol		
			No.	Type
a.	Non RCRA, Non DOT Soil contaminated with Wood Debris			
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 1278581 14  
Net Weight 17.15  
Emergency Contact Capital Environmental Services, Inc. 302 652-8990

16. 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.

Printed/Typed Name *RM Hunt* Signature *[Signature]* Month Day Year 08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *R. Cross* Signature *[Signature]* Month Day Year 08 27 06

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

19. Discrepancy Indication Space

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

Printed/Typed Name Signature Month Day Year

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

311

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-444-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 805-8070

11. Waste Shipping Name and Description

12. Containers No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA Non DOT Soil contaminated with Wood Debris

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20

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b.

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c.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115636 Transaction# 1270583  
Net Weight 16.39  
Emergency Contact: Capital Environmental Services, Inc. 302 562-9085

16. 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.

Printed/Typed Name R M ...

Signature [Signature]

Month Day Year 10 8 2006

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR  
TRANSPORTER  
FACILITY

312

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23514-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

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b.

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c.

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d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 10639

Transaction#

1270588

DDBB

Net Weight

1441

Emergency Contact: Capital Environmental Services, Inc. 302-667-8494

16. 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.

Printed/Typed Name

R M Hartz

Signature

[Signature]

Month Day Year  
12 16 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
12 16 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

313

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 446-6700 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-446-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 855-0070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b. . . . .

c. . . . .

d. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118535

Transaction# 1270584

18

Net weight 1591

Emergency Contact: Coastal Environmental Services, Inc. 302 553-0000

16. 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.

Printed/Typed Name  
R M HART

Signature  
[Signature]

Month Day Year  
12 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
[Signature]

Signature  
[Signature]

Month Day Year  
12 20 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

314

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1810 Gibbs St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
**NOT REQUIRED.**

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23065

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757 685-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non OOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
001 DT 20

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project # 18539 Transaction# 127 0582  
Net Weight 16  
14.18  
Emergency Contact: Capital Environmental Services Inc. 302 652-8888

16. 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.

Printed/Typed Name  
KIM H. [Signature]

Signature  
Month Day Year  
09/16/00

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Robert Scott

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year

GENERATOR

TRANSPORTER

FACILITY

315

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23611-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6705 Adm Rob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln  
Hampton, VA 23658

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 665-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 2.0 T

b.

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c.

...

d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Phone: 13512  
SNT 28  
Emergency Contact: Coastal Environmental Services Inc. 802 552-8000  
Transporter: 1270587  
Net Weight: 15.08

16. 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.

Printed/Typed Name: *Ken H...*

Signature: *[Signature]* Month: 08 Day: 26 Year: 02

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature: *[Signature]* Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature: *[Signature]* Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year

GENERATOR

TRANSPORTER

FACILITY

316

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
001 DT 20 T

b.

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c.

...

d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project # 115539  
Transactions 1270589  
Net Weight 14.45  
Emergency Contact: Cap for Environmental Services, Inc 302-851-3500

32

16. 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.

Printed/Typed Name  
R M H

Signature  
Month Day Year  
02 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year

GENERATOR  
TRANSPORTER  
FACILITY

TRANSPORTER #2

317

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (COMNA)  
1510 Filbert St., Norfolk, VA 23511-2727

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schone

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-448-2783

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23055

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project # 118576

Transaction# 127 65 93

4

Net Weight 13.21

Emergency Contact: Capital Environmental Services, Inc. 802 853-9999

16. 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.

Printed/Typed Name  
Rob Schone

Signature  
Month Day Year  
08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
C&H Trucking

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year

GENERATOR

TRANSPORTER

FACILITY

318

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schook

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED.

A. Transporter's Phone  
757-442-2181

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED.

C. Facility's Phone  
757-855-5070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project # 116536

Transaction#

1270597

3

Net Weight

1401

Emergency Contact: Capital Environmental Services Inc. 302-852-8936

16. 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.

Printed/Typed Name

M. H. H. H.

Signature

[Signature]

Month Day Year  
08/26/05

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

319

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (787) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project # 118539 Transaction # 1270601  
P-62 Net Weight 16.03  
Emergency Contact: Coastal Environmental Services, Inc 802-952-3959

16. 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.

Printed/Typed Name  
K M HART

Signature  
K M HART  
Month Day Year  
09/26/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
J. Lockamy

Signature  
J. Lockamy  
Month Day Year  
09/26/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year  
09/26/06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

320

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 449-8703

Attn: Rob Sonont

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED.**

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number

**NOT REQUIRED.**

C. Facility's Phone

757 885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001 DT

13. Total Quantity

20 T

14. Unit Wt/Vol

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transmittal#

1270600

33

Net Weight:

13.70

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

Rob Sonont

Signature

[Signature]

Month Day Year  
08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year  
08 26 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year  
08 26 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

321

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander Navy Region Mid-Atlantic (CNFMA)  
1610 Gilbert St., Norfolk, VA 23511-2707

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type

a. Non RCRA, Non DDT Soil contaminated with Wood Debris

13. Total Quantity  
20  
14. Unit Wt/Vol  
T

b.

12. Containers No. Type

c.

12. Containers No. Type

d.

12. Containers No. Type

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project # 116572  
34  
Emergency Contact: Capital Environmental Services, Inc. 502 552-8996  
Transportation 321 127 0594  
Net Weight 37.500

16. 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.

Printed/Typed Name  
RM Hartzel

Signature  
Month Day Year  
08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year

GENERATOR

TRANSPORTER

FACILITY

322

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNEMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site  
Paradise Creek

4. Generator's Phone (757) 448-8700

ATTN: Bob Sponck

5. Transporter 1 Company Name

C&I Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-640-1181

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Etchell Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23068

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-6170

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Oil contaminated with Wood Debris

12. Containers  
No. Type

00.1 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project # 118894

Transfer # 1270602

31

Net Weight 15.68

Emergency Contact Capital Environmental Services Inc. 107-852-6588

16. 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.

Printed/Typed Name

KM/HAC

Signature

[Signature]

Month Day Year  
08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

323

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonek

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23696

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-896-8076

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA Non DOT Soil contaminated with Wood Debris

DT  
20<sup>T</sup>

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project 115536  
Transporter # 1270606  
AT16  
Net Weight 19.84  
Emergency Contact: Capital Environmental Services, Inc. 302-452-9500

16. 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.

Printed/Typed Name  
RM HART

Signature

Month Day Year  
08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
M. M. H.

Signature

Month Day Year  
05 30 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

324

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (COMNA)  
1816 Gilbert St., Norfolk, VA 23511-2757

4. Generator's Phone (757) 446-8703 4th High School

5. Transporter 1 Company Name  
C&W Trucking

6. US EPA ID Number  
NOT REQUIRED.

A. Transporter's Phone  
757-440-0781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton VA 23062

10. US EPA ID Number  
NOT REQUIRED.

C. Facility's Phone  
757-896-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00 - 1

DT

20 T

b.

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c.

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d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project 118828  
P-61  
Emergency Contact: Capton Environmental Services Inc. 302-882-8990  
Transporter # 1270607  
Net Weight 18-30

16. 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.

Printed/Typed Name  
RM Hart

Signature  
RM Hart

Month Day Year  
08 16 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Cecilia

Signature  
Cecilia

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

325

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-0709

Attn: Frank Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-448-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

DT

13. Total Quantity

2.0

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110633

Transaction# 1270608

AT-11

Net Weight 16.14

Emergency Contact: Capital Environmental Services Inc. 302-862-8866

16. 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.

Printed/Typed Name

B. M. HART

Signature

[Signature]

Month Day Year  
08/26/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

326

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No. . . . .

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (COMNA) 1810 Gilbert St., Norfolk, VA 23511-2757

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

Site  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOTE REQUIRED.**

A. Transporter's Phone  
757-442-7761

7. Transporter 2 Company Name

8. US EPA ID Number  
. . . . .

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number  
**NOTE REQUIRED.**

C. Facility's Phone  
757-885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
20 T

b.

. . . . .

c.

. . . . .

d.

. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118598 Transaction# 1270613  
AT-14 Net Weight 21.97  
Emergency Contact: Capital Environmental Services, Inc. 302-862-8899

16. 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.

Printed/Typed Name RM Hartzel

Signature [Signature] Month Day Year 08/16/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name [Name]

Signature [Signature] Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name [Name]

Signature [Signature] Month Day Year 08/16/06

GENERATOR  
TRANSPORTER  
FACILITY

327

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (COMFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8708 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No. Type

001 DT 20

b.

No. Type

c.

No. Type

d.

No. Type

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539  
15  
Transaction# 1270609  
Net Weight 17.40  
Emergency Contact: Capital Environmental Services, Inc. 801/862-8960

16. 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.

Printed/Typed Name  
RM Hantz

Signature  
Month Day Year  
08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year  
8 26 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year

GENERATOR

TRANSPORTER

FACILITY

328

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( )

814-8703 Attn: Ron Schmitt

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2754

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-866-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DDT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

DT T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116639

Transcript

Net Weight

127 0612

Emergency Contact: Capita Environmental Services, Inc. 802 552 8990 / 6-66

16. 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.

Printed/Typed Name

R M Hart

Signature

[Signature]

Month Day Year

08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

08 26 06

GENERATOR

TRANSPORTER

FACILITY

329

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gibson St, Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 448-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-885-6970

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# 1270615  
10 Net Weight: 17.5  
Emergency Contact: Capital Environmental Services, Inc. 802 652-8988

16. 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.

Printed/Typed Name  
R.M. Ham

Signature  
Month Day Year  
08 16 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name Signature Month Day Year

GENERATOR

TRANSPORTER

FACILITY

330

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schank

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: NOT REQUIRED  
A. Transporter's Phone: 757-440-7761

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

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666  
10. US EPA ID Number: NOT REQUIRED

C. Facility's Phone: 757-885-2070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1270617  
0-7 Net Weight: 15.17  
Emergency Contact: Capital Environmental Services, Inc. 302-852-8868

16. 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.

Printed/Typed Name: R. M. Hunt

Signature: [Signature] Month Day Year: 8 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year: 8 26 06

GENERATOR

TRANSPORTER

FACILITY

331

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116530

Transaction#: 1270625

~~14~~ 14

Net Weight: 23.2lb

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name

RM Hart

Signature

*[Signature]*

Month Day Year  
08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

D. Cross

Signature

*[Signature]*

Month Day Year  
08 26 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year  
08 26 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

332

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-8702

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757-865-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

601 DT

13. Total Quantity

20 T

14. Unit Wt/Vol

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115539

Transaction# 127 0626

10

Net Weight: 20.35

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

R M Hart

Signature

*[Signature]*

Month Day Year  
08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

R. Scott

Signature

*[Signature]*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Large Signature]*

Signature

Month Day Year  
08 26 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

333

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Elethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

0.01

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#:

1270624

Net Weight:

21.07

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

R M Hart

Signature

[Signature]

Month Day Year

08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

[Signature]

Month Day Year

08 26 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

08 26 06

334

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23611-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8702 Attn: Rob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone  
757-449-2761

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone

757-885-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00 / DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115536 Transaction# 1270630  
C&H 18 Net Weight 20.39  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999  
*W Fall*

16. 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.

Printed/Typed Name  
Rm Hart

Signature  
Month Day Year  
09 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
W Fall

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year  
10 46 06

GENERATOR

TRANSPORTER

FACILITY

335

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schork

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-449-2781

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number: **NOT REQUIRED**  
C. Facility's Phone: 757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity: 70  
14. Unit Wt/Vol: T  
001

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1270631  
SNT 28 Net Weight 21.23  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name: R M HART

Signature: [Signature] Month Day Year: 08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: R. CUFFEE

Signature: [Signature] Month Day Year: 8 26 06

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year

GENERATOR

TRANSPORTER

FACILITY

336

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-8703 Amy Bob Schank

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2784

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-885-0170

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115530 Transaction# 1270632  
D6 Net Weight 18.32  
Emergency Contact: Capital Environmental Services, Inc. 302-652-8999

16. 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.

Printed/Typed Name *BM Hamt*

Signature *[Signature]* Month Day Year 08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Chris Wiggins*

Signature *[Signature]* Month Day Year 08 26 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature *[Signature]* Month Day Year 08 26 06

GENERATOR

TRANSPORTER

FACILITY

337

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8709 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757 885-0070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1270633  
32 Net Weight: 18.88  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name R M HART

Signature [Signature]

Month Day Year 08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year 08 26 06

GENERATOR

TRANSPORTER

FACILITY

338

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone (757) 445-5703 Attn: Rob Schonk

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking  
6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668  
10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 127 0635  
4 Net Weight 19.36  
Emergency Contact Capital Environmental Services, Inc. 502 652-8999

16. 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.

Printed/Typed Name  
Kim Harris

Signature  
*[Signature]*

Month Day Year  
08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Robert H. Spore Sr

Signature  
*[Signature]*

Month Day Year  
08 26 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
*[Signature]*

Month Day Year  
08 26 06

GENERATOR

TRANSPORTER

FACILITY

339

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00 | DT | 20 | T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# 339/1270640  
34 Net Weight 47500  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name *RM HALT*

Signature *[Signature]*

Month Day Year 08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Steve Cuthbert*

Signature *[Signature]*

Month Day Year 8 26 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

340

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 448-8703 Attn: Rob Schonk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-448-2781

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666  
10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757 865-8070

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Non RCRA, Non DOT Soil contaminated with Wood Debris	001	DT	20	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 1270639  
33 Net Weight 20.47  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8888

16. 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.

Printed/Typed Name: *BM Hart* Signature: *[Signature]* Month: . Day: . Year: .

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: *[Signature]* Signature: *[Signature]* Month: 08 Day: 26 Year: 06

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name: Signature: Month: . Day: . Year: .

GENERATOR'S COPY

GENERATOR  
TRANSPORTER  
FACILITY

341

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-0703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 665-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
001 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# 1270641  
3 Net Weight 19.34  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8098

16. 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.

Printed/Typed Name *R M HART*

Signature *R M HART*

Month Day Year  
08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

342

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers-  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00.1 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

1270645

P-62

Net Weight:

19.78

Emergency Contact: Capital Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name

Jim Hant

Signature

[Signature]

Month Day Year  
08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

J. Lockman/Project Trucking

Signature

[Signature]

Month Day Year  
08 26 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

[Large Signature]

Signature

Month Day Year  
08 26 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

343

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
CAH Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1270649  
31 Net Weight 19.17  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name *BM Hart*

Signature *[Signature]*

Month Day Year  
08/26/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature *[Signature]*

Month Day Year  
8/26/06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

344

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2757

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-442-2781

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668  
10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757 865-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118538

Transaction# 1270653

SNT 30

Net Weight: 2.16 Ton

Gross 67540  
Tare 25340  
Net 43200

Emergency Contact: Capital Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name: R M HART

Signature: [Signature]

Month Day Year: 08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: Wayne Bagshaw

Signature: [Signature]

Month Day Year: 08 31 06

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year: 8. 26. 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

345

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

.

c.

.

d.

.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 1270647  
15 Net Weight: 24.88  
Emergency Contact: Capital Environmental Services, Inc. 302 562-8000

16. 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.

Printed/Typed Name R M HART

Signature [Signature]

Month Day Year 08/26/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature [Signature]

Month Day Year 08/26/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature [Signature]

Month Day Year 08/26/06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

346

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Berthel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 866-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction#: 1270458  
Net Weight: 20.16  
Emergency Contact: Capital Environmental Services, Inc. 302 862-8999

16. 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.

Printed/Typed Name R M ITANT

Signature [Signature]

Month Day Year 08 26 00

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name [Signature]

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

347

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schank

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23068

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 127 0660

10

Net Weight: 22.61

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

SM HART

Signature

[Signature]

Month Day Year

08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

18 10 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

348

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
~~C&H Trucking~~ **ATCO**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-449-2781**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23666**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 865-8070**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

00 / DT 20 T

b.  
c.  
d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# **1270667**

**AT-16**

Net Weight **26.02**

Emergency Contact: Capitol Environmental Services, Inc. 302 852-9999

16. 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.

Printed/Typed Name **R M HANT**

Signature *[Signature]*

Month Day Year **09/26/06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature *[Signature]*

Month Day Year **18/26/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature *[Signature]*

Month Day Year **18/26/06**

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

349

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone (757) **445-6703** Attn: **Rob Schonk**

5. Transporter 1 Company Name  
~~C&H Trucking~~ **Puryear** 6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-449-2781**

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23666** 10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone

**757 865-8070**

11. Waste Shipping Name and Description

12. Containers 13. Total Quantity 14. Unit Wt/Vol

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

No. Type Quantity Unit

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 118539** **Transaction# 1270668**  
**P-61** **Net Weight: 21.85**  
**Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999**

16. 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.

Printed/Typed Name **RM HART**

Signature *[Signature]*

Month Day Year  
**08 26 05**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **CECIL PAUL**

Signature *[Signature]*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature *[Signature]*

Month Day Year  
**18 26 05**

GENERATOR  
TRANSPORTER  
FACILITY

TRANSPORTER #2

350

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 446-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
~~CAH Trucking~~ **ATCO**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1270669

AT-11

Net Weight: 20.27

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name **RM HART**

Signature *[Signature]*

Month Day Year **08 26 00**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **LEON BRILLO**

Signature *[Signature]*

Month Day Year **08 26 00**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature *[Signature]*

Month Day Year

TRANSPORTER

FACILITY

TRANSPORTER #2

352

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone: (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-440-2761

7. Transporter 2 Company Name: \_\_\_\_\_  
8. US EPA ID Number: \_\_\_\_\_

B. Transporter's Phone: \_\_\_\_\_

9. Designated Facility Name and Site Address:  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666  
10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757 865-6070

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Non RCRA, Non DOT Soil contaminated with Wood Debris	001	DT	20	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 #7 Transaction#: 127664  
Net Weight: 19.53  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8009

16. 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.

Printed/Typed Name: *RM HART* Signature: *[Signature]* Month: 08 Day: 26 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: *Diane* Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name: \_\_\_\_\_ Signature: *[Signature]* Month: 8 Day: 26 Year: 06

TRANSPORTER #2

GENERATOR  
TRANSPORTER  
FACILITY

353

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schorik

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non-RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118530

Transaction# 1270671

14

Net Weight: 27.45

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name *R M HART*

Signature *R M HART*

Month Day Year  
08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Q. Cross*

Signature *Q. Cross*

Month Day Year  
08 26 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name Signature Month Day Year

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

354

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-0703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1278672

24.18

16

Net Weight:

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name *B M HART*

Signature *[Signature]*

Month Day Year *05 26 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature *[Signature]*

Month Day Year *18 11 06*

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

355

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Container No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118538 Transaction# 1270678  
Net Weight 25.77  
Emergency Contact: Capital Environmental Services, Inc. 302 552-8980

16. 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.

Printed/Typed Name  
R M HART

Signature  
Month Day Year  
08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year  
08 26 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name  
Signature  
Month Day Year  
08 26 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

356

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

↑ GENERATOR ↓

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-449-3761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757 855-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

.. .

.. .

20 T

b.

.. .

.. .

.. .

c.

.. .

.. .

.. .

d.

.. .

.. .

.. .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1270676  
18 Net Weight: 26.26  
Emergency Contact: Capital Environmental Services, Inc. 302 682-8999

16. 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.

Printed/Typed Name *B M Ham*

Signature *B M Ham*

Month Day Year  
*08 26 00*

↑ TRANSPORTER ↓

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *SW Falls*

Signature *SW Falls*

Month Day Year

↑ FACILITY ↓

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
*08 26 00*

GENERATOR'S COPY

357

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23611-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
006 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#: 127689

DOB #6

Net Weight: 21.49

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name R M HART

Signature [Signature]

Month Day Year 08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name [Name]

Signature [Signature]

Month Day Year 08 26 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name [Name]

Signature [Signature]

Month Day Year 08 26 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY



359

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-440-2781

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23656  
10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757 885-8070

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Non RCRA, Non DOT Soil contaminated with Wood Debris	001	DT	20	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1270696  
32 Net Weight: 20.74  
Emergency Contact: Capital Environmental Services, Inc 302 852-8990

16. 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.

Printed/Typed Name: R M HARRIS Signature: [Signature] Month: 08 Day: 26 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Signature: Month: Day: Year:

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest, except as noted in Item 19.  
Printed/Typed Name: Signature: Month: Day: Year:

GENERATOR

TRANSPORTER

FACILITY

360

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-442-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Ethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

DT

001

7.0

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115538

Transaction#

1270697

4

Net Weight

26.72 T

Emergency Contact: Capital Environmental Services, Inc. 302 652-8939

16. 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.

Printed/Typed Name

B M HART

Signature

*B M Hart*

Month Day Year

08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Robert S. ...

Signature

*Robert S. ...*

Month Day Year

08 27 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

08 27 06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

361

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-6070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No.

Type

DT

T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#:

67640

33

Net Weight:

25780

Emergency Contact: Capital Environmental Services, Inc. 302 882-8999

16. 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.

Printed/Typed Name

B M HART

Signature

[Signature]

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR'S COPY

TRANSPORTER

FACILITY

362

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703 Attn. Rob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED.

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED.

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00.1 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction#  
34 Net Weight  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8000

16. 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.

Printed/Typed Name  
B.M. HART

Signature  
*B.M. Hart*

Month Day Year  
8 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Steve Coulter

Signature  
*Steve Coulter*

Month Day Year  
8 26 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
8 26 06

GENERATOR

TRANSPORTER

FACILITY

363

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-855-0070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No. Type

001

DT

70

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

3

Net Weight

Emergency Contact: Capital Environmental Services, Inc. 302 662-8000

16. 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.

Printed/Typed Name

R M HART

Signature

[Signature]

Month Day Year

08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

10 11 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

304

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 895-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116530

Transaction# 1270701

15

Net Weight: 22.58

Emergency Contact: Capital Environmental Services, Inc. 302 852-8998

16. 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.

Printed/Typed Name *BM HART*

Signature *[Signature]*

Month Day Year  
08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature *[Signature]*

Month Day Year  
08 26 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

368

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRM: A)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Val

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#:

P-62

Net Weight:

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

*RM Hunt*

Signature

*RM Hunt*

Month Day Year  
08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*J Locking / Puryear Trucking*

Signature

*JL P-62*

Month Day Year  
08 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

*BS*

Signature

*BS*

Month Day Year  
08 29 06

GENERATOR

TRANSPORTER

FACILITY

ORIGINAL - RETURN TO GENERATOR

366

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Astr: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23660

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-855-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction#:  
31 Net Weight:  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8099

16. 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.

Printed/Typed Name *BM HART*

Signature *BM HART*

Month Day Year *08 26 06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year *08 26 06*

GENERATOR

TRANSPORTER

FACILITY

367

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No:  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23660

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757-885-8870

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116639

Transaction#

gross 69,620

30

Net Weight 22.19

Tare 25,240

End NET 44,380

Emergency Contact: Capitol Environmental Services, Inc. 302-852-8969

16. 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.

Printed/Typed Name

RM HART

Signature

[Signature]

Month Day Year

08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Wayne [Signature]

Signature

[Signature]

Month Day Year

08 26 06

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

08 26 06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

368

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#:

1270746

Net Weight:

21.57

Emergency Contact: Capital Environmental Services, Inc. 302 862-8989

16. 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.

Printed/Typed Name

RM Hart

Signature

*RM Hart*

Month Day Year

09 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

*Rich Johnston*

Month Day Year

09 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

.....

19. Discrepancy Indication Space

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

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

10 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

369

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DDT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project # 118530 Transaction #: 1270733  
14 Net Weight: 23.24  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.  
Printed/Typed Name *R M HANT* Signature *R M HANT* 08/28/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *D. Cross* Signature *D. Cross* 08/28/06

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name Signature 08/28/06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

370

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone (757) 445-5703 Attn: Rob Schonk

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# 1270232  
16 Net Weight 21.65  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name *R M HAN*

Signature *[Signature]* Month Day Year 08/28/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *K Scott*

Signature *[Signature]* Month Day Year 08/28/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]* Month Day Year 11/08/06

GENERATOR  
TRANSPORTER  
FACILITY

371  


**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
 NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
 Commander, Navy Region Mid-Atlantic (CNRMA)  
 1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
 Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
 C&H Trucking

6. US EPA ID Number  
 NOT REQUIRED

A. Transporter's Phone  
 757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
 Bethel Sanitary Landfill  
 100 North Park Ln.  
 Hampton, VA 23666

10. US EPA ID Number  
 NOT REQUIRED

C. Facility's Phone  
 757 865-8070

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
--------------------	------	--------------------	-----------------

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001	DT	20	T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115533

Transaction#

1270735

11

Net Weight:

17-21

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8990

16. 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.

Printed/Typed Name  
 Kim Han

Signature  


Month Day Year  
 03 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature  
 Mark

Month Day Year  
 8 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
 T. W. [Signature]

Signature  


Month Day Year  
 4 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

372

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-5703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

A. Transporter's Phone  
757-449-2781

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name

B. Transporter's Phone

8. US EPA ID Number  
**NOT REQUIRED**

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

C. Facility's Phone  
757 865-8070

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description  
a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers No. Type  
001 DT

13. Total Quantity  
20

14. Unit Wt/Vol  
T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110539 Transaction# 1270739  
DDB6 Net Weight: 20.2  
Emergency Contact: Capitol Environmental Services, Inc. 802 862-8998

16. 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.  
Printed/Typed Name: R M HART Signature: [Signature] Month: . Day: . Year: .

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: [Signature] Signature: [Signature] Month: . Day: . Year: .

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

19. Discrepancy Indication Space

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

Printed/Typed Name: [Signature] Signature: [Signature] Month: . Day: . Year: .

GENERATOR

TRANSPORTER

FACILITY

373

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 446-5703 Attn: Rob Schronk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110530 Transaction# 1270731  
33 Net Weight: 1809  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name *RM HART*

Signature *[Signature]* Month Day Year *10/28/06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year

GENERATOR

TRANSPORTER

FACILITY

374

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2797

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schank

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-449-2761

7. Transporter 2 Company Name

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Norfolk, VA 23068

10. US EPA ID Number: **NOT REQUIRED**  
C. Facility's Phone: 757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110535 Transaction# 1270760  
31 Net Weight 17.84  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8099

16. 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.

Printed/Typed Name: B. M. HANCOCK

Signature: [Signature] Month Day Year: 08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year: 08 28 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

375

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CFRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8700 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23060

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-886-8079

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA Non DOT Soil contaminated with Wood Debris

Containers: 70  
Type: DT  
Unit: T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118639 Transaction# 1270748  
AT14 Net Weight 25.2  
Emergency Contact: Capital Environmental Services, Inc. 302-882-8698

16. 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.

Printed/Typed Name Signature Month Day Year  
08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name Signature Month Day Year  
14 08 06

GENERATOR

TRANSPORTER

FACILITY

376

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-5703 Attn: Rob Schonk

5. Transporter 1 Company Name  
~~Capital Fracking~~ **ATCO CORP**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23888

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118838 Transaction#: 1270757  
**AT 18** Net Weight: ~~511.40~~ **25.57**  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name **R M HARRIS**

Signature *[Signature]* Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature *[Signature]* Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature *[Signature]* Month Day Year **8 28 06**

GENERATOR

TRANSPORTER

FACILITY

377

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23806

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00/1 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116538

Transaction# 1270755

Fisk 4

Net Weight 17.04

Emergency Contact: Capital Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name  
B M Hart

Signature  
B M Hart

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

378

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

A. Transporter's Phone  
757-449-2781

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name

B. Transporter's Phone

8. US EPA ID Number

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23665

C. Facility's Phone  
757-865-8070

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description  
a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers No. Type  
001 DT

13. Total Quantity  
20

14. Unit Wt/Vol  
T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115539 Transaction# 12707876  
Net Weight: 18.60  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name *JMM Haver*

Signature *JMM Haver*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Robert K Glover SR*

Signature *Robert K Glover SR*

Month Day Year *18 06*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

379

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 855-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118530

Transaction# 1220749

18

Net Weight: 22.18

Emergency Contact: Capital Environmental Services, Inc. 302 852-8989

16. 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.

Printed/Typed Name  
Kim Hart

Signature  
[Signature]

Month Day Year  
08/28/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
JWF

Signature  
[Signature]

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
[Signature]

Month Day Year  
10/15/06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

380

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
CAH Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project#: 118539 Transaction#: 127 0751  
12 Net Weight: 19.56  
Emergency Contact: Capitol Environmental Services, Inc. 302 657-8098

16. 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.

Printed/Typed Name *R.M. Hagan*

Signature *R.M. Hagan*

Month Day Year 10 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *R. De. Baker*

Signature *R. De. Baker*

Month Day Year 10 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year 10 28 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

381

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2757

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking *Puycar Trucking* 6. US EPA ID Number **NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Debel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666 10. US EPA ID Number **NOT REQUIRED**

C. Facility's Phone  
757-885-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

06/ DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project#: 118538 Transaction#: 1270758  
P-62 Net Weight: 20.2 tons  
Emergency Contact: Capitol Environmental Services, Inc. 302-852-8098

16. 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.

Printed/Typed Name *BM HART*

Signature *BM HART*

Month Day Year  
08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *J. Lechman/Puycar Trucking*

Signature *JL / P-62*

Month Day Year  
09 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
08 29 06

GENERATOR

TRANSPORTER

FACILITY

382

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1616 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name **Atco** 6. US EPA ID Number **NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number **NOT REQUIRED**  
C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 2.0 T

b.

...

c.

...

d.

...

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# 1270759  
AT-10 Net Weight: 19.98 tons  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name **Bill Hart**

Signature *[Signature]* Month Day Year **08 28 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Bill Schank**

Signature *[Signature]* Month Day Year **08 28 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year

GENERATOR

TRANSPORTER

FACILITY

383

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
~~CRU Trucking~~ **PURYEAR-70** 6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2761

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668 10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 665-8070

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Non RCFA, Non DOT Soil contaminated with Wood Debris	001	DT	20	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# **1270777**  
**P-70** Net Weight: **23.29**  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8889

16. 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.  
Printed/Typed Name **Rm Hart** Signature **[Signature]** Month Day Year **08 17 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Leon Briggs** Signature **[Signature]** Month Day Year **08 17 06**

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name Signature Month Day Year **08 17 06**

TRANSPORTER #2

GENERATOR  
TRANSPORTER  
FACILITY

384

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schantz

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-445-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-6070

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 70 T

b.

.

c.

.

d.

.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118530

Transaction#

1270914

4

Net Weight

19.80

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8909

16. 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.

Printed/Typed Name *RM HART*

Signature *[Signature]*

Month Day Year  
08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Dennis W. [Signature]*

Signature *[Signature]*

Month Day Year  
03 23 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
12 05 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

385

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 448-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name  
*Dum...*

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23060

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

.. DT .. 70 T

b. .. ..

c. .. ..

d. .. ..

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project # 110599

Transaction #

1270783

896

Net Weight:

D-59

Emergency Contact Capital Environmental Services, Inc. 302 652-0000

16. 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.

Printed/Typed Name R M HART

Signature *R M Hart*

Month Day Year 08/20/05

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature *[Signature]*

Month Day Year 08/20/05

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

386

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

...

c.

...

d.

...

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1270785

P-73

Net Weight: 26.44

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8900

16. 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.

Printed/Typed Name RM Haver

Signature [Signature]

Month Day Year 10 28 09

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature [Signature]

Month Day Year 10 28 09

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

387

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737.

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23063

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 885-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

OT 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1270776

P-53

Net Weight 25.60

Emergency Contact: Capital Environmental Services, Inc. 302 852-9999

16. 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.

Printed/Typed Name RM HART

Signature [Signature]

Month Day Year 08 28 96

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature [Signature]

Month Day Year 08 28 96

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

388

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23866

C. Facility's Phone  
757 855-8070

11. Waste Shipping Name and Description  
a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
b.  
c.  
d.

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
001	DT	7.0	T
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.	.	.	.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1270772  
32 Net Weight 17.7  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name *RM Haag*

Signature *[Signature]* Date 8/26/05

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Date 8/26/05

GENERATOR  
TRANSPORTER  
FACILITY

TRANSPORTER #2

389

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-449-2751

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number: **NOT REQUIRED**  
C. Facility's Phone: 757-855-0070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

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c.

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d.

.....

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 113590 Transaction# 1270778  
Net Weight 1703  
Emergency Contact: Capital Environmental Services, Inc. 802 852-8900

16. 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.

Printed/Typed Name: *Kim Hahn*

Signature: *[Signature]* Month Day Year: 08/28/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature Month Day Year: 08/28/06

GENERATOR

TRANSPORTER

FACILITY

390

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (767) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757-865-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 148539

Transaction# 1270775

Net Weight 18.78

Emergency Contact: Capital Environmental Services, Inc. 302-652-8999

16. 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.

Printed/Typed Name

B. M. Hart

Signature

*B. M. Hart*

Month Day Year

08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

08 28 06

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

R. 12 28 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

391

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

2 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1270784

26

Net Weight 18.90

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name *B. M. Hart*

Signature *[Signature]*

Month Day Year *09/28/06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *Julius W. Perry*

Signature *[Signature]*

Month Day Year *9/28/06*

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature *[Signature]*

Month Day Year *10/28/06*

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

392

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-449-2781

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

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

70

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1270789  
Fork 5 Net Weight: 20.64  
Emergency Contact: Capitol Environmental Services, Inc. 302 552-8999

16. 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.

Printed/Typed Name: *BM Harris*

Signature: *[Signature]*

Month Day Year: 8 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: *Allen Washington*

Signature: *Allen Washington*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature: *[Signature]*

Month Day Year: 8 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

393

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110530

Transaction# 1270793

F51K6

Net Weight: 20.14

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name *RM HART*

Signature *[Signature]*

Month Day Year  
08 18 05

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *PAUL KELLER*

Signature *Paul Keller*

Month Day Year  
10 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year  
10 18 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

394

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-5703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-665-8070

11. Waste Shipping Name and Description

12. Containers No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00 / DT 70 T

b.

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c.

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d.

.....

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 1270810  
34 Net Weight 41120  
Emergency Contact: Capital Environmental Services, Inc. 502 652-8998

16. 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.

Printed/Typed Name *RM Han*

Signature *RM Han*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Steve Cauther*

Signature *Steve Cauther*

Month Day Year *8 28 11*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year *8 28 11*

GENERATOR

TRANSPORTER

FACILITY

395

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 685-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No.

Type  
DT

Quantity  
20

Unit  
T

b.  
c.  
d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1270805  
16 Net Weight 21.62  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
R M HART

Signature  
*R M Hart*

Month Day Year  
8 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
R SCOTT

Signature  
*R Scott*

Month Day Year  
8 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
*[Signature]*

Month Day Year  
8 28 06

GENERATOR

TRANSPORTER

FACILITY

396

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1278804  
14 Net Weight: ~~25.25~~ 25.25  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name R M HARRIS

Signature [Signature]

Month Day Year 08 28 05

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name Q. Cross

Signature [Signature]

Month Day Year 08 28 05

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature [Signature]

Month Day Year 08 28 05

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

397

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St, Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 665-8070

11. Waste Shipping Name and Description

12. Containers  
No. | Type- | 13. Total Quantity | 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 | DT | 20 | T

b.  
c.  
d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1270817

SNT 30

Net Weight: 20.29

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8998

TON

16. 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.

Printed/Typed Name R M HART

Signature [Signature]

Month Day Year 05 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Wayne Bashaw

Signature Wayne Bashaw

Month Day Year 8 28 06

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature [Signature]

Month Day Year 8 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

398

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-449-2761

7. Transporter 2 Company Name: \_\_\_\_\_  
8. US EPA ID Number: \_\_\_\_\_

B. Transporter's Phone: \_\_\_\_\_

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number: **NOT REQUIRED**  
C. Facility's Phone: 757 885-8070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 70 T

b. \_\_\_\_\_

\_\_\_\_\_

c. \_\_\_\_\_

\_\_\_\_\_

d. \_\_\_\_\_

\_\_\_\_\_

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110539 Transaction# 1270808  
Net Weight: 21.35  
Emergency Contact: Capitol Environmental Services, Inc. 302 662-8990

16. 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.

Printed/Typed Name: *B M Hares*

Signature: *[Signature]*

Month Day Year: 8 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: \_\_\_\_\_

Signature: *[Signature]*

Month Day Year: 8 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Month Day Year: \_\_\_\_\_

19. Discrepancy Indication Space

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

Printed/Typed Name: \_\_\_\_\_

Signature: *[Signature]*

Month Day Year: 8 29 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

399

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schronk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

127 0904

9-63

Net Weight

20.52

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name  
RM HART

Signature  
RM HART

Month Day Year  
08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name  
Tacke Blackwell

Signature  
Tacke Blackwell

Month Day Year  
08 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

400

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
2007 7.0 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction#: 1270818  
Net Weight: 18.47  
DDBC  
Emergency Contact: Capital Environmental Services, Inc. 302 862-8099

16. 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.

Printed/Typed Name  
R M Harris

Signature  
[Signature] Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
Month Day Year  
18 12 2006

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

401

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

009 DT 70 T

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
009	DT	70	T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118530

Transaction#:

127 0829

33

Net Weight:

19.64

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name  
R M HANT

Signature  
*R M HANT*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
*W. J. ...*

Signature  
*W. J. ...*

Month Day Year

8/28/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature  
*[Signature]*

Month Day Year

8/28/06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

402

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 855-8070

11. Waste Shipping Name and Description

12. Containers No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction#: 127 0823  
15 Net Weight: 22.56  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8099

16. 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.

Printed/Typed Name *BM Harris*

Signature *[Signature]*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature *Red Iron*

Month Day Year  
12 01 01

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year  
8 28 01

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

403

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
~~SAH Tracking~~ **ATCO**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 855-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118532 Transaction# 1770838  
**AT-14** Net Weight 23-83  
Emergency Contact: Capitol Environmental Services, Inc. 802 852-8899

16. 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.

Printed/Typed Name **BM Haas** Signature **BM Haas** Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **F. V. ...** Signature **F. V. ...** Month Day Year **5 25 06**

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

19. Discrepancy Indication Space

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

Printed/Typed Name **Kenn Adams** Signature **Kenn Adams** Month Day Year **18 18 06**

GENERATOR

TRANSPORTER

FACILITY

404

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-0703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1270841  
18 Net Weight: 19.19  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
RM HART

Signature  
*RM Hart*

Month Day Year  
10 28 05

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
KW Falls

Signature  
*KW Falls*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Laura Adams

Signature  
*L Adams*

Month Day Year  
10 28 05

GENERATOR

TRANSPORTER

FACILITY

405

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

A. Transporter's Phone  
757-449-2761

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name

B. Transporter's Phone

8. US EPA ID Number  
**NOT REQUIRED**

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

C. Facility's Phone  
757 285-8070

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Non RCRA, Non DOT Soil contaminated with Wood Debris	00	DT	20	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115530 Transaction# 1270840  
Net Weight 16.34  
HB B 12  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name *Rm Hart*

Signature *Rm Hart* Month Day Year 08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *R. Neil Baker*

Signature *R. Neil Baker* Month Day Year 08 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Laurie Adams*

Signature *Laurie Adams* Month Day Year 8 18 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

406

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-0070

11. Waste Shipping Name and Description  
a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
001	DT	20	T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116530

Transaction#

1270837

Net Weight

16.06

Emergency Contact: Capital Environmental Services, Inc. 302 652-8989

16. 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.

Printed/Typed Name  
B M Hackett

Signature

Month Day Year  
08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
M H CLOVER SR

Signature

Month Day Year  
08 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
L Adams

Signature

Month Day Year  
08 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

407

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone (757) 448-8703 Attn: Rob Schonk

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking  
6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name  
8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23060  
10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-0070

11. Waste Shipping Name and Description

12. Containers

No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00/ DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116538

Transaction# 127 0851

FSK 4

Net Weight: 15.62

Emergency Contact: Capital Environmental Services, Inc. 302 852-8899

16. 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.

Printed/Typed Name RM HAZO

Signature [Signature]

Month Day Year 08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name [Signature]

Signature [Signature]

Month Day Year 10 18 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

408

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. 2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name ~~Company~~ **ATCO CORP** 6. US EPA ID Number **NOT REQUIRED**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name 8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668 10. US EPA ID Number **NOT REQUIRED**

C. Facility's Phone  
757 855-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116538 Transaction# 1270861  
AT-18 Net Weight: 24.36  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name **RM HART**

Signature *[Signature]* Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **JOHN CRANE**

Signature *[Signature]* Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name **Laura Adams**

Signature *[Signature]* Month Day Year

GENERATOR  
TRANSPORTER  
FACILITY

TRANSPORTER #2

409

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
S&H-Trucking A Toc

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 . 20 T

b. . . . .

c. . . . .

d. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116538 Transaction# 1270845  
ATCO Net Weight 1575  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8900

16. 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.

Printed/Typed Name *RM HART* Signature *[Signature]* Month Day Year . . .

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Bill Holtz* Signature *[Signature]* Month Day Year 8 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name Signature Month Day Year . . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Laura Adams* Signature *[Signature]* Month Day Year 8 28 06

GENERATOR  
TRANSPORTER  
FACILITY

410

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schork

5. Transporter 1 Company Name  
GSH Trucking Puryear Trucking  
6. US EPA ID Number **NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666  
10. US EPA ID Number **NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110539 Transaction# 1270859  
P-62 Net Weight 19.6#  
Emergency Contact: Capital Environmental Services, Inc. 302-852-8999

16. 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.

Printed/Typed Name *BM Hart*

Signature *[Signature]*

Month Day Year  
08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *J. Puryear / Puryear Trucking*

Signature *[Signature]*

Month Day Year  
09 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Jackie Blackwell*

Signature *[Signature]*

Month Day Year  
08 28 06

GENERATOR

TRANSPORTER

FACILITY

411

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone.  
757 665-8070

11. Waste Shipping Name and Description

12. Containers No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

600 DT 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1270860  
31 Net Weight 17.82  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name *RM HART*

Signature *RM HART*

Month Day Year *08 28 06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *William A. ...*

Signature *William A. ...*

Month Day Year *18 08 06*

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

412

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (GNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (787) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

A. Transporter's Phone  
757-440-2781

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name

B. Transporter's Phone

8. US EPA ID Number

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

C. Facility's Phone  
757-885-8070

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description  
a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
001	DT	20	T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118538 Transaction# 1270888  
32 Net Weight 14.78  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8888

16. 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.  
Printed/Typed Name *SM Harris* Signature *[Signature]* Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name *Adam Adams* Signature *[Signature]* Month Day Year *18 28 07*

GENERATOR

TRANSPORTER

FACILITY

413

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8700 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers

No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1270954

29

Net Weight: 17.47

Emergency Contact: Capital Environmental Services, Inc. 302 662-8099

16. 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.

Printed/Typed Name *RM Hart*

Signature *RM Hart*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *R Luffee*

Signature *R Luffee*

Month Day Year  
8/28/06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Laura Adams*

Signature *L Adams*

Month Day Year  
8/28/06

GENERATOR

TRANSPORTER

FACILITY

414

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-5703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 985-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 127 0887

P-53

Net Weight: 24.37

Emergency Contact: Capitol Environmental Services, Inc. 302 682-8099

16. 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.

Printed/Typed Name *RM HART*

Signature *[Signature]*

Month Day Year *08/23/06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Tracie M. Maxwell*

Signature *[Signature]*

Month Day Year *08/23/06*

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

415

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23086

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 127 0888

3

Net Weight: 48-64

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name *RM Haney*

Signature *RM Haney*

Month Day Year  
08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature *[Signature]*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Adams*

Signature *J Adams*

Month Day Year  
8 28 06

TRANSPORTER #2

GENERATOR  
TRANSPORTER  
FACILITY

416

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2757

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name: CBH Trucking  
6. US EPA ID Number: **NOT REQUIRED.**

A. Transporter's Phone: 757-440-2781

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number: **NOT REQUIRED.**  
C. Facility's Phone: 757-885-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

OT

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110536 Transaction# 127119  
P-70 Net Weight: 24.31  
Emergency Contact: Capital Environmental Services, Inc. 302-652-8000

16. 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.

Printed/Typed Name: KM HART

Signature: [Signature] Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: LEON BRIGGS

Signature: [Signature] Month Day Year: 10/28/08

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: [Name]

Signature: [Signature] Month Day Year

GENERATOR  
TRANSPORTER  
FACILITY

417

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 805-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
001	DT	20	T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

1270894

P-55

Net Weight

17.21 - 34400

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8899

16. 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.

Printed/Typed Name  
B M HART

Signature  
*B M Hart*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

418

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

Site:  
Paradise Creek

5. Transporter 1 Company Name  
CSH Trucking  
6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666  
10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 864-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1270897  
P-73 Net Weight: 24.29  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

**16. 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.

Printed/Typed Name *BM Harris*

Signature *[Signature]* Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Laura Adams*

Signature *[Signature]* Month Day Year *16 8 00*

GENERATOR

TRANSPORTER

FACILITY

419

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNFMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23060

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-865-0070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT T

001 70

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118530

Transaction# 1270907

76

Net Weight 19.06

Emergency Contact: Capaci Environmental Services Inc. 302-662-8692

16. 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.

Printed/Typed Name

Signature

Month Day Year

05 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

420

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1270908  
FISK 5 Net Weight 19.78  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8989

16. 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.

Printed/Typed Name *Ben Hart*

Signature *[Signature]* Month Day Year 08/26/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Allen Washington*

Signature *Allen Washington* Month Day Year 8/28/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Kara Adams*

Signature *[Signature]* Month Day Year 8/28/06

GENERATOR

TRANSPORTER

FACILITY

421

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

20 1 DT

20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1270906

Fisc 6

Net Weight: 19.92

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name **RM HART**

Signature *RM Hart*

Month Day Year **08 28 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **PAUL KELLER**

Signature *Paul Keller*

Month Day Year **08 28 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name **h artz Adams**

Signature *h artz Adams*

Month Day Year **18 12 06**

GENERATOR

TRANSPORTER

FACILITY

422

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schonk

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking

A. Transporter's Phone  
757-449-2761

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name

B. Transporter's Phone

8. US EPA ID Number

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

C. Facility's Phone  
757 865-8070

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description  
a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
b.  
c.  
d.

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
001	DT	20	T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1270896  
C H 14 Net Weight 22.05  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name *BM Harris*

Signature *[Signature]*

Month Day Year  
08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *A. Cross*

Signature *[Signature]*

Month Day Year  
08 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *K. Adams*

Signature *[Signature]*

Month Day Year  
12 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

423

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 OT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118639 Transaction# 1270901  
16 Net Weight 19.43  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8000

16. 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.

Printed/Typed Name *RM HART*

Signature *RM Hart* Month Day Year 08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *R Scott*

Signature *R Scott* Month Day Year 08 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Adams*

Signature *Adams* Month Day Year 08 28 06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

424

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23068

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1270908  
Net Weight: 20.45  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8000

16. 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.

Printed/Typed Name  
RM HART

Signature  
*[Signature]*

Month Day Year  
8 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
M. Smith

Signature  
*[Signature]*

Month Day Year  
8 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
K. Adams

Signature  
*[Signature]*

Month Day Year  
8 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

425

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2787

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23686

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 855-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 OT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1270915  
34 Net Weight 39460 19.73  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8000

16. 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.

Printed/Typed Name *RM Hart*

Signature *RM Hart*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Steve Coulter*

Signature *Steve Coulter*

Month Day Year *8/29/06*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Tracie Binkley*

Signature *Tracie Binkley*

Month Day Year *10/17/06*

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

426

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

06 DT 20 T

11. Waste Shipping Name and Description	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. Non RCRA, Non DOT Soil contaminated with Wood Debris	06	DT	20	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118538 Transaction#: 1270934  
30 Net Weight: 20.55 Ton  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-9999

16. 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.

Printed/Typed Name BM HART Signature [Signature] Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Wayne BASHAW Signature Wayne Bashaw Month Day Year 18 08 20

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Laura Adams Signature [Signature] Month Day Year 18 08 20

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

477

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampson, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 965-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116630

Transaction# 1270917

DDBC

Net Weight: 18.27

Emergency Contact: Capital Environmental Services, Inc. 302 652-8000

16. 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.

Printed/Typed Name *B M Hantz*

Signature *B M Hantz*

Month Day Year  
08 28 00

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *E. Bates*

Signature *E Bates*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Lutz - Hantz*

Signature *Lutz - Hantz*

Month Day Year  
18 08 06

GENERATOR'S COPY

GENERATOR  
TRANSPORTER  
FACILITY

428

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

A. Transporter's Phone  
757-448-2761

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23866

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No. Type

Quantity

Unit Wt/Vol

001 DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116538 Transaction# 1270923  
15 Net Weight 20.9  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8000

16. 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.

Printed/Typed Name *BM HART*

Signature *[Signature]* Month Day Year 02 25 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Rich Truman*

Signature *[Signature]* Month Day Year 02 25 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Laura Adams*

Signature *[Signature]* Month Day Year 06 18 06

GENERATOR

TRANSPORTER

FACILITY

429

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 866-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

20

DT

20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110630 Transaction# 1270931  
33 Net Weight 17.33  
Emergency Contact: Capital Environmental Services, Inc. 302 552-8000

16. 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.

Printed/Typed Name  
RM Hunt

Signature  
RM Hunt

Month Day Year  
08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Robert Schonk

Signature  
Robert Schonk

Month Day Year  
08 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Laura Adams

Signature  
L. Adams

Month Day Year  
18 28 06

GENERATOR

TRANSPORTER

FACILITY

430

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schork

5. Transporter 1 Company Name  
C&H Trucking *ATCO*

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

C. Facility's Phone  
757 865-6670

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00.1 DT 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1270944  
*AT-14* Net Weight: 24.95  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name *BM HART*

Signature *[Signature]* Month Day Year *05 28 05*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *RAY LLOYD*

Signature *[Signature]* Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature *[Signature]* Month Day Year *8 18 06*

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *ADAMS*

Signature *[Signature]* Month Day Year *10 18 06*

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

431

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1270947  
5 Net Weight: 17.19  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8990

16. 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.

Printed/Typed Name *RM Hart*

Signature *RM Hart*

Month Day Year *08 28 06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *H.L. Thomas Sr*

Signature *H.L. Thomas Sr*

Month Day Year *10 27 06*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *W. Adams*

Signature *W. Adams*

Month Day Year *10 28 06*

GENERATOR

TRANSPORTER

FACILITY

432

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schank

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking  
6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666  
10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757 565-0070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DDT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1270941  
H8B12 Net Weight: 17-33  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8899

16. 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.

Printed/Typed Name *B.M. HART*

Signature *[Signature]* Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *R. Neil Baker*

Signature *[Signature]* Month Day Year *8 23 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *[Signature]*

Signature *[Signature]* Month Day Year *8 23 06*

GENERATOR

TRANSPORTER

FACILITY

433

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6700 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110539

Transaction# 1270946

18

Net Weight 21.63

Emergency Contact: Capital Environmental Services, Inc. 302 652-8099

16. 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.

Printed/Typed Name R M HART

Signature [Signature]

Month Day Year 8 18 00

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name SW FALLS

Signature [Signature]

Month Day Year 8 28 00

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Adams

Signature [Signature]

Month Day Year 8 25 00

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

434

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking  
6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668  
10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1270949  
AT-10 Net Weight: 17.97  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name [Signature]

Signature [Signature] Month Day Year 08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name John Morgan

Signature [Signature] Month Day Year 8 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name (Adam)

Signature (Adam) Month Day Year 8 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

435

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1010 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115538

Transaction# 127 0961

FRISK 4

Net Weight 17.61

Emergency Contact, Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name RMITAO

Signature [Signature]

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name John Bowers

Signature [Signature]

Month Day Year 8 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name John Bowers

Signature [Signature]

Month Day Year 8 28 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Adam S

Signature [Signature]

Month Day Year 8 28 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

436

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
CBM Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

.

c.

.

d.

.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110530 Transaction# 1270965  
P-62 Net Weight 20.93 TONS  
Emergency Contact: Capital Environmental Services, Inc. 302 662-8899

16. 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.

Printed/Typed Name *B.M. Hart*

Signature *[Signature]* Month Day Year 08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *J. L. ...*

Signature *[Signature]* Month Day Year 08 31 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Jackie ...*

Signature *[Signature]* Month Day Year 08 28 06

GENERATOR  
TRANSPORTER  
FACILITY

437

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-866-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
DT T  
06/ 70

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1270960  
31 Net Weight: ~~10.47~~ 18.47  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8099

16. 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.

Printed/Typed Name R M Hunt

Signature [Signature] Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name Curtis Overton

Signature [Signature] Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Curtis Overton

Signature [Signature] Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Jackie Blackwell

Signature [Signature] Month Day Year

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

438

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
CMT Trucking ATCO

A. Transporter's Phone  
757-440-2761

6. US EPA ID Number  
NOT REQUIRED.

7. Transporter 2 Company Name

B. Transporter's Phone

8. US EPA ID Number

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

C. Facility's Phone  
757 865-8070

10. US EPA ID Number  
NOT REQUIRED.

11. Waste Shipping Name and Description  
a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers No. Type  
1001 DT

b.

13. Total Quantity  
22

c.

14. Unit Wt/Vol  
T

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110539 Transaction# 1270973  
AT18 Net Weight 22.07  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8900

16. 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.

Printed/Typed Name B M HART

Signature [Signature] Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name JOHN CART

Signature [Signature] Month Day Year 8 23 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Steve Blackwell

Signature [Signature] Month Day Year 08 23 06

GENERATOR

TRANSPORTER

FACILITY

439

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNFMA)  
1610 Glibert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
001	DT	7.0	T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1270983

P-53

Net Weight 22.69

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name *RW HART*

Signature *[Signature]*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Stacie Blakwell*

Signature *[Signature]*

Month Day Year 08/19/06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

440

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone: (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-445-2781

7. Transporter 2 Company Name: \_\_\_\_\_  
8. US EPA ID Number: \_\_\_\_\_

B. Transporter's Phone: \_\_\_\_\_

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number:  
**NOT REQUIRED**

C. Facility's Phone: 757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

20/ DT 20 T

b. \_\_\_\_\_

c. \_\_\_\_\_

d. \_\_\_\_\_

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110530

Transaction# 1270986

32

Net Weight: 17.07

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8909

16. 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.

Printed/Typed Name: *RM Hant*

Signature: *RM Hant*

Month Day Year: . . .

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: *Eddie Perry*

Signature: *Eddie Perry*

Month Day Year: 8 26 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: \_\_\_\_\_

Signature: \_\_\_\_\_  
Month Day Year: . . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name: *Dickie Buckwell*  
Signature: *Dickie Buckwell*  
Month Day Year: 08 18 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

441

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

201 20 T

11. Waste Shipping Name and Description	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. Non RCRA, Non DOT Soil contaminated with Wood Debris	201	DT	20	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

127 0990

P-59

Net Weight

1734 - 3480  
680

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name *BM HART*

Signature *BM HART*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

*James Beary*

*James Beary*

8 28 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Adams*

Signature *Adams*

Month Day Year

8 28 06

TRANSPORTER #1

GENERATOR

TRANSPORTER

FACILITY

447

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schunk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: NOT REQUIRED

A. Transporter's Phone: 757-445-2781

7. Transporter 2 Company Name: \_\_\_\_\_  
8. US EPA ID Number: \_\_\_\_\_

B. Transporter's Phone: \_\_\_\_\_

9. Designated Facility Name and Site Address:  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number: NOT REQUIRED  
C. Facility's Phone: 757 865-8070

11. Waste Shipping Name and Description

12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 | DT | 20 | T

b. \_\_\_\_\_

\_\_\_\_\_

c. \_\_\_\_\_

\_\_\_\_\_

d. \_\_\_\_\_

\_\_\_\_\_

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 127 0989  
P-73 Net Weight 22.26  
Emergency Contact: Capital Environmental Services, Inc. 302 662-8888

16. 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.

Printed/Typed Name: *BM HART*

Signature: *[Signature]*

Month Day Year: 08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: *Puryear*

Signature: *[Signature]*

Month Day Year: 08 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Month Day Year: \_\_\_\_\_

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: *Adam*

Signature: *[Signature]*

Month Day Year: 08 28 06

GENERATOR

TRANSPORTER

FACILITY

443

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking  
6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066  
10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.  
c.  
d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116530

Transaction# 1270977

14

Net Weight 21.96

Emergency Contact: Capital Environmental Services, Inc. 302 662-8999

16. 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.

Printed/Typed Name *R M HART*

Signature *R M Hart*

Month Day Year *08 28 06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *J Cross*

Signature *J Cross*

Month Day Year *08 28 06*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *JACK PLUNKETT*

Signature *Jack Plunkett*

Month Day Year *08 28 06*

TRANSPORTER #2

GENERATOR  
TRANSPORTER  
FACILITY

444

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking

A. Transporter's Phone  
757-449-2761

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name  
8. US EPA ID Number  
9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

B. Transporter's Phone

10. US EPA ID Number  
**NOT REQUIRED**  
C. Facility's Phone  
757 855-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

601 DT 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116639 Transaction# 1270995  
16 Net Weight 18.16  
Emergency Contact: Capital Environmental Services, Inc. 302 862-8999

16. 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.

Printed/Typed Name *BMH Hart*

Signature *BMH Hart*

Month Day Year 8-28-06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *R. Scott*

Signature *R. Scott*

Month Day Year 8-28-06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Karen Adams*

Signature *K. Adams*

Month Day Year 8-28-06

GENERATOR

TRANSPORTER

FACILITY

445

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-5703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#

127 0996

Net Weight

20.94

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
RM Harris

Signature  
RM Harris

Month Day Year  
08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
M. Sank

Signature  
M. Sank

Month Day Year  
08 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
K. Adams

Signature  
K. Adams

Month Day Year  
08 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

446

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00/ DT 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110530 Transaction# 1271014  
P-63 Net Weight: 17.33  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name *BM HART*

Signature *[Signature]* Month Day Year 08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Knights David B.*

Signature *[Signature]* Month Day Year 10 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Laura Adams*

Signature *[Signature]* Month Day Year 8-28-06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

447

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-6070

11. Waste Shipping Name and Description

12. Containers

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No. Type Total Quantity Unit Wt/Vol

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction#: 1271006  
FCSK 6 Net Weight: 15.35  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name **R M Hart**

Signature *R M Hart* Month Day Year 08 25 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **PAUL KEHLER**

Signature *Paul Kehler* Month Day Year 08 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name **Kamira Adams**

Signature *K Adams* Month Day Year 18 28 06

GENERATOR

TRANSPORTER

FACILITY

448

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-445-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118538 Transaction# 1271007  
FSK S Net Weight 18.36  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8200

16. 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.

Printed/Typed Name R M Hans

Signature [Signature] 08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name ALLEN WASHINGTON

Signature [Signature] 08 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name L Adams

Signature [Signature] 08 28 06

GENERATOR

TRANSPORTER

FACILITY

449

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2757

Site:  
Paradise Creek

4. Generator's Phone (767) 445-0703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110530

Transaction# 127 1003

3

Net Weight: 17.82

Emergency Contact: Capital Environmental Services, Inc. 302 552-8099

16. 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.

Printed/Typed Name RM Harris

Signature [Signature]

Month Day Year 08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name [Signature]

Signature [Signature]

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name [Signature]

Signature [Signature]

Month Day Year 08 28 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

450

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b. . . . .

c. . . . .

d. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118538

Transaction# 1271071

26

Net Weight 12.48

Emergency Contact: Capital Environmental Services, Inc. 302 852-8990

16. 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.

Printed/Typed Name *RM HART*

Signature *[Signature]*

Month Day Year *08 28 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *Justin W. Parry*

Signature *[Signature]*

Month Day Year *08 29 06*

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *[Name]*

Signature *[Signature]*

Month Day Year *12 18 06*

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

451  
457

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-0703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 855-8070

11. Waste Shipping Name and Description

12. Containers No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110530 Transaction#  
34 Net Weight:  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8000

16. 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.

Printed/Typed Name *B M Hans* Signature *[Signature]* Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Steve Conther* Signature *[Signature]* Month Day Year *8/23/06*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *[Signature]* Signature *[Signature]* Month Day Year *8/23/06*

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

457

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-448-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116530 Transaction# 1271021  
4 Net Weight 16.94  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8099

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
D.P. Taylor  
Month Day Year  
08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Derrick Williams

Signature  
Month Day Year  
08 28 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Kaira Adams

Signature  
K. Adams  
Month Day Year  
08 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

453

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

Site:  
Paradise Creek

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 866-8070

11. Waste Shipping Name and Description

12. Containers 13. Total Quantity 14. Unit

No. Type Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT T

901 20

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 1271035  
15 Net Weight 19.89  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name Signature Month Day Year  
D. Taylor D.P. Taylor . . .

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year  
Rick Testman Rick Testman 08 2 15

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year  
. . . . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Signature Month Day Year  
Rick Duckwell Rick Duckwell 08 2 15

GENERATOR  
TRANSPORTER  
FACILITY

454

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23669

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 885-6070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No. 60

Type DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#

127 1097

DD B 6

Net Weight:

14.53

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year

D. Taylor

[Signature]

08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

[Signature]

08 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

K. Adams

[Signature]

08 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

455

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

501 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#:

1271029

33

Net Weight:

14.41

Emergency Contact: Capital Environmental Services, Inc. 302 852-8990

16. 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.

Printed/Typed Name

Signature

Month Day Year

D Taylor

D Taylor

08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

[Signature]

[Signature]

08 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

Mike [Signature]

[Signature]

08 28 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

456

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 825-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

201 DT 70 T

b.

.

c.

.

d.

.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118529 Transaction# 1271039  
HBB12 Net Weight 14.04  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8400

16. 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.

Printed/Typed Name  
D Taylor

Signature  
DPTal  
Month Day Year  
08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
R. Neil Baker

Signature  
RNBaker  
Month Day Year  
09 18 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
D. K. Blackwell

Signature  
D. K. Blackwell  
Month Day Year  
08 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

457

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking **ATCO**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. | 13. Total Quantity | 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT | 00.1 | 20 | T

b.

.

c.

.

d.

.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1271055  
**AT14** Net Weight: 17.26  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
**D. Taylor**

Signature  
*D. Taylor* Month Day Year  
08 | 28 | 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
**Ray Floyd**

Signature  
*Ray Floyd* Month Day Year  
08 | 28 | 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature  
Month Day Year

GENERATOR

TRANSPORTER

FACILITY

458

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**  
C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
00/ DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1271068  
Net Weight: 15.63  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8998

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
D.P. Taylor  
Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
M.A. Fowler SR

Signature  
M.A. Fowler  
Month Day Year  
02 28 85

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Kara Adams

Signature  
Kara Adams  
Month Day Year  
1 8 1986

TRANSPORTER #2

GENERATOR  
TRANSPORTER  
FACILITY

459

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2701

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers	13. Total Quantity	14. Unit Wt/Vol
a.	801	20
b.	.....	.....
c.	.....	.....
d.	.....	.....

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115539

Transaction#

1271072

AT10

Net Weight

17.3

Emergency Contact: Capital Environmental Services, Inc. 802 652-8899

16. 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.

Printed/Typed Name

D. Taylor

Signature

*D. Taylor*

Month Day Year

10/2/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

John Wagner

Signature

*John Wagner*

Month Day Year

10/2/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

.....

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Karen Adams

Signature

*Karen Adams*

Month Day Year

12/18/06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

460

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-0070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 1271064  
SNT 30 Net Weight 16.48 Tons  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
D.P. Taylor  
Month Day Year  
08 28 08

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Wayne Bushaw

Signature  
Wayne Bushaw  
Month Day Year  
08 28 08

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Jackie Blackwell

Signature  
Jackie Blackwell  
Month Day Year  
08 28 08

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

461

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

100 DT 20 T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118538

Transaction# 1271070

SNT 29

Net Weight: 20.7

Emergency Contact: Capital Environmental Services Inc. 302 852-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year

D Taylor

D Taylor

. . .

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

R. Cuffee

R. Cuffee

8/28/06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

K. Adams

K. Adams

8/25/06

GENERATOR'S COPY

TRANSPORTER

FACILITY

462

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

20 / DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1271075  
18 Net Weight 21.90  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8990

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
Month Day Year  
05 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
K W Falls

Signature  
Month Day Year  
8 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Adrian

Signature  
Month Day Year  
8 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

463

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

DT

2.0

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 7271084

FISK 4

Net Weight: 17.93

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

D. Taylor

Signature

D.P. Taylor

Month Day Year

08/28/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

John Bowers

Signature

John Bowers

Month Day Year

8/30/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

John Bowers

Signature

John Bowers

Month Day Year

8/28/06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Jodie Blackwell

Signature

Jodie Blackwell

Month Day Year

11/28/06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

464

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

Site:  
Paradise Creek

5. Transporter 1 Company Name  
**C&H Trucking / For year Tracking**  
6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666  
10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction#: 1271078  
P-62 Net Weight: 17.47  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name: D. Taylor Signature: D.P. Taylor Month: 08 Day: 27 Year: 05

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: C&H Trucking Signature: [Signature] Month: 08 Day: 27 Year: 05

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: [Blank] Signature: [Blank] Month: Day: Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name: [Signature] Signature: [Signature] Month: 10 Day: 18 Year: 10

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

465

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1271091

31

Net Weight: 20.34

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8909

16. 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.

Printed/Typed Name

Signature

Month Day Year 08 10 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year 08 03 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year 08 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

466

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-0703 Attn: Rob Schenk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-440-2761

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668  
10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone

757 965-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA Non DOT Soil contaminated with Wood Debris

281 DT 20 T

b.  
c.  
d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118532 Transaction# 1271076  
14 Net Weight: 21.94  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8890

16. 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.

Printed/Typed Name: D. Taylor Signature: [Signature] Month: 08 Day: 28 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Q. Cross Signature: [Signature] Month: 08 Day: 28 Year: 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Signature: Month: Day: Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name: [Signature] Adams Signature: [Signature] Adams Month: 18 Day: 18 Year: 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

467

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
~~Call Tracking~~ **ATCO CORP**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#

1271063

AT18

Net Weight

22.32

Emergency Contact: Capital Environmental Services, Inc. 302 652-8989

16. 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.

Printed/Typed Name

Signature

Month Day Year

D. Taylor

[Signature]

08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

JOHN CARTOS

[Signature]

8 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

K. Adams

[Signature]

8 28 06

TRANSPORTER #2

TRANSPORTER

FACILITY

468

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schonk

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-444-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

1 001 DT 2.0 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1271087

P-53

Net Weight: 23.74

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
D.P. Taylor  
Month Day Year  
8 25 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
P. R. Y. H. P.

Signature  
P. R. Y. H. P.  
Month Day Year  
8 25 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name  
T. H. P.

Signature  
T. H. P.  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
William Adams

Signature  
William Adams  
Month Day Year  
8 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

469

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

11. Waste Shipping Name and Description	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol
a. Non RCRA, Non DOT Soil contaminated with Wood Debris	001	DT	20	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110530

Transaction# 1271090

P-73

Net Weight: 21.93

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name: D Taylor Signature: D Taylor Month Day Year: 08 26 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Puryear Signature: R.C. Dalmer Month Day Year: 08 26 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Signature: Month Day Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: [Signature] Signature: [Signature] Month Day Year: 08 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

470

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name: CRH Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-440-2761

7. Transporter 2 Company Name:  
8. US EPA ID Number:

B. Transporter's Phone:

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118538 Transaction# 127 1095  
P-59 Net Weight: 18.74 - 37480  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name: D. Taylor

Signature: [Signature] Month: 08 Day: 28 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name:

Signature: [Signature] Month: Day: Year:

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: James Berry

Signature: [Signature] Month: 8 Day: 29 Year: 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: Laura Adams

Signature: [Signature] Month: 8 Day: 28 Year: 06

GENERATOR

TRANSPORTER

FACILITY

471

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNIRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La  
Hampton, VA 23806

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 855-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT

20

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b.

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c.

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d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 18530 Transaction# 1271101  
32 Net Weight 19.55  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8899

16. 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.

Printed/Typed Name  
D Taylor

Signature  
D Taylor

Month Day Year  
. . .

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Eddie Perry

Signature  
Eddie Perry

Month Day Year  
8 25 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year  
. . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Lance Johnson

Signature  
Lance Johnson

Month Day Year  
8 25 06

GENERATOR

TRANSPORTER

FACILITY

477

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-2703 Attn: Bob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone

757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23865

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No.

Type

001

DT

20

T

b.  
c.  
d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118588 Transaction# 1271092  
16 Net Weight 20.57  
Emergency Contact: Capital Environmental Services, Inc 302 952-8388

16. 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.

Printed/Typed Name  
D Taylor

Signature  
D Taylor

Month Day Year  
8 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
K Scott

Signature  
K Scott

Month Day Year  
8 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
K (unclear) Adams

Signature  
K Adams

Month Day Year  
8 28 06

GENERATOR

TRANSPORTER

FACILITY

473

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-9070

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		
a.	Non RCRA, Non DOT Soil contaminated with Wood Debris		T
b.			
c.			
d.			

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116530

Transaction# 127114

Net Weight: 20.89

Emergency Contact: Capital Environmental Services, Inc. 302 652-8900

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
*[Signature]*

Month Day Year  
8 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
M. Smith

Signature  
*[Signature]*

Month Day Year  
8 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
K. Adams

Signature  
*[Signature]*

Month Day Year  
8 30 06

TRANSPORTER FACILITY

TRANSPORTER #2

474

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone (757) 445-8703 Attn: Rob Schank

Site:  
Paradise Creek

5. Transporter 1 Company Name  
CAH Trucking  
6. US EPA ID-Number  
NOT REQUIRED

A. Transporter's Phone  
757-445-2781

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23686  
10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 565-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

90

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b.

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c.

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d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115530 Transaction# 127104  
3 Net Weight 18.71  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
D. Taylor

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
AHC

Month Day Year  
8 29

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Lynn Adams

Signature  
Lynn Adams

Month Day Year  
8 28 0

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

475

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schank

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23665

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757 866-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001

DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

1271115

F-511 6

Net Weight:

19.35

Emergency Contact: Capitol Environmental Services, Inc. 302 852-6490

16. 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.

Printed/Typed Name

D Taylor

Signature

D Taylor

Month Day Year  
08 18 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Paul KELLER

Signature

Paul Keller

Month Day Year  
08 18 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Lance Adams

Signature

L Adams

Month Day Year

08 18 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

476

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 446-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116530

Transaction# 127 1111

Fork 5

Net Weight: 20-96

Emergency Contact: Capital Environmental Services, Inc. 302 862-8999

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
D. Taylor  
Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
Washington

Signature  
Allen Washington  
Month Day Year  
8 28 04

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Kenna Adams

Signature  
Kenna Adams  
Month Day Year  
8 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

477

**NON-HAZARDOUS WASTE MANIFEST**

Generator's US EPA ID No. **REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (767) 445-3703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
767-448-2701

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
767 866-8070

11. Waste Shipping Name and Description

12. Containers No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

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7.0

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b.

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c.

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d.

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D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118536 Transaction# 1071-117 217  
Net Weight 43 400  
Emergency Contact: Capital Environmental Services, Inc. 302 562-8088

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
D.P. Taylor

Month Day Year  
05/21/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Steve Courter

Signature  
Steve Courter

Month Day Year  
4/21/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Adam Adams

Signature  
Adam Adams

Month Day Year  
8/23/07

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

478

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 446-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
CBH Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
**NOT REQUIRED.**

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23508

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# 1271158  
4 Net Weight: 19.42  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
D. Taylor  
Month Day Year  
08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Domenic MANICO

Signature  
Domenic Manico  
Month Day Year  
09 09 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Kathryn Adams

Signature  
Kathryn Adams  
Month Day Year  
08 28 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

479

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 3

3. Generator's Name and Mailing Address  
Commander. Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2797

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8708 Attn: Rob Schenk

5. Transporter 1 Company Name  
CRH Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23068

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 625-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DDT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project # 110570 Transaction# 6271039  
33 Net Weight 19.24  
Emergency Contact: Capital Environmental Services, Inc. 802 882-8090

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
William Adams

Signature  
Month Day Year  
8-18-06

GENERATOR

TRANSPORTER

FACILITY

480

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
S&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers

No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction#  
P-63 Net Weight  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name: D. Taylor Signature: [Signature] Month: 08 Day: 28 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Signature: Month: Day: Year:

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Signature: Month: Day: Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: Laura Adams Signature: [Signature] Month: Day: Year:

GENERATOR

TRANSPORTER

FACILITY

481

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23660

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 855-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118580

Transaction#

1271103

Net Weight

21.26 T

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name *R M Hunt*

Signature *[Signature]*

Month Day Year *08 18 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Rich Trotman*

Signature *[Signature]*

Month Day Year *8 2 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Madeline Adams*

Signature *[Signature]*

Month Day Year *8 18 06*

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

482

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking **ATCO**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23068

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116-539

Transaction# 1271183

**AT14**

Net Weight 20.67

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name **Rm Hamy**

Signature **[Signature]**

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **[Signature]**

Signature **[Signature]**

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name **Karla Adams**

Signature **[Signature]**

Month Day Year **18/7/18**

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

483

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED.**

A. Transporter's Phone

757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23866

10. US EPA ID Number

**NOT REQUIRED.**

C. Facility's Phone

757-866-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00 | DT | 20 | T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110539

Transaction# 1271172

*[Handwritten signature]*

Net Weight: 20.04

TON

Emergency Contact: Capital Environmental Services, Inc. 302-852-8000

16. 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.

Printed/Typed Name

*RM HART*

Signature

*[Handwritten signature]*

Month Day Year

. . .

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Wayne B. Row*

Signature

*Wayne B. Row*

Month Day Year

9 28 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

*Ackie Blackwell*

Signature

*Ackie Blackwell*

Month Day Year

08 28 06

GENERATOR

TRANSPORTER

FACILITY

484

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone (757) 445-6703 Attn: Rob Schank

Site:  
Paradise Creek

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-449-2781

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668  
10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757 865-6070

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Non RCRA, Non DDT Soil contaminated with Wood Debris	6.01	DT	20	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 127-1176  
26 Net Weight: 18.69  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name: RMITAAT

Signature: [Handwritten Signature]

Month Day Year: 8/28/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: W. Perry

Signature: [Handwritten Signature]

Month Day Year: 8/28/06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: [Handwritten Name]

Signature: [Handwritten Signature]

Month Day Year: 8/28/06

GENERATOR  
TRANSPORTER  
FACILITY

485

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 446-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La  
Hampton, VA 23060

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No. Type

001 DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118538

Transaction# 1271173

SNT 29

Net Weight 19.39

Emergency Contact: Capital Environmental Services, Inc. 302 662-8888

16. 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.

Printed/Typed Name

R.M. Hart

Signature

[Signature]

Month Day Year  
08 17 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

R. Cuffee

Signature

[Signature]

Month Day Year  
08 28 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Jackie Blackwell

Signature

[Signature]

Month Day Year

08 11 06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

486

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1616 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonek

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 70 T

b.

.....

c.

.....

d.

.....

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118699 Transaction# 1271174  
18 Net Weight: 20.15  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8989

16. 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.

Printed/Typed Name *R M Hart*

Signature *[Signature]*

Month Day Year | 5 | 28 | 01

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *K W Falls*

Signature *[Signature]*

Month Day Year | 5 | 28 | 01

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year | . | . | .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *JACKIE BLACKWELL*

Signature *[Signature]*

Month Day Year | 5 | 28 | 01

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

487

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (NORMA)  
1515 Gilbert St. Norfolk, VA 23511-3727

Site:  
Paradise Creek

4. Generator's Phone (757) 440-6202

Attn: Rino Schenk

5. Transporter 1 Company Name

360 Transport

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Emmett Sweeney Landfill  
100 North Park Ln  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-890-0070

11. Waste Shipping Name and Description

a. Iron RCRA Non-DOT Sol contaminated with Wood Debris

12. Containers  
No. Type

201  
DOT

13. Total Quantity

7.0

14. Unit Wt/Vol

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Prevalent 115000

Transportation

1271181

P-60

Net Weight

18.43 TONS

Emergency Contact: Capital Environmental Services, Inc. 502-751-6229

16. 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.

Printed/Typed Name

Rino Schenk

Signature

[Signature]

Month Day Year

08.28.05

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

W. K. Blackwell

Signature

[Signature]

Month Day Year

08.28.05

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

488

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Fred Senack

5. Transporter 1 Company Name  
CNS/Tasklog ATCO CORP

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2784

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Beaufort Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 806-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

..... DT .....

b. ....  
c. ....  
d. ....

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project: 118230

Transaction# 1271175

AT-18

Net Weight 21.87

Emergency Contact: Capital Environmental Services, Inc. 302 657-9919

16. 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.

Printed/Typed Name KM HART

Signature [Signature]

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name [Signature]

Signature [Signature]

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Arke Blackwell

Signature [Signature]

Month Day Year

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

489

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
~~GM Trucking~~ *Per year*

A. Transporter's Phone  
757-440-2781

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name

B. Transporter's Phone

8. US EPA ID Number

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
103 North Park Ln.  
Hampton, VA 23068

C. Facility's Phone  
757 865-8070

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description  
a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type  
001 DT

13. Total Quantity  
20

14. Unit Wt/Vol  
T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1271180  
*P-53* Net Weight: 22.41  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8998

16. 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.

Printed/Typed Name *RM HART*

Signature *[Signature]* Month Day Year *08 28 06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *[Signature]*

Signature *[Signature]* Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *[Signature]*

Signature *[Signature]* Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *JACKIE Blackwell*

Signature *[Signature]* Month Day Year *08 28 06*

GENERATOR

TRANSPORTER

FACILITY

490

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

FCSK 4

Net Weight:

Emergency Contact: Capital Environmental Services, Inc. 302 652-8008

16. 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.

Printed, Typed Name *RM Hart*

Signature *[Signature]*

Month Day Year *08 28 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed, Typed Name *John Bowers*

Signature *John Bowers*

Month Day Year *12 26 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed, Typed Name *John Bowers*

Signature *John Bowers*

Month Day Year *8 28 06*

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed, Typed Name *Dorie Blakwell*

Signature *[Signature]*

Month Day Year *08 28 06*

ORIGINAL - RETURN TO GENERATOR

TRANSPORTER

FACILITY

491

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-5703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. 001	DT	20	T
b.			
c.			
d.			

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 127 1187  
31 Net Weight 28.68  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-9999

16. 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.

Printed/Typed Name  
RM HART

Signature  
RM HART  
Month Day Year  
08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
C&H Trucking

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Tokie Blackwell II

Signature  
Tokie Blackwell II  
Month Day Year  
08 28 06

GENERATOR

TRANSPORTER

FACILITY

492

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schork

5. Transporter 1 Company Name  
~~Call Trucking~~ *Ponycar*

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#: 1271189

*P-73*

Net Weight: 23.43

Emergency Contact: Capital Environmental Services, Inc. 302 862-8000

16. 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.

Printed/Typed Name *RM Hunt*

Signature *[Signature]*

Month Day Year  
08 28 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Ponycar*

Signature *[Signature]*

Month Day Year  
08 28 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Jackie Blackwell*

Signature *[Signature]*

Month Day Year

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

493

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2727

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-442-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23060

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-805-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
001 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110639 Transaction# 1271188 9.64  
P-579 Net Weight 9.64 tons - 19280  
Emergency Contact: Capital Environmental Services, Inc. 302-852-8899

16. 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.

Printed/Typed Name: *BM Hart*

Signature: *[Signature]* Month Day Year: 08 25 00

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature: *[Signature]* Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature: *[Signature]* Month Day Year

19. Discrepancy Indication Space  
*52506*

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: *[Signature]*

Signature: *[Signature]* Month Day Year: 08 25 00

GENERATOR

TRANSPORTER

FACILITY

494

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Val

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

001

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118538

Transaction#:

*FCSKS*

Net Weight:

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name *RM Hart*

Signature *[Signature]*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Kickie Blackwell*

Signature *[Signature]*

Month Day Year *08 28 06*

GENERATOR

TRANSPORTER

FACILITY

495

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction#: 1271207  
16 Net Weight: 19.33  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name  
B.M. Hart

Signature  
*[Signature]*

Month Day Year  
08 18 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
C. Butler

Signature  
*[Signature]*

Month Day Year  
08 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Orville Blackwell II

Signature  
*[Signature]*

Month Day Year  
08 29 06

GENERATOR

TRANSPORTER

FACILITY

496

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 448-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 855-6070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No.

Type

001

DT

70

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116530

Transaction#

1271208

15

Net Weight:

21.54

Emergency Contact: Capital Environmental Services, Inc. 302 652-8990

16. 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.

Printed/Typed Name

R M Hart

Signature

[Signature]

Month Day Year

08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Rich [Signature]

Signature

[Signature]

Month Day Year

08 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Douglas Blackwell

Signature

[Signature]

Month Day Year

10 19 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

497

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 855-8870

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		
a.	Non RCRA, Non DOT Soil contaminated with Wood Debris	001	20 <sup>T</sup>
b.			
c.			
d.			

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20<sup>T</sup>

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539 Transaction#: 1271218  
 Turner 10 Net Weight: 17.91  
 Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name: *RM HART* Signature: *[Signature]* Month Day Year: 08/25/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: *[Signature]* Signature: *[Signature]* Month Day Year: . . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: Signature: Month Day Year: . . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: *Mike Blackwell II* Signature: *[Signature]* Month Day Year: 08/26/06

GENERATOR  
TRANSPORTER  
FACILITY

498

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-448-2781

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666  
10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757 865-8070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No. Type

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1271217  
TH 11 Net Weight 21.852  
Emergency Contact: Capital Environmental Services, Inc. 802 852-8298

16. 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.

Printed/Typed Name: *RM HART*

Signature: *RM HART* Month Day Year: 08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature: *T. Sheppard* Month Day Year: 8 2 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature: *T. Sheppard* Month Day Year: 8 2 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: *Judith Blackwell*

Signature: *Judith Blackwell* Month Day Year: 08 12 06

GENERATOR

TRANSPORTER

FACILITY

499

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
**Paradise Creek**

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-448-2761**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 865-8070**

11. Waste Shipping Name and Description

12. Containers No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

**001**

**DT**

**20**

**T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 11653B Transaction#: 1271213  
**14** Net Weight: 23.21  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8990

16. 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.

Printed/Typed Name  
**SM HART**

Signature  
*[Signature]*

Month Day Year  
**08 25 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
**Q. CROSS**

Signature  
*[Signature]*

Month Day Year  
**08 29 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
**Orville Blackwell**

Signature  
*[Signature]*

Month Day Year  
**08 28 06**

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

500

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Non RCRA, Non DOT Soil contaminated with Wood Debris		DT	20	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110539 Transaction# 1271232  
RDR#1 Net Weight 30.29  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name RM Hart Signature [Signature] Month Day Year 08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name RANDY DROGLASON RDR#2 Signature [Signature] Month Day Year 08 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month Day Year \_\_\_\_\_

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Archie H. Kewell Signature [Signature] Month Day Year 08 29 06

GENERATOR'S COPY

GENERATOR  
TRANSPORTER  
FACILITY

501

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703** Attn: **Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-449-2761**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23666**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 865-8070**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

**001** **DT** **20** **T**

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# **118530**

Transaction# **1271225**

**DDB 6**

Net Weight: **19.13**

Emergency Contact: **Capitol Environmental Services, Inc. 302 652-8990**

16. 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.

Printed/Typed Name **BSM HART**

Signature **[Signature]**

Month Day Year **08 29 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **Domenick Mancusi**

Signature **[Signature]**

Month Day Year **08 29 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name **Robert Howell**

Signature **[Signature]**

Month Day Year **10 11 06**

TRANSPORTER

FACILITY

TRANSPORTER #2

502

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2787  
4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

Site:  
Paradise Creek

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: NOT REQUIRED

A. Transporter's Phone: 757-448-2781

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23068  
10. US EPA ID Number: NOT REQUIRED

C. Facility's Phone: 757 885-8070

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Non RCRA, Non DOT Soil contaminated with Wood Debris	001	DT	70	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116838 Transaction# 1271223  
18 Net Weight 22.29  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8800

16. 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.

Printed/Typed Name: B M HART

Signature: [Signature]

Month Day Year: 8 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: R SCOTT

Signature: [Signature]

Month Day Year: 8 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: Linker Blackwell

Signature: [Signature]

Month Day Year: 09 29 06

GENERATOR  
TRANSPORTER  
FACILITY

503

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-8703

Attn: Rob Schonk

Site:  
Paradise Creek

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110539

Transaction#: 1271229

34

Net Weight: 46600 - 23.3

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8890

16. 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.

Printed/Typed Name

R M Hart

Signature

*R M Hart*

Month Day Year

09 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Steve Coather

Signature

*Steve Coather*

Month Day Year

09 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Eric Blackwell

Signature

*Eric Blackwell*

Month Day Year

09 29 06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

504

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 866-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
DT 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1271233  
11 Net Weight 23.58  
Emergency Contact: Capital Environmental Services, Inc. 302-652-8999

16. 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.

Printed/Typed Name  
R. M. Hart

Signature  
*[Signature]*

Month Day Year  
8 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
M. Smith

Signature  
*[Signature]*

Month Day Year  
8 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Arkie Blackwell

Signature  
*[Signature]*

Month Day Year  
08 29 06

GENERATOR'S COPY

GENERATOR  
TRANSPORTER  
FACILITY

505

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2791

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

00 PT

13. Total Quantity

20 T

14. Unit Wt/Vol

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110539

Transaction# 1271227

32

Net Weight: 20.68

Emergency Contact: Capitol Environmental Services, Inc. 302-852-8899

16. 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.

Printed/Typed Name

RM HART

Signature

[Signature]

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Eddie Perry

Signature

[Signature]

Month Day Year

8 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

[Signature] AS PER

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

506

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1010 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-448-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00/

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116530

Transaction# 1271234

P-59

Net Weight: 19.76

Emergency Contact: Capital Environmental Services, Inc. 302 652-8000

16. 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.

Printed/Typed Name

RM Hart

Signature

*RM Hart*

Month Day Year  
08 25 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

James Be...

Signature

*James Be...*

Month Day Year  
08 21 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Orkie Blackwell

Signature

*Orkie Blackwell*

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

507

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

GENERATOR  
TRANSPORTER  
FACILITY

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 441-8709 Attn: Erub Schenk

5. Transporter 1 Company Name  
CRH Trucking

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

C. Facility's Phone  
757-886-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1271240  
Net Weight: 19.64  
Emergency Contact: Capital Environmental Services, Inc. 302-862-8999

16. 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.

Printed/Typed Name *RM Hart*

Signature *[Signature]* Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature *[Signature]* Month Day Year *08 29 06*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *[Signature]*

Signature *[Signature]* Month Day Year *08 29 06*

508

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 446-6703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking *Per your Trucking* 6. US EPA ID Number **NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name 8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668 10. US EPA ID Number **NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00/ DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1271243  
P-62 Net Weight 18.80 T  
Emergency Contact: Capital Environmental Services, Inc. 302 352-8998

16. 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.

Printed/Typed Name *RM HART*

Signature *[Signature]*

Month Day Year  
08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Scott Locking P 62*

Signature *[Signature]*

Month Day Year  
08 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Walter Blankwell*

Signature *[Signature]*

Month Day Year  
08 29 06

GENERATOR

TRANSPORTER

FACILITY

509

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Bob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-885-5070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soli contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118638 Transaction# 127 1236  
33 Net Weight 20.27  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8900

16. 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.

Printed/Typed Name  
RM Hant

Signature  
RM Hant  
Month Day Year  
08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Signature

Month Day Year  
08 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Jackie Blockweil

Signature  
Jackie Blockweil  
Month Day Year  
08 29 06

GENERATOR

TRANSPORTER

FACILITY

510

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1516 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
~~GM~~ Trucking ATCO

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 1271255  
AT: 14 Net Weight: 23.21  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8898

16. 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.

Printed/Typed Name *RM Hart*

Signature *[Signature]*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *RAY LLOYD*

Signature *[Signature]*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *RAY LLOYD*

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Cherie Blidwell*

Signature *[Signature]*

Month Day Year *12 13 06*

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

511

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (767) 445-8703 Attn: Bob Schenk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 767-440-2781

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampson, VA 23666  
10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 767-885-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction#: 1271258  
P-63 Net Weight: 20-70  
Emergency Contact: Capitol Environmental Services, Inc. 302-662-8999

16. 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.

Printed/Typed Name: R M Hunt

Signature: [Signature] Month Day Year: 08/19/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Cecil Paul

Signature: [Signature] Month Day Year: . . .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: [Name]

Signature: [Signature] Month Day Year: 08/18/06

GENERATOR  
TRANSPORTER  
FACILITY

512

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-5070

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 2.0 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116536 Transaction# 127 1257  
31 Net Weight 18.49  
Emergency Contact: Capital Environmental Services, Inc. 302 552-8999

16. 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.

Printed/Typed Name *RM Hant*

Signature *[Signature]* Month Day Year 08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *C.D.*

Signature *[Signature]* Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *[Signature]*

Signature *[Signature]* Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Stacia Blackwell*

Signature *[Signature]* Month Day Year

GENERATOR  
TRANSPORTER  
FACILITY

513

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)

1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-6703

Attn: Bob Schenk

5. Transporter 1 Company Name

C&M Trucking

6.

US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8.

US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill

100 North Park La.

Hampton, VA 23060

10.

US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

b.

c.

d.

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116639

Transaction# 1271252

SUT 28

Net Weight: 20.22

Emergency Contact Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

RM HANE

Signature

[Signature]

Month Day Year

08 29 05

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

R CUFFEE

Signature

[Signature]

Month Day Year

18 12 29 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

JICKIE BLACKWELL

Signature

[Signature]

Month Day Year

18 09 06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

514

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6.

US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8.

US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10.

US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116538

Transaction#

1271259

P-70

Net Weight

22-20

Emergency Contact: Capitol Environmental Services, Inc. 302-652-8000

16. 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.

Printed/Typed Name

Rob Schonk

Signature

[Signature]

Month Day Year

08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Leon Bonas

Signature

[Signature]

Month Day Year

08 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

[Name]

Signature

[Signature]

Month Day Year

08 31 06

COPY

GENERATOR

TRANSPORTER

FACILITY

515

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)

1510 Gilbert St., Norfolk, VA 23511-2137

4. Generator's Phone (757) 445-8703

Attn: Rob Schank

Site:

Paradise Creek

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill

100 North Park La.

Hampton, VA 23668

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

767-885-0070

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110520

Transaction# 1271273

30

Net Weight 20.28 T

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8996

16. 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.

Printed/Typed Name

R M HART

Signature

*R M Hart*

Month Day Year

03 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Wayne Baskin

Signature

*Wayne Baskin*

Month Day Year

3 29 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Onkie Bartwell

Signature

*Onkie Bartwell*

Month Day Year

03 29 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

516

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-449-2761

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666  
10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction#: 1271269  
16 Net Weight: 20.55  
Emergency Contact: Capitol Environmental Services, Inc. 302 862-8998

16. 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.

Printed/Typed Name: R M HART

Signature: [Signature] Month Day Year: 08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: C. Bales

Signature: [Signature] Month Day Year: 8 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: Laura Adams

Signature: [Signature] Month Day Year: 18 29 06

GENERATOR

TRANSPORTER

FACILITY

517

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Bob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757-885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118538

Transaction#

1271271

15

Net Weight

23.38

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8990

16. 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.

Printed/Typed Name

RM HAAT

Signature

*RM HAAT*

Month Day Year

02 25 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Rick Tostman

Signature

*Rick Tostman*

Month Day Year

02 27 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

h. adam

Signature

*h. adam*

Month Day Year

02 29 06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

518

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
**Paradise Creek**

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-449-2781**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
100 North Park La.  
Hampton, VA 23866

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 865-8070**

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

**001** **DT** **20** **T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1271279  
**14** Net Weight 25.11  
Emergency Contact: Capital Environmental Services, Inc. 302 862-8000

16. 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.

Printed/Typed Name **R M Hartz**

Signature **R M Hartz**

Month Day Year **08 29 05**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **D. Cross**

Signature **D. Cross**

Month Day Year **08 29 05**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name **Quita Adams**

Signature **Quita Adams**

Month Day Year **18 09 05**

GENERATOR

TRANSPORTER

FACILITY

579

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Bob Schenk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-449-2781

7. Transporter 2 Company Name: \_\_\_\_\_  
8. US EPA ID Number: \_\_\_\_\_

B. Transporter's Phone: \_\_\_\_\_

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number: **NOT REQUIRED**  
C. Facility's Phone: 757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No. 001 Type DT 13. 20 14. T

b. \_\_\_\_\_

No. \_\_\_\_\_ Type \_\_\_\_\_ 13. \_\_\_\_\_ 14. \_\_\_\_\_

c. \_\_\_\_\_

No. \_\_\_\_\_ Type \_\_\_\_\_ 13. \_\_\_\_\_ 14. \_\_\_\_\_

d. \_\_\_\_\_

No. \_\_\_\_\_ Type \_\_\_\_\_ 13. \_\_\_\_\_ 14. \_\_\_\_\_

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118538 Transaction# 1271308  
T-11 Net Weight 19-38  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name: R M HART

Signature: [Signature]

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: \_\_\_\_\_

Signature: T. Sheppard

Month Day Year

19. Discrepancy Indication Space  
T. Sheppard 8 29 06

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: [Signature]

Signature: [Signature]

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

520

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

Type  
DT

20

Unit  
T

D. Additional Descriptions for Materials Listed Above

E. (Handling Codes for Wastes Listed Above)

15. Special Handling Instructions and Additional Information

Project# 116538

Transaction#: 1271310

T-10

Net Weight: 18.77

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name *R M PAUL*

Signature *[Signature]*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year

8 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year

8 29 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

521

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703

Attn: Bob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23060

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00

DT

2.0

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116530

Transaction#

1271340

Net Weight:

44760

22.39

34

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

B M H + CT

Signature

B M H + CT

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Steve Coulter

Signature

Steve Coulter

Month Day Year

8 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Jack Blackwell

Signature

Jack Blackwell

Month Day Year

8 1 06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

522  
~~523~~

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 855-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA; Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110530 Transaction# 1271300  
18 Net Weight 23.06  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8900

16. 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.

Printed/Typed Name *B M Hartz*

Signature *B M Hartz* Month Day Year 08 27 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *R Scott*

Signature *R Scott* Month Day Year 08 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *K Adams*

Signature *K Adams* Month Day Year 08 29 06

GENERATOR

TRANSPORTER

FACILITY

523

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

Attn: Rob Schork

5. Transporter 1 Company Name

CRH Trucking

6.

US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8.

US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10.

US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 865-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

b.

c.

d.

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001 DT 20 T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110539

Transaction#

1271305

Net Weight:

22.58

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8900

16. 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.

Printed/Typed Name

Rob Schork

Signature

[Signature]

Month Day Year

8 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

8 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

. . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Adams

Signature

[Signature]

Month Day Year

. . .

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

524

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
CBH Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# 1271306  
32 Net Weight: 20.44  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name *BM Hart*

Signature *BM Hart*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Eddie Perry*

Signature *Eddie Perry*

Month Day Year  
8 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *C. Adams*

Signature *C. Adams*

Month Day Year  
8 29 06

GENERATOR

TRANSPORTER

FACILITY

525

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)

1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone ( 757 )

445-8703

Attn: Bob Schenk

Site:

Paradise Creek

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill

100 North Park Ln.

Hampton, VA 23060

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115539

Transaction# 127 1309

P-59

Net Weight 1958

Emergency Contact: Capital Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name

R M Hunt

Signature

R M Hunt

Month Day Year

08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

James Beery

Signature

James Beery

Month Day Year

08 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

L Adams

Signature

L Adams

Month Day Year

1 29 06

GENERATOR

TRANSPORTER

FACILITY

526

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)

1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill

100 North Park La.

Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 855-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

127 1313

33

Net Weight

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8998

16. 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.

Printed/Typed Name

R M Hart

Signature

[Signature]

Month Day Year

08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

08 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

L Adams

Signature

[Signature]

Month Day Year

08 29 06

GENERATOR

TRANSPORTER

FACILITY

527

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1271311

DDBG

Net Weight 18.92

Emergency Contact: Capitol Environmental Services, Inc. 302 662-8989

16. 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.

Printed/Typed Name

R M HART

Signature

[Signature]

Month Day Year

08 23 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Donnell Madros

Signature

[Signature]

Month Day Year

08 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Callina Adams

Signature

[Signature]

Month Day Year

08 28 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

528

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# 1271320  
Net Weight 19.04  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8996

16. 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.

Printed/Typed Name *BM Hart*

Signature *[Signature]* Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *H. F. Glover Sr.*

Signature *[Signature]* Month Day Year *12 29 04*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Kouza Adams*

Signature *[Signature]* Month Day Year *1 31 04*

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

529

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schork

5. Transporter 1 Company Name  
~~GRH Trucking~~ *Paragon Trucking* 6. US EPA ID Number **NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name 8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666 10. US EPA ID Number **NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b. *[Blank]*

c. *[Blank]*

d. *[Blank]*

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1271323

*P-62*

Net Weight: 19.04 T

Emergency Contact: Capital Environmental Services, Inc. 302-852-8999

16. 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.

Printed/Typed Name *Rob Hart*

Signature *[Signature]*

Month Day Year  
08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Paul Luchini P-62*

Signature *[Signature]*

Month Day Year  
08 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

530

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name: C&H Trucking

A. Transporter's Phone: 757-449-2781

6. US EPA ID Number: NOT REQUIRED

7. Transporter 2 Company Name

B. Transporter's Phone

8. US EPA ID Number

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

C. Facility's Phone: 757 865-8070

10. US EPA ID Number: NOT REQUIRED

11. Waste Shipping Name and Description  
a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
601	DT	20	T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction#: 1271316  
RD021 Net Weight: 28.05  
Emergency Contact: Capitol Environmental Services, Inc. 302 562-8990

16. 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.

Printed/Typed Name: RM HART

Signature: [Handwritten Signature]

Month Day Year: 08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: RANDALD ROGERS

Signature: [Handwritten Signature]

Month Day Year: 08 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: [Handwritten Name]

Signature: [Handwritten Signature]

Month Day Year: 8-29-06

GENERATOR

TRANSPORTER

FACILITY

531

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schork

5. Transporter 1 Company Name

CRH Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-445-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1271331

SNT 28

Net Weight 19.03

Emergency Contact: Capital Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name

BM HART

Signature

[Signature]

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

R. CLIFFEE

Signature

R. Cliffree  
[Signature]

Month Day Year

18 | 29 | 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Louisa Adams

Signature

[Signature]

Month Day Year

18 | 29 | 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

532

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23611-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-442-2761

7. Transporter 2 Company Name

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1271335

31

Net Weight: 18.30

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name *B.M. Hart*

Signature *[Signature]*

Month Day Year *08 28 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *C.O.*

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name *[Signature]*

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *William Adams*

Signature *[Signature]*

Month Day Year *08 29 06*

GENERATOR

TRANSPORTER

FACILITY

533

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (767) 446-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-446-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23060

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No. DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# 1271329  
P-63 Net Weight: 19.54  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name *RM Hart*

Signature *[Signature]* Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Cecil Paul*

Signature *Cecil Paul* Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Laura Adams*

Signature *[Signature]* Month Day Year *15.09.06*

GENERATOR  
TRANSPORTER  
FACILITY

534

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CRFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking TCO

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-0070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

2001 DT 2.0 T

b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118530

Transaction# 127 134

AT-14

Net Weight: 24.21 2

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
RM HART

Signature  
*[Signature]*

Month Day Year  
08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature  
*[Signature]*

Month Day Year  
7 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Laura Adams

Signature  
*[Signature]*

Month Day Year  
18 29 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

535

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
CMH Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
787-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 855-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1271352  
P-70 Net Weight 22.52  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.  
Printed/Typed Name *Rm Hart* Signature *[Signature]* Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Leon Brinas* Signature *[Signature]* Month Day Year *12/1/02*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name *James Adams* Signature *[Signature]* Month Day Year *12/29/02*

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

536

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6700 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23660

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118538 Transaction# 1271344  
16 Net Weight 21.99  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name R M HART

Signature [Signature]

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name [Signature]

Signature [Signature]

Month Day Year 8 27 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name [Signature]

Signature [Signature]

Month Day Year 8 29 06

GENERATOR

TRANSPORTER

FACILITY

537

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-442-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757-862-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

200 DT

20 T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#

1271307

15

Net Weight

24.48

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

Rm Haut

Signature

[Signature]

Month Day Year

08 1 1

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

[Blank]

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

[Blank]

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

1 10 02

GENERATOR

TRANSPORTER

FACILITY

538

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

DT

2.0

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116530

Transaction#: 1271357

14

Net Weight: 23.74

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8890

16. 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.

Printed/Typed Name

RM HART

Signature

*RM Hart*

Month Day Year  
08/29/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Q. Cross

Signature

*Q. Cross*

Month Day Year  
08/29/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

JACKIE BLACKWELL

Signature

*Jackie Blackwell*

Month Day Year  
10/13/06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

539

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT T

b.

20

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 1271396  
Net Weight: 22.65  
Emergency Contact: Capital Environmental Services, Inc. 302 662-8099

16. 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.

Printed/Typed Name R M HAUT

Signature [Signature] Month Day Year 8 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name R SCOTT

Signature [Signature] Month Day Year 8 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name [Name]

Signature [Signature] Month Day Year 10 10 06

GENERATOR

TRANSPORTER

FACILITY

540

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-440-2761

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number: **NOT REQUIRED**  
C. Facility's Phone: 757 865-0070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110530 Transaction# 1271406  
Net Weight 22.21  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name: RM Hart

Signature: [Handwritten Signature]

Month: 8 Day: 29 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: M. S. [Handwritten]

Signature: [Handwritten Signature]

Month: 8 Day: 29 Year: 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: [Handwritten Name]

Signature: [Handwritten Signature]

Month: 08 Day: 10 Year: 06

GENERATOR  
TRANSPORTER  
FACILITY

541

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1271405  
Net Weight 18.19  
DD B G  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8898

16. 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.

Printed/Typed Name R M Hart

Signature [Signature] Month Day Year 08 27 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name [Signature]

Signature [Signature] Month Day Year 08 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Chiku Blackwell

Signature [Signature] Month Day Year 08 29 06

GENERATOR

TRANSPORTER

FACILITY

542

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address:  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6793 Attn: Rob Schank

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-449-2761

7. Transporter 2 Company Name: \_\_\_\_\_  
8. US EPA ID Number: \_\_\_\_\_

B. Transporter's Phone: \_\_\_\_\_

9. Designated Facility Name and Site Address:  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666  
10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b. \_\_\_\_\_

c. \_\_\_\_\_

d. \_\_\_\_\_

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction#: 1271410  
P-59 Net Weight: 1154  
Emergency Contact: Capital Environmental Services, Inc. 302 662-9090

16. 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.

Printed/Typed Name: *RM HART*

Signature: *[Signature]*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: \_\_\_\_\_

Signature: *James King*

Month Day Year: 18 2 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: *Orkie Blackwell*

Signature: *[Signature]*

Month Day Year: 18 12 06

GENERATOR  
TRANSPORTER  
FACILITY

543

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

↑ GENERATOR  
↓ TRANSPORTER  
FACILITY

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking \*

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DDT Soil contaminated with Wood Debris

00/ DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115539 Transaction# 127 1418  
T-10 Net Weight 19.50  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name *RM Hart*

Signature *[Signature]*

Month Day Year 08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year 08 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Jane Maxwell*

Signature *[Signature]*

Month Day Year 08 29 06

544

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2797

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118538 Transaction# 127 1419  
t-11 Net Weight 18.92  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8998

16. 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.

Printed/Typed Name BM HART

Signature [Signature]

Month Day Year 8 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature T. Sheppard

Month Day Year 8 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature T. Sheppard

Month Day Year 8 29 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name [Signature]

Signature [Signature]

Month Day Year 8 29 06

GENERATOR

TRANSPORTER

FACILITY

545

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Bob Schank

5. Transporter 1 Company Name

C&H Trucking

6.

US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2761

7. Transporter 2 Company Name

8.

US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10.

US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-6070

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

80

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1271425

RDA#1

Net Weight: 27.84

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

R M HALL

Signature

[Signature]

Month Day Year  
08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

RANDALL DROGEMAN

Signature

[Signature]

Month Day Year  
08 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Charles Blackwell

Signature

[Signature]

Month Day Year  
08 29 06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

546

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2797

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118538 Transaction# 127 1426  
33 Net Weight: 16.89  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8289

16. 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.

Printed/Typed Name *BM HART*

Signature *[Signature]*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Louis Adams*

Signature *[Signature]*

Month Day Year *R. P. 1997*

GENERATOR

TRANSPORTER

FACILITY

547

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone: (757) 448-8703 Attn: Bob Schenk

5. Transporter 1 Company Name: **CRH Trucking** 6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-448-2781

7. Transporter 2 Company Name: 8. US EPA ID Number: **NOT REQUIRED**

B. Transporter's Phone:

9. Designated Facility Name and Site Address:  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23866

10. US EPA ID Number:  
**NOT REQUIRED**

C. Facility's Phone: 757-885-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT T

b.

20

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1271424  
Net Weight 18.86  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name: **RM HART**

Signature: [Signature] Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: [Signature]

Signature: [Signature] Month Day Year: 11/8/91

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name:

Signature: [Signature] Month Day Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: **W Adams**

Signature: [Signature] Month Day Year: 11/8/91

GENERATOR

TRANSPORTER

FACILITY

548

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

↑ GENERATOR  
↓ TRANSPORTER  
FACILITY

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-449-2781

7. Transporter 2 Company Name: \_\_\_\_\_  
8. US EPA ID Number: \_\_\_\_\_

B. Transporter's Phone: \_\_\_\_\_

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666  
10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757 685-5070

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Non RCRA, Non DOT Soil contaminated with Wood Debris	201	DT	70	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# 1271436  
P-62 Net Weight 17.66 T  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name: R M HART

Signature: [Signature]

Month Day Year: 05 25 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: [Signature]

Signature: [Signature]

Month Day Year: 7 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Month Day Year: \_\_\_\_\_

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: [Signature]

Signature: [Signature]

Month Day Year: 1 8 29 06

549

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Bob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 896-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

00/ 20

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1271434  
P-63 Net Weight: 19.03  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name *RMH + LT*

Signature *[Signature]* Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *[Signature]*

Signature *[Signature]* Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Laura Adams*

Signature *[Signature]* Month Day Year *10 29 02*

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

550

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&M Trucking

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description

12. Containers	13. Total Quantity	14. Unit Wt/Vol	
			No.
a.	Non RCRA, Non DOT Soil contaminated with Wood Debris	DT	T
b.			
c.			
d.			

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1271437  
SMT Net Weight 18.68  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name: BM HART Signature: [Signature] Month: . Day: . Year: .

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: . Signature: . Month: . Day: . Year: .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: R. CUFFEE Signature: [Signature] Month: 8 Day: 29 Year: 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: Laura Adams Signature: [Signature] Month: 8 Day: 29 Year: 06

GENERATOR  
TRANSPORTER  
FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

551

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Sokonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23068

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

767-885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001

DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118530

Transaction# 1271438

32

Net Weight: 19.01

Emergency Contact: Capital Environmental Services, Inc. 302 652-8899

16. 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.

Printed/Typed Name

RM Harris

Signature

[Signature]

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Eddie Perry

Signature

Eddie Perry

Month Day Year

8 29 09

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year

10 20 09

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

552

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

20

b.

c.

d.

D: Additional Descriptions for Materials Listed Above

E: Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# 1271448  
31 Net Weight 18.59  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8800

16. 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.

Printed/Typed Name  
B M Hunt

Signature  
*[Signature]*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
*[Signature]*

Signature  
*[Signature]*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
*[Signature]*

Signature  
*[Signature]*

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Lawrence Adams

Signature  
*[Signature]*

Month Day Year  
12/19/08

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

**NON-HAZARDOUS  
WASTE MANIFEST**

553

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Bob Schook

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

CSH Trucking

**NOT REQUIRED**

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

C. Facility's Phone

Bethel Sanitary Landfill

100 North Park La.

Hampton, VA 23066

**NOT REQUIRED**

757-885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total  
Quantity

14. Unit  
Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1271439

16

Net Weight: 19.31

Emergency Contact: Capital Environmental Services, Inc. 302-852-8989

16. 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.

Printed/Typed Name

RW Hart

Signature

*[Signature]*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

*[Signature]*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Laura Adams

Signature

*[Signature]*

Month Day Year

1/8/29/06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

554

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, New Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (767) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1271446  
34 Net Weight 41080 20.54  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name RM Hart

Signature [Signature]

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name Steve Coulter

Signature [Signature]

Month Day Year 1/29/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Laura Adams

Signature [Signature]

Month Day Year 1/31/06

GENERATOR

TRANSPORTER

FACILITY

555

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

ATCO

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-886-8070

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

201

DT

90

T

b.  
c.  
d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110539

Transaction#

127 1451

Net Weight

20-36

Emergency Contact: Capital Environmental Services, Inc. 302 652-6000

AT-14

16. 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.

Printed/Typed Name

Rm H... ..

Signature

[Signature]

Month Day Year

08 29 00

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

08 29 00

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

08 29 00

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year

08 29 00

GENERATOR

TRANSPORTER

FACILITY

556

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
20  
14. Unit Wt/Vol  
T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction#: 1271449  
Net Weight: 14.19  
Emergency Contact: Capital Environmental Services, Inc. 302 662-8999

16. 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.

Printed/Typed Name  
B M HARTY

Signature  
*B M Hart*

Month Day Year  
08 09 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
A Cross

Signature  
*A Cross*

Month Day Year  
08 09 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name  
K. Adams  
Signature  
*K Adams*  
Month Day Year  
08 09 06

GENERATOR  
TRANSPORTER  
FACILITY

557

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8103

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23060

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-855-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

OT

20 T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

15

Transaction#

127 1458

Net Weight

18.18

Emergency Contact: Capitol Environmental Services, Inc. 302-852-8899

16. 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.

Printed/Typed Name

LM Hart

Signature

[Signature]

Month Day Year

10/29/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

10/29/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

[Signature]

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

10/29/06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

558

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNIRMA)  
1510 Gilbert St., Norfolk, VA 23611-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schank

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-445-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 835-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

00.1

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116538

18

Transaction#

1271495

Net Weight:

18.07

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8899

16. 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.

Printed/Typed Name

B M Hunt

Signature

[Signature]

Month Day Year

. . .

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

8 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

R Scott

Signature

R Scott

Month Day Year

. . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

. . .

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

559

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-8703 Attn: Bob Schank

5. Transporter 1 Company Name  
C&H Trucking

7. Transporter 2 Company Name

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

11. Waste Shipping Name and Description  
a. Non RCRA, Non DOT Soil contaminated with Wood Debris

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110539 Transaction# 1271502  
Net Weight 18.59  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.  
Printed/Typed Name RM HART Signature [Signature] Month 7 Day 29 Year 02

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name M. Salk Signature [Signature] Month 8 Day 29 Year 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name Laura Adams Signature [Signature] Month 8 Day 29 Year 06

GENERATOR

TRANSPORTER

FACILITY

560

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-449-2761**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23686**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 865-6070**

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

13. Total Quantity  
14. Unit Wt/Vol  
**DT T**

b.

13. Total Quantity  
14. Unit Wt/Vol

c.

13. Total Quantity  
14. Unit Wt/Vol

d.

13. Total Quantity  
14. Unit Wt/Vol

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118630 Transaction# 1271500  
**DDBB** Net Weight 14.43  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8989

16. 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.

Printed/Typed Name **R M Hart**

Signature *[Signature]* Month Day Year **08 29 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Sonawade Motors**

Signature *[Signature]* Month Day Year **08 29 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name **Laura Adams**

Signature *[Signature]* Month Day Year **08 29 06**

GENERATOR

TRANSPORTER

FACILITY

561

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

007 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above.

15. Special Handling Instructions and Additional Information  
Project# 110539 Transaction# 127 1521  
Net Weight: 21.14  
P-70  
Emergency Contact: Capital Environmental Services, Inc. 302-652-8999

16. 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.

Printed/Typed Name *R. M. Hunt*

Signature *[Signature]* Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Leon Briggs*

Signature *[Signature]* Month Day Year *03/9/01*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste/materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Lawrence Adams*

Signature *[Signature]* Month Day Year

GENERATOR  
TRANSPORTER  
FACILITY

562

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-5070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116530

P59

Transaction#:

1271512

Net Weight:

15.81

Emergency Contact: Capital Environmental Services, Inc. 302 852-8009

16. 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.

Printed/Typed Name

RM HART

Signature

[Signature]

Month Day Year

08 29 01

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

8 29 01

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Alvin Adams

Signature

[Signature]

Month Day Year

15 24 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

563

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone

757-855-8070

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT T

001 70

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1271515

T-11

Net Weight: 16.36

Emergency Contact: Capital Environmental Services, Inc. 302 652-8000

16. 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.

Printed/Typed Name R M HART

Signature [Signature]

Month Day Year 08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature T. Sheppard

Month Day Year 8 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature T. Sheppard

Month Day Year 8 29 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name [Name]

Signature [Signature]

Month Day Year

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

564

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction#: 58140  
33 Net Weight: 25500 1271523  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8800

16. 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.

Printed/Typed Name *BM HART*

Signature *[Signature]*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year 08 27 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Adams*

Signature *[Signature]*

Month Day Year 08 29 06

GENERATOR

TRANSPORTER

FACILITY

565

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schork  
5. Transporter 1 Company Name  
C&H Trucking

A. Transporter's Phone  
757-440-2761

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name  
8. US EPA ID Number  
9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

B. Transporter's Phone  
C. Facility's Phone  
757 865-8070

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description  
a. Non RCRA, Non DOT Sell contaminated with Wood Debris  
b.  
c.  
d.

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
001	DT	70	T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118538 Transaction# 1271525  
Net Weight: 24.12  
RDR #1  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8989

16. 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.

Printed/Typed Name  
RMHals

Signature  
[Signature]

Month Day Year  
08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
BANDALL DROBENOW

Signature  
[Signature]

Month Day Year  
08 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
[Name]

Signature  
[Signature]

Month Day Year  
08 29 06

GENERATOR

TRANSPORTER

FACILITY

566

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 446-6703 Attn: Rob Schonk

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 866-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 127 1531  
Net Weight: 16.46  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8990

16. 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.  
Printed/Typed Name BM Harris Signature [Signature] Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name [Signature] Signature [Signature] Month Day Year 08 27 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name Laura Adams Signature [Signature] Month Day Year 08 29 06

GENERATOR

TRANSPORTER

FACILITY

567

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 127 1522  
T-10 Net Weight: 16.84  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8908

16. 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.  
Printed/Typed Name: *BM Adams* Signature: *[Signature]* Month: . Day: . Year: .

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: *[Signature]* Signature: *[Signature]* Month: 5 Day: 29 Year: 08

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Signature: Month: Day: Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name: *Adams* Signature: *[Signature]* Month: 8 Day: 1 Year: 08

GENERATOR

TRANSPORTER

FACILITY

568

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23660

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a.			
b.			
c.			
d.			

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110530 Transaction#: 127 1540  
P-63 Net Weight: 16-23  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8099

16. 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.

Printed/Typed Name *Rm HART*

Signature *[Signature]* Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *CECIL PAUL*

Signature *Cecil Paul* Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Adams*

Signature *[Signature]* Month Day Year *15. PAUL*

GENERATOR

TRANSPORTER

FACILITY

569

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**

1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

**C&H Trucking**

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

**Bethel Sanitary Landfill**

100 North Park La.

Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

2.0

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#:

1271835

16

Net Weight:

19.5

Emergency Contact: Capitol Environmental Services, Inc. 302 662-8999

16. 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.

Printed/Typed Name

*RM Hart*

Signature

*RM Hart*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*C. Bates*

Signature

*C. Bates*

Month Day Year

08 29 2006

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

*William Adams*

Signature

*William Adams*

Month Day Year

8 29 2006

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

570

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1271579  
SNT 28 Net Weight: 16.14  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8988

16. 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.

Printed/Typed Name R M HART

Signature [Signature] Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name R. CUFFEE

Signature R. Cuffee 1 29 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name [Name]

Signature [Signature] Month Day Year 8 29 06

GENERATOR

TRANSPORTER

FACILITY

571

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23068

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 806-8070

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. 001	DT	20	T
b.			
c.			
d.			

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1271543

14

Net Weight 22.7

Emergency Contact: Capitol Environmental Services, Inc. 302 662-8909

16. 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.

Printed/Typed Name *R M Hart*

Signature *[Signature]*

Month Day Year  
8 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *R. Cross*

Signature *[Signature]*

Month Day Year  
8 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Adams*

Signature *[Signature]*

Month Day Year  
8 29 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

572

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schork

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: NOT REQUIRED

A. Transporter's Phone: 757-449-2781

7. Transporter 2 Company Name: \_\_\_\_\_  
8. US EPA ID Number: \_\_\_\_\_

B. Transporter's Phone: \_\_\_\_\_

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hayston, VA 23660

10. US EPA ID Number: NOT REQUIRED  
C. Facility's Phone: 757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b. \_\_\_\_\_

\_\_\_\_\_

c. \_\_\_\_\_

\_\_\_\_\_

d. \_\_\_\_\_

\_\_\_\_\_

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118538 Transaction# 1271547  
34 Net Weight 40980 20.49  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.  
Printed/Typed Name: *RM Hant* Signature: *[Signature]* Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name: *William Adams* Signature: *[Signature]* Month Day Year: *11/29/06*

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

573

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 446-9703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1271551

32

Net Weight: 17.00

Emergency Contact: Capital Environmental Services, Inc. 302 852-6999

16. 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.

Printed/Typed Name RM HART

Signature [Signature]

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name Eddie Perry

Signature [Signature]

Month Day Year

8 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Adams

Signature [Signature]

Month Day Year

8 29 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

574

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

COFF Trucking ATCO

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#

1271553

AT-14

Net Weight

21.25

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

BSM HART

Signature

*[Signature]*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

RAY LLOYD

Signature

*[Signature]*

Month Day Year

6 27 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

QUICK E BLACKWELL

Signature

*[Signature]*

Month Day Year

8 27 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

575

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23886

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Non RCRA, Non DOT Soil contaminated with Wood Debris	001	DT	20	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 62320 027 1865  
31 Net Weight 25660 18.33  
36660  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.  
Printed/Typed Name *B M Hant* Signature *B M Hant* Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *CO* Signature *CO* Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name *CO* Signature *CO* Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name *Walter Adams* Signature *W Adams* Month Day Year 18 12 18

GENERATOR  
TRANSPORTER  
FACILITY

TRANSPORTER #2

576

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name: *Gar-Trucking Parquet Trucking* 6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-449-2761

7. Transporter 2 Company Name: 8. US EPA ID Number:

B. Transporter's Phone:

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23060

10. US EPA ID Number: **NOT REQUIRED**  
C. Facility's Phone: 757 885-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 1271557  
R-62 Net Weight 18.16 T  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name: *RM HART*

Signature: *[Signature]* Month Day Year: 08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: *[Signature]*

Signature: *[Signature]* Month Day Year: 08 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name:

Signature: Month Day Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: *[Signature]*

Signature: *[Signature]* Month Day Year: 15 12 10

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

577

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23060

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non-RCRA, Non-DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116530

Transaction# 1271562

AT-4

Net Weight: 17.74

Emergency Contact: Capitol Environmental Services, Inc. 502 852-8999

16. 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.

Printed/Typed Name  
R M Hunt

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Clyde Adams

Signature

Month Day Year  
18 19 17

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

578

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757-845-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

OT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 1271577

15

Net Weight: 21.52

Emergency Contact: Capital Environmental Services, Inc. 302 852-8899

16. 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.

Printed/Typed Name RM Hart

Signature [Signature]

Month Day Year 08/25/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name Rick Troutman

Signature [Signature]

Month Day Year 08/29/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Laura Adams

Signature [Signature]

Month Day Year 08/29/06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

579

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703** Attn: **Rob Schonk**

5. Transporter 1 Company Name **C&H Trucking** 6. US EPA ID Number **NOT REQUIRED**

A. Transporter's Phone **757-448-2781**

7. Transporter 2 Company Name 8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23066** 10. US EPA ID Number **NOT REQUIRED**

C. Facility's Phone

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. <b>Non RCRA, Non DOT Soil contaminated with Wood Debris</b>	<b>001</b>	<b>DT</b>	<b>20</b>	<b>T</b>
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 118530** Transaction# **1271580**  
**DDBG** Net Weight **17.27**  
Emergency Contact: **Capital Environmental Services, Inc. 302 652-8099**

16. 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.

Printed/Typed Name **R M HART** Signature *[Signature]* Month **05** Day **28** Year **06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **DOMENICK MANCINI** Signature *[Signature]* Month **05** Day **29** Year **06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name **Lawrence Adams** Signature *[Signature]* Month **05** Day **29** Year **06**

GENERATOR

TRANSPORTER

FACILITY

580

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-RT03 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-866-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# 1277589  
18 Net Weight 21.39  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8098

16. 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.

Printed/Typed Name KM HART Signature [Signature] Month 8 Day 29 Year 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name R SCOTT Signature [Signature] Month 8 Day 29 Year 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name [Signature] Signature [Signature] Month 8 Day 29 Year 06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

581

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757-865-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001 DT

13. Total Quantity

70

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118538

Transaction#:

1271591

11

Net Weight:

18.41

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8099

16. 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.

Printed/Typed Name

*RM Harris*

Signature

*RM Harris*

Month Day Year  
08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*M. S.*

Signature

*M. S.*

Month Day Year  
11 24 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

*Robert Adams*

Signature

*R Adams*

Month Day Year  
11 29 06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

582

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schenk

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

5. Transporter 1 Company Name  
C&H Trucking

8. US EPA ID Number

B. Transporter's Phone

7. Transporter 2 Company Name

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

11. Waste Shipping Name and Description  
a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
b.  
c.  
d.

12. Containers	13. Total Quantity	14. Unit Wt/Vol
201	20	T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110639 Transaction#: 1271596  
Net Weight: 18.2 tons  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8099

16. 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.  
Printed/Typed Name: RM HOLT Signature: [Signature] Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name: Kaitlin Adams Signature: [Signature] Month Day Year: 8/19/16

GENERATOR  
TRANSPORTER  
FACILITY

583

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23060

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 866-0070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

20/ DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118530

Transaction# 1271599

P-70

Net Weight: 23.46 TONS

Emergency Contact: Capital Environmental Services, Inc. 302 862-8000

16. 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.

Printed/Typed Name

RM Harris

Signature

[Signature]

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Leon Beigas

Signature

[Signature]

Month Day Year

08-19-06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

RM Harris

Signature

[Signature]

Month Day Year

8-19-06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

584

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23806

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone.  
757-885-8070

11. Waste Shipping Name and Description  
a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
b.  
c.  
d.

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
001	DT	20	T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1271600  
P-75 Net Weight: 23.29 tons  
Emergency Contact: Capital Environmental Services, Inc. 302-652-8999

16. 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.

Printed/Typed Name  
RM Hottel

Signature  
Month Day Year  
08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Kurt Adams

Signature  
Month Day Year  
8 9 06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

585

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone  
757-445-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No.

Type

001

DT

20

T

No.	Type	Total Quantity	Unit Wt/Vol
a.	DT	20	T
b.			
c.			
d.			

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1271606  
RDR #1 Net Weight 28.86  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name: RM HART

Signature: [Signature]

Month: 08 Day: 29 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: RANDALL D. BROWN

Signature: [Signature]

Month: 08 Day: 29 Year: 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name:

Signature:

Month: Day: Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19:

Printed/Typed Name: KATHA J. ADAMS

Signature: [Signature]

Month: 08 Day: 24 Year: 06

GENERATOR

TRANSPORTER

FACILITY

586

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-440-2781**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757-865-6070**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

**001 DT 70 T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
**Project# 118539 Transaction#**  
**P-73 Net Weight: 23.63**  
**Emergency Contact: Capital Environmental Services, Inc. 302-852-8000**

16. 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.

Printed/Typed Name **RM Hart**

Signature **[Signature]** Month Day Year **08 27 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature **R. C. Adams** Month Day Year **08 27 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name **Kawna Adams**

Signature **[Signature]** Month Day Year **08 29 06**

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

587

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2797**

Site:  
**Paradise Creek**

4. Generator's Phone ( **757** ) **445-6703** Attn: **Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-440-2761**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23666**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 865-6070**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

DT

**70**

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information:  
Project# **118530** Transaction#  
**P-53** Net Weight: **22.38**  
Emergency Contact: **Capital Environmental Services, Inc. 302 652-8000**

16. 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.

Printed/Typed Name **Rob Schonk**

Signature *[Signature]*

Month Day Year  
**08 29 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **PURYEAR**

Signature *[Signature]*

Month Day Year  
**08 29 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name **J Adams**

Signature *[Signature]*

Month Day Year  
**08 29 06**

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

588

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St.; Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#:

*P 50 Royer*

Net Weight:

*22.02*

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

*R M Hart*

Signature

*R M Hart*

Month Day Year  
*08 29 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*James Freshwater*

Signature

*James Freshwater*

Month Day Year  
*08 29 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

*Leura Adams*

Signature

*L Adams*

Month Day Year  
*08 29 06*

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

589

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 1271622

Net Weight: 16-56

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name *RM Hant*

Signature *[Signature]*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year

08/24/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Adams*

Signature *[Signature]*

Month Day Year

8/24/06

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

590

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. 2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek 50

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

.

c.

.

d.

.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115630 Transaction# 1271619  
P-63 Net Weight 18.47  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name **BM HART**

Signature *[Signature]*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **CECIL PAUL**

Signature *[Signature]*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name **Kathleen Adams**

Signature *[Signature]*

Month Day Year **8 29 02**

GENERATOR

TRANSPORTER

FACILITY

591

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23068

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116536

Transaction# 12715/14

34

Net Weight: 44 120

22.06

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8900

16. 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.

Printed/Typed Name *RM HART*

Signature *RM Hart*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Steve Couther*

Signature *Steve Couther*

Month Day Year *8 29 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Nancy Adams*

Signature *Nancy Adams*

Month Day Year *8 29 06*

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

11111

592  
59

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
767 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1271683

P-52

Net Weight: 22.26 tons

Emergency Contact: Capital Environmental Services, Inc. 302 652-8099

16. 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.

Printed/Typed Name  
Rob HART

Signature  
[Signature]

Month Day Year  
08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
David Yarnes

Signature  
[Signature]

Month Day Year  
08 29 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
K. Adams

Signature  
[Signature]

Month Day Year  
8/29/06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

593

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
~~C&H Trucking - Per year Trucking~~ **NOT REQUIRED**

6. US EPA ID Number

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone  
757 865-6970

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

50.5

001

70

DT

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

1271629

P-62

Net Weight:

18.26 T

Emergency Contact: Capital Environmental Services, Inc. 302 852-8099

16. 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.

Printed/Typed Name  
RM HANT

Signature

Month Day Year  
08 29 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
C&H Trucking/P62

Signature

Month Day Year  
09 01 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Rob Adams

Signature

Month Day Year  
08 29 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

594

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
~~GM Trucking~~ *Kay Lloyd* 6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name 8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668 10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b. . . . .

c. . . . .

d. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115538

Transaction#: 1271634

Net Weight: 22.44 TONS

AT-14

Emergency Contact: Capital Environmental Services, Inc. 302 652-8990

16. 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.

Printed/Typed Name *Rob Schenk*

Signature *[Signature]*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *KAY LLOYD*

Signature *[Signature]*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Adams*

Signature *[Signature]*

Month Day Year

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

595

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a.			
b.			
c.			
d.			

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1271672

AT-11

Net Weight: 19.23

Emergency Contact: Capital Environmental Services, Inc. 302 652-8000

16. 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.

Printed/Typed Name: *Rob Schonk*

Signature: *[Signature]*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: *[Signature]*

Signature: *[Signature]*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: *Kelvin Adams*

Signature: *[Signature]*

Month Day Year: 12/19/01

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

596

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 (Attn: Rob Schonk)

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill

100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00/

Type  
DT

20<sup>T</sup>

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118530

Transaction# 1271689

AT-18

Net Weight 20-29

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8899

16. 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.

Printed/Typed Name

RM Hartz

Signature

[Signature]

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Jack E. Whitwell

Signature

[Signature]

Month Day Year

12/30/06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

597

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
~~GM Trucking~~ *Purple Trucking* 6. US EPA ID Number **NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name 8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666 10. US EPA ID Number **NOT REQUIRED**

C. Facility's Phone  
757 965-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110539 Transaction# 1271688  
P-62 Net Weight 17.99 T  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8090

16. 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.

Printed/Typed Name *BM Hart*

Signature *BM Hart*

Month Day Year *08 30 06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *David L. ...*

Signature *[Signature]*

Month Day Year *08 31 06*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Tack F Blackwell*

Signature *Tack F Blackwell*

Month Day Year *08 31 06*

GENERATOR

TRANSPORTER

FACILITY

598

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1271684

15

Net Weight 20.2

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name *B M Hart*

Signature *B M Hart*

Month Day Year 18 30 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Rich Johnson*

Signature *Rich Johnson*

Month Day Year 10 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Clarke Blackwell*

Signature *Clarke Blackwell*

Month Day Year 10 30 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

599

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-448-2784

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 855-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT

20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

127 16 93

T-10

Net Weight

19-22

Emergency Contact: Capital Environmental Services, Inc. 302 852-8990

16. 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.

Printed/Typed Name

RM HART

Signature

[Signature]

Month Day Year  
8 30 00

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

LR

Signature

[Signature]

Month Day Year  
8 30 00

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

WICKIE THURKWEILL

Signature

[Signature]

Month Day Year  
8 30 00

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

600

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1515 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8970

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116530

Transaction#

1271692

Net Weight

18.63

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name *RM HART*

Signature *[Signature]*

Month Day Year *8 30 06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature *T. Sheppard*

Month Day Year *8 30 06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature *T. Sheppard*

Month Day Year *8 30 06*

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *[Name]*

Signature *[Signature]*

Month Day Year *8 30 06*

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

601

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1271694

14

Net Weight: 22.3

Emergency Contact: Capital Environmental Services, Inc. 302 852-8899

16. 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.

Printed/Typed Name R M Hart

Signature [Signature]

Month Day Year 08/30/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name Q. Cross

Signature [Signature]

Month Day Year 08/30/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Jackie Blackwell

Signature [Signature] Month Day Year

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

602

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

20

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110530

Transaction# 1271695

16

Net Weight 21.61

Emergency Contact: Capital Environmental Services, Inc. 302 852-9999

16. 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.

Printed/Typed Name *B M Hart*

Signature *B M Hart*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *L. [unclear]*

Signature *[unclear]*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Michelle Blackwell*

Signature *Michelle Blackwell*

Month Day Year

08 30 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

603

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1271702  
P-73 Net Weight: 21.83  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8900

16. 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.

Printed/Typed Name *BM Hart*

Signature *BM Hart* Month Day Year 08/30/05

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Perry*

Signature *R.C. Johnson* Month Day Year 08/30/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *John Blackwell*

Signature *John Blackwell* Month Day Year 08/30/06

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

604

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
 Commander, Navy Region Mid-Atlantic (CNRMA)  
 1810 Gilbert St., Norfolk, VA 23611-2737

Site:  
 Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schork

5. Transporter 1 Company Name  
 C&H Trucking

6. US EPA ID Number  
 NOT REQUIRED

A. Transporter's Phone  
 757-445-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
 Bethel Sanitary Landfill  
 100 North Park La.  
 Hampton, VA 23666

10. US EPA ID Number  
 NOT REQUIRED

C. Facility's Phone  
 757 865-8070

11. Waste Shipping Name and Description

12. Containers  
 No. Type

13. Total Quantity

14. Unit  
 Wt/Vol

a. Non-RCRA, Non DOT Soil contaminated with Wood Debris

60 / DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
 Project# 116639 Transaction# 1271703  
 Net Weight 21.35  
 P-53  
 Emergency Contact Capital Environmental Services, Inc. 302 652-8990

16. 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.

Printed/Typed Name *RM Hart*

Signature *[Signature]*

Month Day Year *8 30 98*

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name *PURYEAR*

Signature *[Signature]*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
 Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Jack Blackwell*

Signature *[Signature]*

Month Day Year *10 15 98*

COPY

GENERATOR

TRANSPORTER

FACILITY

605

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23686

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1271712

18

Net Weight: 21.3

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name *R M Hart*

Signature *R M Hart*

Month Day Year 8/30/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *R Scott*

Signature *R Scott*

Month Day Year 8/30/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Jackie Blackwell*

Signature *Jackie Blackwell*

Month Day Year 10/2/06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

606

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23506

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
001 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110530 Transaction# 1271708  
34 Net Weight 42840 - 2142  
Emergency Contact: Capitol Environmental Services, Inc. 302 662-8999

16. 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.

Printed/Typed Name *BM Hart*

Signature *BM Hart*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Steve Cozter*

Signature *Steve Cozter*

Month Day Year *8 30 06*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Charles Blackwell*

Signature *Charles Blackwell*

Month Day Year *08 30 06*

GENERATOR  
TRANSPORTER  
FACILITY

GENERATOR'S COPY

607

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1271709  
10 Net Weight: 17.24  
Emergency Contact: Capitol Environmental Services, Inc. 302 662-8898

16. 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.

Printed/Typed Name: *R M Short*

Signature: *[Signature]* Month Day Year: 8/30/00

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name: *Dorcas Blawie* Signature: *[Signature]* Month Day Year: 08/30/00

GENERATOR

TRANSPORTER

FACILITY

608

**NON-HAZARDOUS WASTE MANIFEST**

Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757 866-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

001

DT

20<sup>T</sup>

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#:

127 1710

Net Weight:

19.78

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

D. Taylor

Signature

D. Taylor

Month Day Year

8 20 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

M. S. H.

Signature

M. S. H.

Month Day Year

8 20 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

K. Adams

Signature

K. Adams

Month Day Year

8 30 06

GENERATOR

TRANSPORTER

FACILITY

609

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-0070

11. Waste Shipping Name and Description

12. Containers  
No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118538

Transaction# 1271711

28 SNT

Net Weight: 19.87

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name: D. Taylor Signature: D.P. Taylor Month: . Day: . Year: .

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Signature: Month: . Day: . Year: .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: R. CUFFEE Signature: P. Cuffee Month: 18 Day: 30 Year: 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: K. Adams Signature: K. Adams Month: 8 Day: 30 Year: 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

610

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
**C&H Trucking**

A. Transporter's Phone  
**757-449-2761**

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name

B. Transporter's Phone

8. US EPA ID Number

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23666**

C. Facility's Phone  
**757 865-6070**

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

13. Total Quantity  
**001** DT **70** T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115539 Transaction# 1271717  
Net Weight 18.68  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8000

16. 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.  
Printed/Typed Name: **D. Taylor** Signature: **D.P. Taylor** Month: . Day: . Year: .

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: **Eddie Perry** Signature: **Eddie Perry** Month: **8** Day: **30** Year: **06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Signature: Month: Day: Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: **Kalena Adams** Signature: **K Adams** Month: **18** Day: **30** Year: **06**

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

611

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

20/ DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1271726  
Net Weight: 17.71  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
D. Taylor  
Month Day Year  
. . .

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year  
08/31/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year  
. . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Laura Adams

Signature  
Laura Adams  
Month Day Year  
08/30/06

GENERATOR

TRANSPORTER

FACILITY

612

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**

Site:  
**Paradise Creek**

4. Generator's Phone ( **757** ) **445-8703**      Attn: **Rob Schonk**

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-440-2701**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Ethel Sanitary Landfill**  
**100 North Park La.**  
**Hampton, VA 23666**

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 865-8070**

11. Waste Shipping Name and Description  
a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**  
b.  
c.  
d.

12. Containers	13. Total Quantity	14. Unit Wt/Vol
No.	Type	
	DT	T
		20

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# **118630**      Transaction#  
**P-50**      Net Weight: **21,07**  
Emergency Contact: **Capital Environmental Services, Inc. 302 652-8000**

**16. 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.

Printed/Typed Name  
**D. Taylor**

Signature  
*D.P. Taylor*      Month Day Year  
**08 30 06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
**James Freshwater**

Signature  
*James Freshwater*      Month Day Year  
**08 30 06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
**Por Year TR**

Signature  
\_\_\_\_\_  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
**Lacura Adams**

Signature  
*Lacura Adams*      Month Day Year  
**08 30 06**

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

613

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
**Paradise Creek**

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
~~C&H Trucking~~ **PVIYAR**

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
**757-440-2701**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
**757 805-6070**

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

No. **20/**

Type **DT**

**20**

**T**

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116538 Transaction# **127 1725**  
**P-70** Net Weight: **20.53**  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8090

16. 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.

Printed/Typed Name  
**D. Taylor**

Signature **[Signature]** Month Day Year **8.30.06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
**BRUCE BULLOCK**

Signature **[Signature]** Month Day Year **10.9.06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
**William Adams**

Signature **[Signature]** Month Day Year **10.18.06**

TRANSPORTER #2

GENERATOR

TRANSPORTER

FACILITY

614

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No. Type  
001 DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1,271746  
15 Net Weight: 20-38  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
D. Taylor

Month Day Year  
08 30 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Rick Troutman

Signature  
Rick Troutman

Month Day Year  
10 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
C. Adams

Signature  
C. Adams

Month Day Year  
11 30 06

GENERATOR

TRANSPORTER

FACILITY

615

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
~~C&H Trucking~~ **ATCO CORP** 6. US EPA ID Number **NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name 8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066 10. US EPA ID Number **NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T  
001

b. . . . .

c. . . . .

d. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# 1271747  
**AT18** Net Weight: 22.73  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name **D Taylor** Signature **D.P. Taylor** Month **8** Day **30** Year **06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **JOHN CARTER** Signature **John Carter** Month **8** Day **30** Year **06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name **Kenneth Adams** Signature **Kenneth Adams** Month **8** Day **30** Year **06**

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

616

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
~~SN Trucking~~ *Par-year Trucking*

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No. Type Total Quantity Unit Wt/Vol  
DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 127 1757  
P-62 Net Weight 17.49 T  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8000

16. 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.

Printed/Typed Name  
D Taylor

Signature  
D.P. Taylor

Month Day Year  
8 30 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Dewell Locking / P-62

Signature  
Dewell Locking

Month Day Year  
8 30 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Kellera Adams

Signature  
Kellera Adams

Month Day Year  
8 30 06

GENERATOR

TRANSPORTER

FACILITY

617

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

A. Transporter's Phone  
757-448-2761

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name

B. Transporter's Phone

8. US EPA ID Number  
**NOT REQUIRED**

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23665

C. Facility's Phone  
757 865-8070

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Non RCRA, Non DOT Soil contaminated with Wood Debris		DT	20	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# 1271807  
33 Net Weight 16.75  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name  
D. P. Taylor

Signature  
D. P. Taylor  
Month Day Year  
8 30 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Signature

Month Day Year  
10 2 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
William Adams

Signature  
W. Adams  
Month Day Year  
8 30 06

GENERATOR'S COPY

GENERATOR  
TRANSPORTER  
FACILITY

618

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

**NOT REQUIRED**

A. Transporter's Phone

757-440-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

**NOT REQUIRED**

C. Facility's Phone

757 885-6076

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#: 127 176 7

T-11

Net Weight: 20-11

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

D. Taylor

Signature

D.P. Taylor

Month Day Year

8 30 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

T. Steppard

Month Day Year

8 30 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

T. Steppard

Month Day Year

8 30 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Chick Blackwell

Signature

Chick Blackwell

Month Day Year

08 30 06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

619

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23068

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 866-8070

11. Waste Shipping Name and Description

12. Containers

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No. Type 13. Total Quantity 14. Unit Wt/Vol

007 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# 127 1764  
T-10 Net Weight 19.27  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8990

16. 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.

Printed/Typed Name  
D Taylor

Signature  
D.P. Taylor  
Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
LR

Signature  
LR  
Month Day Year  
8 30 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Doris Blackwell

Signature  
Doris Blackwell  
Month Day Year  
08 30 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

620

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1271762

14

Net Weight 25.94

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
D. P. Taylor

Signature  
D.P. Taylor

Month Day Year  
8 30 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
D. Cross

Signature  
D. Cross

Month Day Year  
8 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year  
. . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Karen Adams

Signature  
K Adams

Month Day Year  
. . .

TRANSPORTER #2

TRANSPORTER

FACILITY

621

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23611-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110530

Transaction# 1271776

P-53

Net Weight: 20.49

Emergency Contact: Capital Environmental Services, Inc. 302 652-8900

16. 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.

Printed/Typed Name

Signature

Month Day Year

D. Talor

[Signature]

8-3-00

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

[Signature]

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

[Signature]

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

Mark Blackwell

[Signature]

18 Feb 00

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

622

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 866-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1271780  
D-73 Net Weight: 21.38  
Emergency Contact: Capital Environmental Services, Inc. 302 662-8999

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
D. Taylor  
Month Day Year  
8 30 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Puryear

Signature  
R. J. Soliman  
Month Day Year  
10 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Adam

Signature  
Adam  
Month Day Year  
8 30 06

GENERATOR

TRANSPORTER

FACILITY

623

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (COMNA)  
1510 Gilbert St., Norfolk, VA 23511-2757

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 866-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1275734  
~~FAST~~ T-11 Net Weight: 14.94  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name  
DTA, Lor

Signature  
D.P. Taylor

Month Day Year  
09/13/00

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
T. Sogard

Month Day Year  
09/13/00

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
T. Sogard

Month Day Year  
09/13/00

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year  
09/13/00

GENERATOR

TRANSPORTER

FACILITY

624

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23866

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers

No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

..... DT .. 20

b.

.....

c.

.....

d.

.....

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118538 Transaction# 1275741  
RDR-1 Net Weight 18.14  
Emergency Contact: Capital Environmental Services, Inc. 302-852-8000

16. 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.

Printed/Typed Name Signature Month Day Year  
D. Taylor JDP Taylor 07 13 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year  
RANDALL D. ROGLESON Randall D. Rogleson 07 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Signature Month Day Year  
Sally M. Thek... Sally M. Thek... 07 13 06

GENERATOR

TRANSPORTER

FACILITY

625

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone (757) 445-8703 Attn: Rob Schork

Site:  
Paradise Creek

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-442-2781

7. Transporter 2 Company Name: \_\_\_\_\_  
8. US EPA ID Number: \_\_\_\_\_

B. Transporter's Phone: \_\_\_\_\_

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln  
Hampton, VA 23686  
10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757 855-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity: 20  
14. Unit Wt/Vol: T

b. \_\_\_\_\_

\_\_\_\_\_

c. \_\_\_\_\_

\_\_\_\_\_

d. \_\_\_\_\_

\_\_\_\_\_

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 1275746  
AT-15 Net Weight 18.18  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name: D. Taylor

Signature: [Signature] Month Day Year: 09/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: [Signature]

Signature: [Signature] Month Day Year: [Signature]

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Month Day Year: \_\_\_\_\_

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: [Signature]

Signature: [Signature] Month Day Year: 09/13/06

GENERATOR

TRANSPORTER

FACILITY

626

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2727

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
GWH Trucking  
6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2761

7. Transporter 2 Company Name  
8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668  
10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
a. 001	70	T
b. .	.	.
c. .	.	.
d. .	.	.

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110539 Transaction# 1275742  
P-62 Net Weight 15.57 TONS  
Emergency Contact: Capital Environmental Services, Inc. 302 662-8990

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
DPTaylor  
Month Day Year  
09/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Signature

Month Day Year  
09/13/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
K. Adams

Signature  
K. Adams  
Month Day Year  
09/13/06

GENERATOR

TRANSPORTER

FACILITY

627

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
CAH Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23060

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

.

c.

.

d.

.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1275711  
14 Net Weight: 17.32  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
DP Taylor  
Month Day Year  
09/13/96

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
W. Cross

Signature  
W. Cross  
Month Day Year  
09/13/96

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Dookie Blawie II

Signature  
Dookie Blawie II  
Month Day Year  
09/13/96

TRANSPORTER #2

GENERATOR  
TRANSPORTER  
FACILITY

628

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMIA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site  
Paradise Creek

4. Generator's Phone (757) 445-8702 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23060

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non-DOT Soil contaminated with Wood Debris

20.1 DT 7.0

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 1275713  
15 Net Weight 19.37  
Emergency Contact: Capital Environmental Services, Inc. 302-852-8698

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
D.P. Taylor  
Month Day Year  
09/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
R. Scott

Signature  
R. Scott  
Month Day Year  
9/13/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Tackie Blackwell

Signature  
Tackie Blackwell  
Month Day Year  
9/14/06

GENERATOR

TRANSPORTER

FACILITY

629

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
CAH Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-0070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Mixed Debris

13. Total Quantity  
14. Unit Wt/Vol  
001 DT 2.0 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118538 Transaction# 1275714  
Net Weight 18.53  
DAVIS #1  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name  
D Taylor

Signature  
D Taylor  
Month Day Year  
07 23 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
Wette Grant

Signature  
Wette Grant  
Month Day Year  
07 23 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
T. D. Duckwell

Signature  
T. D. Duckwell  
Month Day Year  
07 23 06

GENERATOR

TRANSPORTER

FACILITY

630

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23060

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 665-0070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
001 DT 7.0 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1275722  
18 Net Weight: 18. -  
Emergency Contact: Capital Environmental Services, Inc. 302 662-8908

16. 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.

Printed/Typed Name  
D Taylor

Signature  
D Taylor  
Month Day Year  
12 21 2006

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Neil B... ..

Signature  
R... ..  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
T... ..

Signature  
T... ..  
Month Day Year  
12 13 06

GENERATOR

TRANSPORTER

FACILITY

631

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1810 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-855-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
001 DT 7.0 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1275721  
Net Weight: 17.39  
Emergency Contact: Capital Environmental Services, Inc. 802 652-8990

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
D. Taylor  
Month Day Year  
09/30/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
M. Smith

Signature  
M. Smith  
Month Day Year  
09/30/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Mark Blackwell

Signature  
Mark Blackwell  
Month Day Year  
09/30/06

GENERATOR

TRANSPORTER

FACILITY

632

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1010 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schrock

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757-866-0070

11. Waste Shipping Name and Description

12. Containers  
No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

.

c.

.

d.

.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# ~~14-8~~ 1775725  
FISK 6 Net Weight 14.86  
Emergency Contact: Capitol Environmental Services, Inc. 302-652-3999

16. 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.

Printed/Typed Name: D Taylor Signature: D Taylor Month: 09 Day: 30 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: PAUL NELLER Signature: Paul Neller Month: 09 Day: 30 Year: 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Signature: Month: Day: Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name: Signature: Month: Day: Year: 09/30/06

GENERATOR

TRANSPORTER

FACILITY

633

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-440-2701

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23806

10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757-895-8070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1275751  
Net Weight 18.55  
P-53  
Emergency Contact: Capital Environmental Services, Inc. 802-862-8898

16. 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.

Printed/Typed Name: D. Taylor

Signature: D.P. Taylor  
Month Day Year: 09/3/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: [Signature]

Signature: [Signature]  
Month Day Year: [Signature]

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: [Signature]

Signature: [Signature]  
Month Day Year: [Signature]

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: [Signature]

Signature: [Signature]  
Month Day Year: 10/2/06

GENERATOR  
TRANSPORTER  
FACILITY

634

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23665

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
00.1 DT 2.0 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 1275730  
~~FEEL~~ Higgins # / Net Weight 16.23  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
D Taylor  
Month Day Year  
09 13 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
K Higgins

Signature  
K Higgins  
Month Day Year  
9 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
S. Blackwell

Signature  
S Blackwell  
Month Day Year  
09 13 06

TRANSPORTER #1

GENERATOR

TRANSPORTER

FACILITY

635

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site  
Paradise Creek

4. Generator's Phone (757) 446-5702 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-442-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23068

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-866-3070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
601 DT 20

b.

...

c.

...

d.

...

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115538 Transaction# 127-5728  
Newman 5 Net Weight 16.34  
Emergency Contact: Capital Environmental Services, Inc. 302-652-8996

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
D. Taylor  
Month Day Year  
09 13 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Steven E. Boggess

Signature  
[Signature]  
Month Day Year  
9 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
[Signature]

Signature  
[Signature]  
Month Day Year  
09 13 06

GENERATOR  
TRANSPORTER  
FACILITY

636

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2757

Site:

Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

Attn: Rob Schunk

5. Transporter 1 Company Name

C&H Trucking

6.

US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2761

7. Transporter 2 Company Name

8.

US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23008

10.

US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-866-8370

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001

DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1275752

P-73

Net Weight 16.53

Emergency Contact: Capital Environmental Services, Inc. 302-852-8999

16. 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.

Printed/Typed Name

D. Taylor

Signature

D.P. Taylor

Month Day Year  
09/30/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

R.C. DANHIRE

Signature

R.C. Danhire

Month Day Year  
09/13/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Laura Adams

Signature

Laura Adams

Month Day Year  
9/15/06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

637

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNIRMA)  
1810 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 446-6703 Attn: Ron Schenk

5. Transporter 1 Company Name *Paragon Trucking* 6. US EPA ID Number **NOT REQUIRED**

A. Transporter's Phone  
757-443-2701

7. Transporter 2 Company Name 8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666 10. US EPA ID Number **NOT REQUIRED**

C. Facility's Phone  
757 855-6070

11. Waste Shipping Name and Description

12. Containers	13. Total Quantity	14. Unit		
			No.	Type
a.	Non RCRA, Non DOT Soil contaminated with Wood Debris	201	DT	2.0 T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110539

Transaction#

1775759

Net Weight

11.08

Emergency Contact: Capital Environmental Services, Inc. 302 852-8900

16. 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.

Printed/Typed Name

Signature

Month Day Year

*D. Taylor*

*D.P. Taylor*

09/30/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

*Anna Adams*

*Anna Adams*

9/30/06

GENERATOR

TRANSPORTER

FACILITY

638

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
CBM Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-442-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-885-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1275767  
S: S # Net Weight 13.33  
Emergency Contact: Capital Environmental Services, Inc. 802 662-8900

16. 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.

Printed/Typed Name  
D Taylor

Signature  
D Taylor  
Month Day Year  
09 13 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
STEVEN TEP

Signature  
Steven P. Tep  
Month Day Year  
09 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
L Adams

Signature  
L Adams  
Month Day Year  
09 13 06

GENERATOR

TRANSPORTER

FACILITY

0639

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Ron Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2751

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No. Type

DT

7.0 T

b.

No. Type

c.

No. Type

d.

No. Type

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115530 Transaction# 1275765  
T-10 Net Weight 15.72  
Emergency Contact: Capitol Environmental Services, Inc. 802 651-8999

16. 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.

Printed/Typed Name  
D Taylor

Signature  
D Taylor  
Month Day Year  
09 13 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
JK

Signature  
JK  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Kathryn Adams

Signature  
Kathryn Adams  
Month Day Year  
9 15 06

GENERATOR

TRANSPORTER

FACILITY

0640

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1810 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1275779

14

Net Weight 23.53

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year

D. P. Taylor

D. P. Taylor

09/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

D. Cross

D. J. Cross

09/13/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

D. J. Cross

D. J. Cross

09/13/06

GENERATOR

TRANSPORTER

FACILITY

0641

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone (757) 446-8705 Attn: Rob Bohrok

Site:  
Paradise Creek

5. Transporter 1 Company Name  
O&H Trucking  
6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name  
8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066  
10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00 / 20 T

b.  
c.  
d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1275784  
Net Weight: 20.11  
Emergency Contact: Capital Environmental Services, Inc. 302 662-0900

16. 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.

Printed/Typed Name: D Taylor Signature: D Taylor Month: 09 Day: 15 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: J Scott Signature: J Scott Month: 9 Day: 15 Year: 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: Signature: Month: Day: Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: Laura Adams Signature: L Adams Month: 10 Day: 18 Year: 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

0642

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (767) 446-8703 Attn: Rob Schenk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 767-448-2781

7. Transporter 2 Company Name: \_\_\_\_\_  
8. US EPA ID Number: \_\_\_\_\_

B. Transporter's Phone: \_\_\_\_\_

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23686  
10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757-868-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

0.01 DT 20 T

b. \_\_\_\_\_

\_\_\_\_\_

c. \_\_\_\_\_

\_\_\_\_\_

d. \_\_\_\_\_

\_\_\_\_\_

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110539 Transaction# 1275781  
Net Weight 19.81  
DAVIS #1  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8000

16. 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.

Printed/Typed Name: D Taylor

Signature: D.P. Taylor  
Month Day Year: 09/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Kette Grant

Signature: [Signature]  
Month Day Year: 9/13/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: \_\_\_\_\_

Signature: \_\_\_\_\_  
Month Day Year: . . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: K. Adams

Signature: [Signature]  
Month Day Year: 9/13/06

GENERATOR  
TRANSPORTER  
FACILITY

0643

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2787

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23658

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 2.0 T

b.

.

c.

.

d.

.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115539 Transaction# 1275793  
Net Weight 17.88  
Emergency Contact: Capital Environmental Services, Inc. 302-652-8898

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
D. Taylor  
Month Day Year  
09/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
M. Smith

Signature  
M. Smith  
Month Day Year  
9/13/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
L. Adams

Signature  
L. Adams  
Month Day Year  
09/13/06

GENERATOR

TRANSPORTER

FACILITY

0644

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, New Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23511-2787

4. Generator's Phone ( 757 ) 445-6793 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 OT 7.0 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1278792  
18 Net Weight 17.93  
Emergency Contact: Capital Environmental Services, Inc. 802 852-8090

16. 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.

Printed/Typed Name  
D. TAYLOR

Signature  
D. Taylor  
Month Day Year  
07/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Neil Baker

Signature  
Neil Baker  
Month Day Year  
7/13/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
LAWRENCE ADAMS

Signature  
L. Adams  
Month Day Year  
7/13/06

GENERATOR

TRANSPORTER

FACILITY

0645

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23088

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a.	DT	20	T
b.			
c.			
d.			

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 . . . 20

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110539

Transaction#: ~~10539~~ 127 5800

Truck 6

Net Weight: 18.66

Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year

D. Taylor

D.P. Taylor

09/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

PAUL KELLER

Paul Keller

09/13/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

Laura Adams

L. Adams

09/13/06

TRANSPORTER #1

TRANSPORTER

FACILITY

0646

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, New Region Mid-Atlantic (CMRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8709 Attn: Rob Schonh

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction#: 1275802  
Newmans Net Weight: 17.41  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8998

16. 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.

Printed/Typed Name: D. Taylor Signature: D. Taylor Month: 09 Day: 13 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Steve E. Boggs Signature: Steve E. Boggs Month: 09 Day: 13 Year: 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: Signature: Month: Day: Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: Laurie Adams Signature: Laurie Adams Month: 09 Day: 13 Year: 06

TRANSPORTER #1

GENERATOR

TRANSPORTER

FACILITY

0647

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23686

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00.1 DT 7.0 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1275812  
Higgins 1 Net Weight 17.47  
Emergency Contact: Capital Environmental Services, Inc, 302 852-8998

16. 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.

Printed/Typed Name  
D Taylor

Signature  
D.P. Taylor  
Month Day Year  
06 13 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
K Higgins

Signature  
K Higgins  
Month Day Year  
06 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Laura Adams

Signature  
L Adams  
Month Day Year  
06 13 06

TRANSPORTER #1

GENERATOR

TRANSPORTER

FACILITY

0648

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (ONRMA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schork

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-442-2161

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-866-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

001 DT 70 T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115539

Transaction#

127 5804

T-11

Net Weight

17.89

Emergency Contact: Capital Environmental Services, Inc. 302-862-8999

16. 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.

Printed/Typed Name

D. Taylor

Signature

D.P. Taylor

Month Day Year

09 13 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

[Signature]

Month Day Year

9 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

[Signature]

Month Day Year

9 13 06

19. Discrepancy Indication Space

L

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year

10 10 06

TRANSPORTER

FACILITY

GENERATOR'S COPY

0649

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CARMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

Site:  
Paradise Creek

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-448-2781

7. Transporter 2 Company Name: \_\_\_\_\_  
8. US EPA ID Number: \_\_\_\_\_

B. Transporter's Phone: \_\_\_\_\_

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23068  
10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757 685-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity: 20  
14. Unit Wt/Vol: T  
00/1

b. \_\_\_\_\_

\_\_\_\_\_

c. \_\_\_\_\_

\_\_\_\_\_

d. \_\_\_\_\_

\_\_\_\_\_

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 1275816  
RDA-1 Net Weight: 26.44 TONS  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name: D Taylor

Signature: [Signature] Month Day Year: 09/15/00

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: RANDALL D RUSTENON

Signature: [Signature] Month Day Year: 09/15/00

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Month Day Year: \_\_\_\_\_

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: [Signature]

Signature: [Signature] Month Day Year: 09/15/00

GENERATOR

TRANSPORTER

FACILITY

06570

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, New Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking  
6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2701

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066  
10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-866-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

1. DT 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1275826  
P-62 Net Weight: 16.02 tn  
Emergency Contact: Capitol Environmental Services, Inc. 302-852-8990

16. 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.  
Printed/Typed Name *Ray Harris* Signature *[Signature]* Month Day Year *9/30/06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Joseph A. [Signature]* Signature *[Signature]* Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name *William Adams* Signature *[Signature]* Month Day Year *9/15/06*

GENERATOR  
TRANSPORTER  
FACILITY

0651

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23611-2737  
4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

Site:  
Paradise Creek

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-440-2701

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23680  
10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757-866-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 2.0 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118538 Transaction# 1275821  
Net Weight: 19.53  
AT-15  
Emergency Contact: Capital Environmental Services, Inc. 302-852-8990

16. 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.

Printed/Typed Name: [Signature]

Signature: [Signature] Month Day Year: 09/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Leon Briggs

Signature: [Signature] Month Day Year: 09/13/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: [Signature]

Signature: [Signature] Month Day Year: 09/13/06

GENERATOR  
TRANSPORTER  
FACILITY

0652

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2757

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6103 Attn: Rob Schook

5. Transporter 1 Company Name  
CSM Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
**NOT REQUIRED.**

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757-886-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1275825  
P-53 Net Weight 20.42  
Emergency Contact: Capital Environmental Services, Inc. 302-852-8999

16. 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.

Printed/Typed Name *ASM/Hart*

Signature *[Signature]* Month Day Year 12/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *[Signature]*

Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *[Signature]*

Signature Month Day Year

GENERATOR

TRANSPORTER

FACILITY

0653

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1810 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone (757) 445-8703 Attn: Rob Schork

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
767-885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118538 Transaction# 127 5836  
P-73 Net Weight: 23.08  
Emergency Contact: Capitol Environmental Services, Inc. 302 882-8990

16. 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.

Printed/Typed Name  
KIM HART

Signature  
[Signature]

Month Day Year  
09/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Puryear R.C. Dahmer

Signature  
[Signature]

Month Day Year  
09/13/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
[Signature]

Signature  
[Signature]

Month Day Year  
09/15/06

GENERATOR  
TRANSPORTER  
FACILITY

0654

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

Site:  
Paradise Creek

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2757

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757 855-8078

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 7.0 T

b. ....

c. ....

d. ....

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118639 Transaction# 1275842  
P-61 Net Weight 18.26  
Emergency Contact: Capital Environmental Services, Inc. 302 862-8999

16. 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.

Printed/Typed Name *B M Hart*

Signature *[Signature]*

Month Day Year  
09V 306

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Daniel Boy*

Signature *[Signature]*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *K. Clark Adams*

Signature *[Signature]*

Month Day Year  
7 13 06

GENERATOR

TRANSPORTER

FACILITY

0655

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Units Wt/Vol  
001 DT 2.0 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 127 58 39  
T-10 Net Weight 26.44  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

Signature

Month Day Year  
09/30/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Laura Adams

Signature  
L Adams

Month Day Year  
10/10/06

GENERATOR

TRANSPORTER

FACILITY

0656

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6.

US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8.

US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23065

10.

US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 865-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001

DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1275845

14

Net Weight: 26.7

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8989

16. 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.

Printed/Typed Name

RM Hart

Signature

[Signature]

Month Day Year

09 13 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

D. Cross

Signature

[Signature]

Month Day Year

09 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

K. Adams

Signature

[Signature]

Month Day Year

11 13 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

0657

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest  
Document No.

2. Page 1  
of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

Site:  
Paradise Creek

5. Transporter 1 Company Name  
CBM Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2701

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
00.1 DT 7.0 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116538 Transaction# 1775871  
Net Weight: 24.52  
DAVIS #1  
Emergency Contact: Capital Environmental Services, Inc 302 652-8899

16. 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.

Printed/Typed Name  
R M Hunt

Signature  
R M Hunt  
Month Day Year  
09/1/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
YORK Giant

Signature  
YORK Giant  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature  
Month Day Year

GENERATOR

TRANSPORTER

FACILITY

0658

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name: D&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-440-2781

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23066  
10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757-885-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

OT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118524 Transaction# 1275872  
Net Weight 21.91  
1c 5872  
Emergency Contact: Capital Environmental Services, Inc. 302-552-8000

16. 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.

Printed/Typed Name: D. Taylor

Signature: [Signature] Month Day Year: 10/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: [Signature] Baker

Signature: [Signature] Month Day Year: 10/13/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: [Signature] Adams

Signature: [Signature] Month Day Year: 10/13/06

GENERATOR

TRANSPORTER

FACILITY

0659

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMIA)  
1610 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-866-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 2.0

11. Waste Shipping Name and Description		12. Containers		13. Total Quantity	14. Unit Wt/Vol
		No.	Type		
a. Non RCRA, Non DOT Soil contaminated with Wood Debris		001	DT	2.0	T
b.					
c.					
d.					

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118538 Transaction# 1275860  
Net Weight 22.16  
15  
Emergency Contact: Capital Environmental Services, Inc. 302-652-8986

16. 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.

Printed/Typed Name *R M Hart* Signature *R M Hart* Month Day Year 07 12 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *R Schork* Signature *R Schork* Month Day Year . . .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year . . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *William Adams* Signature *William Adams* Month Day Year 9 11 06

GENERATOR

TRANSPORTER

FACILITY

0660

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2797

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

OT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116939

Transaction# 1275893

11

Net Weight 22.74

Emergency Contact: Capitol Environmental Services, Inc. 302-852-8030

16. 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.

Printed/Typed Name

*DM Hart*

Signature

*[Signature]*

Month Day Year

09 30 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

9 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

. . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

*[Signature]*

Signature

*[Signature]*

Month Day Year

11 15 06

GENERATOR

TRANSPORTER

FACILITY

0661

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No. Type

Quantity

Wt/Vol

001 DT 20 T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115538

Transaction# 1775880

Fisk 6

Net Weight: 19.71

Emergency Contact: Capitol Environmental Services, Inc. 302 552-8999

16. 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.

Printed/Typed Name *B M HART*

Signature *B M HART*

Month Day Year 09 13 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *PAUL NELLER*

Signature *Paul Neller*

Month Day Year 09 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Laura Adams*

Signature *Laura Adams*

Month Day Year 09 13 06

TRANSPORTER

FACILITY

0662

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

201 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction#: 19-37  
Net Weight: 1275589  
NANNAN S  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8989

16. 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.

Printed/Typed Name  
B M HART

Signature  
*B M Hart*

Month Day Year  
09 | 13 | 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Steven E. Boggs

Signature  
*SE Boggs*

Month Day Year  
09 | 13 | 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Laura Adams

Signature  
*L Adams*

Month Day Year  
09 | 13 | 06

GENERATOR  
TRANSPORTER  
FACILITY

0663

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Senant

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-888-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1275890

T-11

Net Weight 19.14

Emergency Contact: Capital Environmental Services, Inc. 302-852-8900

16. 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.

Printed/Typed Name *R.M. HART*

Signature *R.M. Hart*

Month Day Year  
09/17/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *T. Chapman*

Signature *T. Chapman*

Month Day Year  
9/17/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature *T. Chapman*

Month Day Year  
9/17/06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *John R. Adams*

Signature *John R. Adams*

Month Day Year  
9/16/06

GENERATOR

TRANSPORTER

FACILITY

0664

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
CSH Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

1 0T 20 T

b.

.....

c.

.....

d.

.....

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 1275894

Riggins #

Net Weight: 19.96

Emergency Contact: Capital Environmental Services, Inc. 302 652-8909

16. 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.

Printed/Typed Name *DM HART*

Signature *DM HART*

Month Day Year 09 13 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *R. Riggins*

Signature *R Riggins*

Month Day Year 09 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Walter Blackwell*

Signature *Walter Blackwell*

Month Day Year 09 13 06

GENERATOR

TRANSPORTER

FACILITY

0665

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, New Region Mid-Atlantic (CNRMA)  
1810 Gilbert St., Norfolk, VA 23511-2737

Site  
Paradise Creek

4. Generator's Phone (757) 445-6702 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&M Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1275904  
Net Weight 27.11 TONS  
Emergency Contact: Capital Environmental Services, Inc. 302-852-8999

16. 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.

Printed/Typed Name *R M Hart* Signature *R M Hart* Month Day Year 09 13 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *RANDALL D ROGERSON* Signature *Randall Rogerson* Month Day Year 09 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Signature Month Day Year

GENERATOR

TRANSPORTER

FACILITY

0666

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name *Sub-Incinerating Process Handling* 6. US EPA ID Number **NOT REQUIRED.**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name 8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23068 10. US EPA ID Number **NOT REQUIRED.**

C. Facility's Phone  
757 865-0070

11. Waste Shipping Name and Description

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
0.01	DT	2.0	T
.	.	.	.
.	.	.	.
.	.	.	.

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115539

Transaction# 1275908

P-62

Net Weight 16.58 Tn

Emergency Contact: Capital Environmental Services, Inc. 302 852-9099

16. 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.

Printed/Typed Name *KM Hart*

Signature *[Signature]*

Month Day Year  
07 13 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Scott Lucking*

Signature *[Signature]*

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year  
. . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Jackie Wilkerson*

Signature *[Signature]*

Month Day Year  
07 13 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

0667

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2757

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23686

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 855-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

0.01 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118538

Transaction# 177 5960

AT-15

Net Weight: 21.11

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name *RM Hunt*

Signature *[Signature]*

Month Day Year 09 13 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Leon Barnes*

Signature *[Signature]*

Month Day Year 09 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

0668

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Etc.  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
~~CEN Trucking Co. Inc.~~

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-885-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

.

c.

.

d.

.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118538 Transaction# 1275932  
P-5T Net Weight 19.77  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8989

16. 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.

Printed/Typed Name *RM Harris*

Signature *[Signature]*

Month Day Year  
09/30/02

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *[Name]*

Signature *[Signature]*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *William Adams*

Signature *[Signature]*

Month Day Year  
11/15/02

GENERATOR  
TRANSPORTER  
FACILITY

0669

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site  
Paradise Creek

4. Generator's Phone (757) 445-5703 Attn: Rob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23068

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-885-8078

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

T

001 20

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 127 5919

P-53

Net Weight 20.45

Emergency Contact: Capital Environmental Services, Inc. 302-852-8888

16. 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.

Printed/Typed Name

R M Hart

Signature

[Signature]

Month Day Year

7/30/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

7/30/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

.

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

8/1/06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

0670

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
DT 20 T

b.

.. . . .

c.

.. . . .

d.

.. . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116538 Transaction# 1275297  
P-73 Net Weight: 22.51  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8989

16. 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.

Printed/Typed Name *B. M. Hart*

Signature *[Signature]* Month Day Year 09/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *P. Polyear* R.C. Dahmer

Signature *[Signature]* Month Day Year 09/13/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *N. Adams*

Signature *[Signature]* Month Day Year 09/13/06

GENERATOR  
TRANSPORTER  
FACILITY

GENERATOR'S COPY

0671

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CRFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23665

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115539 Transaction# 1275918  
T-10 Net Weight 16.80  
Emergency Contact: Capital Environmental Services, Inc. 302-652-9899

16. 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.

Printed/Typed Name *RM HART*

Signature *RM HART*

Month Day Year 09/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *LR*

Signature *LR*

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Mike Blakwell*

Signature *Mike Blakwell*

Month Day Year 09/14/06

GENERATOR

TRANSPORTER

FACILITY

0672

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA. 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers	13. Total Quantity	14. Unit Wt/Vol		
			No.	Type
a.	001	DT	20	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1275928  
14 Net Weight: 24.03  
Emergency Contact: Capital Environmental Services, Inc. 302-852-8998

16. 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.

Printed/Typed Name *BM HART*

Signature *[Signature]*

Month Day Year  
09 30 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *D. Cross*

Signature *[Signature]*

Month Day Year  
09 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Markie Phibbs*

Signature *[Signature]*

Month Day Year  
09 15 06

GENERATOR

TRANSPORTER

FACILITY

0673

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-9703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 835-0070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 OT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 7275943

P-61

Net Weight 17.08

Emergency Contact: Capital Environmental Services, Inc. 302 852-8090

16. 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.

Printed/Typed Name R M Hart

Signature [Signature]

Month Day Year 09/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name [Name]

Signature [Signature]

Month Day Year 7/12/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Laura Adams

Signature [Signature]

Month Day Year 9/13/06

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

0674

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 955-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

/ DT 20 T

b.

.

c.

.

d.

.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118530 Transaction# 1225924  
15 Net Weight: 19.6  
Emergency Contact: Capital Environmental Services, Inc. 302 552-8999

16. 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.

Printed/Typed Name *RM Hart*

Signature *RM Hart*

Month Day Year 07 13 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *R Scott*

Signature *R Scott*

Month Day Year 07 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Karla Adams*

Signature *K Adams*

Month Day Year 07 13 06

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

0675

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
001 . 20 T

b.

...

c.

...

d.

...

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 115539 Transaction# 1275938  
Davis #1 Net Weight: 22.12  
Emergency Contact: Capital Environmental Services, Inc. 302 852-9950

16. 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.

Printed/Typed Name  
RM Hart

Signature  
RM Hart

Month Day Year  
09 13 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Lnette Grant

Signature  
Lnette Grant

Month Day Year  
09 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Laura Adams

Signature  
Laura Adams

Month Day Year  
09 13 06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

0676

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schork

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-442-2701

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23506

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Non RCRA, Non DOT Soil contaminated with Wood Debris	1	DT	20	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115530

Transaction#

1275946

11

Net Weight

19.37

Emergency Contact: Capital Environmental Services, Inc. 302 682-8998

16. 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.

Printed/Typed Name  
B M Hart

Signature  
[Signature]

Month Day Year  
07/30/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
M Smith

Signature  
[Signature]

Month Day Year  
07 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Laurie Adams

Signature  
[Signature]

Month Day Year  
09/06/06

GENERATOR'S COPY

GENERATOR

TRANSPORTER

FACILITY

0677

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CHRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2701

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-865-6070

11. Waste Shipping Name and Description

	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Non RCRA, Non DOT Soil contaminated with Wood Debris	1	DT	20	T
b.	..	..	..	..
c.	..	..	..	..
d.	..	..	..	..

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118839

Transaction# 1278952

18

Net Weight 21.48

Emergency Contact: Capital Environmental Services, Inc. 802-882-8300

16. 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.

Printed/Typed Name *RM HART*

Signature *[Signature]* Month Day Year *09/13/06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Noel Baker*

Signature *[Signature]* Month Day Year *09/13/06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *[Signature]*

Signature *[Signature]* Month Day Year *09/13/06*

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

**NON-HAZARDOUS WASTE MANIFEST**

0678

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
 Commander, Navy Region Mid-Atlantic (CNRMA)  
 1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
 Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
 C&H Trucking

6. US EPA ID Number  
 NOT REQUIRED

A. Transporter's Phone  
 757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
 Bethel Sanitary Landfill  
 100 North Park La.  
 Hampton, VA 23666

10. US EPA ID Number  
 NOT REQUIRED

C. Facility's Phone  
 757 865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers	13. Total Quantity	14. Unit Wt/Vol
/	20	T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118538

Transaction# 1275-957

Fisk 6

Net Weight: 19.92

Emergency Contact: Capital Environmental Services, Inc. 302 852-9800

16. 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.

Printed/Typed Name *R M HART*

Signature *R M HART*

Month Day Year  
 09/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *PAUL KELLER*

Signature *Paul Keller*

Month Day Year  
 09/15/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Orlando Blackwell*

Signature *Orlando Blackwell*

Month Day Year  
 09/11/06

TRANSPORTER #1

GENERATOR

TRANSPORTER

FACILITY

0679

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-5070

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		
a.	1	20	T
b.			
c.			
d.			

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#: 1275961

Newman

Net Weight 20.25

Emergency Contact: Capital Environmental Services, Inc. 302 652-8000

16. 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.

Printed/Typed Name *R M Hart*

Signature *R M Hart*

Month Day Year  
*09/13/06*

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Steven E. Boggs*

Signature *SE Boggs*

Month Day Year  
*9/13/06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Jack Blackwell*

Signature *Jack Blackwell*

Month Day Year  
*09/13/06*

FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.  
**0680**

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers		13. Total Quantity	14. Unit Wt/Vol
No.	Type		
a.	Non RCRA, Non DOT Soil contaminated with Wood Debris	20	T
b.			
c.			
d.			

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539 Transaction# 1275979  
Net Weight: 18.53

Riggins /  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
B M Bantz

Signature  
*[Signature]* Month Day Year  
09 13 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
K. Riggins

Signature  
*[Signature]* Month Day Year  
09 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Laura Adams

Signature  
*[Signature]* Month Day Year  
09 13 06

GENERATOR

TRANSPORTER

FACILITY

0681

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23566

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110639 Transaction# 1275981  
RDA #1 Net Weight 27.1 TONS  
Emergency Contact: Capital Environmental Services, Inc. 302-662-9999

16. 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.

Printed/Typed Name *Kim Harris*

Signature *[Signature]*

Month Day Year *09/30/06*

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *RANDALL D ROGERSON*

Signature *[Signature]*

Month Day Year *09/17/06*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *[Signature]*

Signature *[Signature]*

Month Day Year *09/12/06*

GENERATOR

TRANSPORTER

FACILITY

0682

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRM1A)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
~~Par Tracking~~ **Par yea Tracking** 6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name 8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23886 10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Non RCRA, Non DOT Soil contaminated with Wood Debris	1	DT	20	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction#  
D-62 Net Weight  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name **RM Hart**

Signature *[Signature]* Month Day Year **09/3/06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **Jewell Y Lockery**

Signature *[Signature]* Month Day Year **09/13/06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name **Karen Adams** Signature *[Signature]* Month Day Year **9/13/06**

GENERATOR

TRANSPORTER

FACILITY

OR ORIGINAL - RETURN TO GENERATOR

0683

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
00 North Park La.  
Hampton, VA 23866

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#

P-53

Net Weight

Emergency Contact: Capital Environmental Services, Inc. 302 852-8989

16. 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.

Printed/Typed Name *RM HANT*

Signature *[Signature]*

Month Day Year *09/13/06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *PuryEAR*

Signature *[Signature]*

Month Day Year *09/13/06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Adams*

Signature *[Signature]*

Month Day Year *09/13/06*

GENERATOR

TRANSPORTER

FACILITY

0684

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No. . . . .

2. Page 1 of 1

GENERATOR

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757 866-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
20  
14. Unit Wt/Vol  
T

b.

.....

c.

.....

d.

.....

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 1275696  
14 Net Weight 24.65  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8998

16. 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.

Printed/Typed Name *RM HART*

Signature *[Signature]* Month Day Year 07/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Q Cross*

Signature *[Signature]* Month Day Year 09/13/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Laura Adams*

Signature *[Signature]* Month Day Year 11/13/06

FACILITY

TRANSPORTER #2

12-BLC-M6

0685

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
00 North Park La.  
Hampton, VA 23066

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

No.

Type

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#:

15

Net Weight

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8899

16. 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.

Printed/Typed Name

AM HART

Signature

*AM Hart*

Month Day Year  
09/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

R SCOTT

Signature

*R Scott*

Month Day Year  
9/13/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

JACKIE BLACKWELL

Signature

*Jackie Blackwell*

Month Day Year  
09/13/06

GENERATOR

TRANSPORTER

FACILITY

0686

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
110 North Park La.  
Hampton, VA 23656

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers	13. Total Quantity	14. Unit
No.	Type	Wt/Vol
	DT	T
	20	

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

P-73

Net Weight

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
B. M. Hart

Signature  
B. M. Hart

Month Day Year  
01/03/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
R.C. Dahmer

Signature  
R.C. Dahmer

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Laura Adams

Signature  
Laura Adams

Month Day Year  
01/13/06

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

0687

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
~~EAH~~ Trucking *Purple trucking*

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
110 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

000/ DT 20 T

b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539 Transaction#  
**AT-19** Net Weight  
Emergency Contact: Capitol Environmental Services, Inc. 302 662-8998

16. 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.

Printed/Typed Name *B.M. Hart* Signature *B.M. Hart* Month Day Year *09/13/06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name *Derek L. Ricks* Signature *D. Ricks* Month Day Year *09/13/06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Adam Adams* Signature *Adam Adams* Month Day Year *09/13/06*

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

0688

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1310 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 2.0 T

11. Waste Shipping Name and Description	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. Non RCRA, Non DOT Soil contaminated with Wood Debris	001	DT	2.0	T
b.	.	.	.	.
c.	.	.	.	.
d.	.	.	.	.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#:

*P-JJ*

Net Weight:

Emergency Contact: Capital Environmental Services, Inc. 302 652-8888

16. 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.

Printed/Typed Name: *D. Taylor* Signature: *D. Taylor* Month: 07 Day: 13 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: *B. Holland* Signature: *B. Holland* Month: 09 Day: 13 Year: 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: Signature: Month: Day: Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: *JACK R. Blackwell* Signature: *Jack Blackwell* Month: 09 Day: 13 Year: 06

GENERATOR

TRANSPORTER

FACILITY

0689

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6702 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-5070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 110539 Transaction# 1276029  
T-10 Net Weight 16.36  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8998

Ticket # 1276029  
Gross 58140 LBS  
TARE: 25420 LBS  
NET ~~32~~ 32720 LBS

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
D. Taylor  
Month Day Year  
02/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
LK

Signature  
LK  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Mike Mitchell

Signature  
Mike Mitchell  
Month Day Year  
02/13/06

GENERATOR

TRANSPORTER

FACILITY

0090

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 2.0 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116530

Transaction# 1274030

T-11

Net Weight: 18.25

Ticket # 1276030  
GROSS: 61620 LBS  
TARE: 25120 LBS  
NET: 36500 LBS

Emergency Contact: Capital Environmental Services, Inc. 802-852-8999

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
D. Taylor

Month Day Year  
09/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
Tannese Sheppard

Signature  
T. Sheppard

Month Day Year  
9 . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year  
9 . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Mike D. Howell

Signature  
Mike D. Howell

Month Day Year  
09/13/06

GENERATOR

TRANSPORTER

FACILITY

0691

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2757

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
130 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 866-8070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

1 1 DT 70 T

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110539

Transaction#

P-61

Net Weight

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

D. Taylor

Signature

D. Taylor

Month Day Year

09 11 30 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

David Bell

Signature

David Bell

Month Day Year

09 11 30 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Janice Blackwell

Signature

Janice Blackwell

Month Day Year

09 11 30 06

GENERATOR

TRANSPORTER

FACILITY

0090

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNF:MA)**  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
**Paradise Creek**

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
**C&H Trucking**

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
**757-449-2761**

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
**757 865-8070**

11. Waste Shipping Name and Description

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Val

a. **Non RCRA, Non DOT Soil contaminated with Wood Debris**

**001 DT 20 T**

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#:

**T-11**

Net Weight:

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
**D. Taylor**

Signature  
*D. Taylor*

Month Day Year  
**09 13 06**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
**Torrence Shappard**

Signature  
*T. Shappard*

Month Day Year  
**9 13 06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year  
**9 13 06**

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 19.

Printed/Typed Name  
**T. Blackwell**

Signature  
*T. Blackwell*

Month Day Year  
**09 13 06**

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

0697

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23688

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Non RCRA, Non DOT Soil contaminated with Wood Debris	1	DT	20	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116530 Transaction# 1276024  
11 Net Weight 20.75  
Emergency Contact: Capital Environmental Services, Inc. 302 662-8999

16. 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.

Printed/Typed Name: D Taylor Signature: D Taylor Month: 09 Day: 13 Year: 05

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: W. Smith Signature: W. Smith Month: 9 Day: 13 Year: 05

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Signature: Month: Day: Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name: Clarke Thakwell Signature: Clarke Thakwell Month: 09 Day: 13 Year: 05

GENERATOR

TRANSPORTER

FACILITY

0693

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

.....  
.....  
.....  
.....  
.....  
.....

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 1276032

Net Weight 22.3

Ticket # 1276032  
GROSS: 72740 LBS  
TARE: 28480 LBS  
NET: 44260 LBS

DAVIS # /

Emergency Contact: Capital Environmental Services, Inc. 302 857-8000

16. 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.

Printed/Typed Name

Signature

Month Day Year

D. Taylor

D. Taylor

07/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

Walt Grant

Walt Grant

07/13/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

Laurel Adams

Laurel Adams

07/13/06

75,000  
65,000

TRANSPORTER #2

12-BLC-M6

GENERATOR

TRANSPORTER

FACILITY

0694

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-449-2701

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

1 0T  
20 T

b.

.....

c.

.....

d.

.....

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1276027  
18 Net Weight 20  
Emergency Contact: Capital Environmental Services, Inc 302 852-6000

16. 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.

Printed/Typed Name  
D. Taylor

Signature  
D. Taylor  
Month Day Year  
07/13/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Neil Baker

Signature  
R. Baker  
Month Day Year  
7/13/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Mike Blackwell

Signature  
Mike Blackwell  
Month Day Year  
7/13/06

GENERATOR

TRANSPORTER

FACILITY



0696

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757 836-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539 Transaction#:  
AT-15 Net Weight:  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name: D. Aylor Signature: D. P. Taylor Month: 07 Day: 13 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: LEON BRIGGS Signature: [Signature] Month: 09 Day: 30 Year: 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Signature: Month: Day: Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: Kevin Blackwell Signature: Kevin Blackwell Month: 09 Day: 30 Year: 06

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

0697

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
20

b.

14. Unit Wt/Vol  
T

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 1276035  
Net Weight: 15.58  
Newman S  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name  
D Taylor

Signature  
D Taylor

Month Day Year  
09 13 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
Steven E. Boggs

Signature  
S E Boggs

Month Day Year  
09 13 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Jackie Blackwell

Signature  
Jackie Blackwell

Month Day Year  
09 13 06

GENERATOR  
TRANSPORTER  
FACILITY

0698

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schork

5. Transporter 1 Company Name

CAH Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT

20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

299826

15. Special Handling Instructions and Additional Information

Project# 118538

Transaction# 16.67

T-10

Net Weight:

Emergency Contact: Capital Environmental Services, Inc. 302-852-8900

16. 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.

Printed/Typed Name

D. Taylor

Signature

[Signature]

Month Day Year

12 12 98

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

12 12 98

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

[Blank]

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

12 12 98

GENERATOR

TRANSPORTER

FACILITY

0699

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 446-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number  
.....

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

01570

04 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118538

18.80

Transaction#

299831

25740 Net Weight

Emergency Contact: Capital Environmental Services, Inc. 302 862-8088

16. 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.

Printed/Typed Name: D Taylor Signature: [Signature] Month: 12 Day: 17 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: [Name] Signature: [Signature] Month: 12 Day: 17 Year: 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: [Name] Signature: [Signature] Month: . Day: . Year: .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name: [Name] Signature: [Signature] Month: 12 Day: 17 Year: 06

GENERATOR

TRANSPORTER

FACILITY

0700

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

GENERATOR  
TRANSPORTER  
FACILITY

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757-885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
01570

DT  
601 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 299832  
16 Net Weight 16.55  
Emergency Contact: Capital Environmental Services, Inc 302-552-8980

16. 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.  
Printed/Typed Name RM Hart Signature [Signature] Month 12 Day 17 Year 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name Robert Scott Signature [Signature] Month 12 Day 17 Year 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name W. Adams Signature [Signature] Month 12 Day 17 Year 06

01570

901

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No.

01570

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander. New Region Mid-Atlantic (CNRMA)  
1810 Gilbert St., Norfolk, VA 23611-2737

Site:

Paradise Creek

4. Generator's Phone ( 757 ) 445-6703

Attn: Bob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757-686-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers No. Type

20.1 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 110530

67820  
26700  
15

Transaction#

299835

Net Weight

Emergency Contact: Capital Environmental Services, Inc. 302-652-8009

16. 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.

Printed/Typed Name

KIM HART

Signature

Month Day Year

11 20 2000

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

T. WATSON

Signature

Month Day Year

11 20 2000

GENERATOR

TRANSPORTER

FACILITY

0702

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (ONRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-6783

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001 DT

13. Total Quantity

7.0

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116530

16.6d

Transaction#

299840

DDBB

Net Weight:

Emergency Contact: Capital Environmental Services Inc. 302 852-8000

16. 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.

Printed/Typed Name

RM HART

Signature

[Signature]

Month Day Year

12 12 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

PATRICK S. ABAD

Signature

[Signature]

Month Day Year

12 12 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

.

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

.

GENERATOR

TRANSPORTER

FACILITY

0703

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No. . . . .

2. Page 1 of 1

↑ GENERATOR ↓

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number  
. . . . .

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
KISAC

001 DT . . . 70 T

b.

. . . . .

c.

. . . . .

d.

. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 299850  
CH 18 Net Weight 24,500  
Emergency Contact: Capital Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name **Kim HART**

Signature *[Signature]*

Month Day Year **12/20/06**

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **KW FALG**

Signature *[Signature]*

Month Day Year **12/19/06**

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year . . . . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name **Kevin A. King**

Signature *[Signature]*

Month Day Year **12/18/06**

↑ FACILITY ↓

0704

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 985-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001 DT . . 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction# 299849

P-69

Net Weight 20.17

Emergency Contact: Capital Environmental Services, Inc. 302 862-8000

16. 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.

Printed/Typed Name

AM HANE

Signature

[Signature]

Month Day Year

12 17 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year

. . .

GENERATOR

TRANSPORTER

FACILITY

01570

0705

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2757

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-442-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757-885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

100 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539  
Transaction# 299805  
14  
Net Weight 19.27  
Emergency Contact: Capitol Environmental Services, Inc. 302-652-8090

16. 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.

Printed/Typed Name  
B. M. ...

Signature  
[Signature]

Month Day Year  
. . .

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
[Signature]

Signature  
[Signature]

Month Day Year  
. . .

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year  
. . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
[Signature]

Signature  
[Signature]

Month Day Year  
11-11-06

GENERATOR

TRANSPORTER

FACILITY

0706

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

GENERATOR  
TRANSPORTER  
FACILITY

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking  
6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name  
8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23866  
10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DDT Soil contaminated with Wood Debris  
01570

001 DT .20 T

b.

.

c.

.

d.

.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 299854  
P. 76 Net Weight: 20.83  
Emergency Contact: Capital Environmental Services Inc. 302 592-8999

16. 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.

Printed/Typed Name **R M HART**

Signature *R M Hart*

Month Day Year  
1 21 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **DR - EBLOE**

Signature *DR - EBLOE*

Month Day Year  
1 21 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name **ROBERT CAMPBELL**

Signature *Robert Campbell*

Month Day Year  
1 21 06

0707

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1610 Gilbert St., Norfolk, VA 23511-2787

Site:  
Paradise Creek

4. Generator's Phone (757) 444-8709

Attn: Erik Schenk

5. Transporter 1 Company Name

CAH Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23060

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-685-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DDT Soil contaminated with Wood Debris

12. Containers  
No. Type

001 DT

13. Total Quantity

20 T

14. Unit Wt/Vol

GENERATOR

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118639

Transaction# 299855

D-73

Net Weight: 20.92 TONS

Emergency Contact: Capital Environmental Services, Inc. 302-662-8999

16. 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.

Printed/Typed Name

BSM HART

Signature

[Signature]

Month Day Year

1 2 2006

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Name]

Signature

[Signature]

Month Day Year

12 12 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

. . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

[Name]

Signature

[Signature]

Month Day Year

12 12 06

TRANSPORTER

FACILITY

0708

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

01570

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 299883  
C143 Net Weight 15.90  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name **RM HART**

Signature *[Signature]*

Month Day Year 12/12/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **BRIAN C. ELLIOTT**

Signature *[Signature]*

Month Day Year 12/12/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name **Bethel Landfill Laura Adams**

Signature *[Signature]*

Month Day Year 12/12/06

GENERATOR

TRANSPORTER

FACILITY

0709

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (ONRMA)  
1510 Gilbert St., Norfolk, VA 23511-2757

Site:

Paradise Creek

4. Generator's Phone (757) 445-8702 Attn: Bob Schrock

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-445-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-895-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
01570

12. Containers  
No. Type

204 DT

13. Total Quantity

2.0

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118039

Transaction#

299864

P58

Net Weight

15.62

Emergency Contact: Capital Environmental Services, Inc. 802 852-8990

16. 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.

Printed/Typed Name

RM HAY

Signature

[Signature]

Month Day Year

12 12 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

12 12 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

LEONEL MARTINEZ

Signature

[Signature]

Month Day Year

12 12 06

GENERATOR

TRANSPORTER

FACILITY

710

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED.

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 448-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

GAN Trucking

6. US EPA ID Number

NOT REQUIRED.

A. Transporter's Phone

757-448-3781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED.

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23060

10. US EPA ID Number

NOT REQUIRED.

C. Facility's Phone

757-885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

00.1 DT .70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 299866

AT-11

Net Weight 15.79

Emergency Contact: Capital Environmental Services, Inc. 302-852-8886

16. 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.

Printed/Typed Name

Rob Schenk

Signature

[Signature]

Month Day Year 12/1/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Name]

Signature

[Signature]

Month Day Year 12/1/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Name]

Signature

[Signature]

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

[Name]

Signature

[Signature]

Month Day Year 12/1/06

GENERATOR

TRANSPORTER

FACILITY

711

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

Capitol Environmental Services

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23066

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-0070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

GE10

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol

001 DT 70 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 118539

Transaction#

299869

AT-10

Net Weight 31120

Emergency Contact: Capitol Environmental Services, Inc. 302-852-8999

16. 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.

Printed/Typed Name

RM Hart

Signature

[Signature]

Month Day Year  
12 1 2006

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Rob Schonk

Signature

[Signature]

Month Day Year  
12 1 2006

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Keith Landrum

Signature

[Signature]

Month Day Year  
12 1 06

GENERATOR

TRANSPORTER

FACILITY

712

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED.**

Manifest Document No. . . . .

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone ( 757 ) 445-8705 Attn: Rob Schank

Site:  
Paradise Creek

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED.**

A. Transporter's Phone  
757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
. . . . .

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED.**

C. Facility's Phone  
757-958-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
61590

001 DT . 20 T

b.

. . . . .

c.

. . . . .

d.

. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transect# 299873  
Net Weight: 33240 16.62  
Emergency Contact: Capital Environmental Services, Inc. 302-552-9885

16. 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.

Printed/Typed Name *RM Hant*

Signature *[Signature]*

Month Day Year 11/12/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Caroline Shepard*

Signature *[Signature]*

Month Day Year 12/12/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Keith Mann*

Signature *[Signature]*

Month Day Year 11/12/06

GENERATOR

TRANSPORTER

FACILITY

413

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. . . . .

2. Page 1 of 1

Site: Paradise Creek

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23514-2737

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name: C&H Trucking  
6. US EPA ID Number: **NOT REQUIRED**

A. Transporter's Phone: 757-448-2781

7. Transporter 2 Company Name  
8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23668

10. US EPA ID Number: **NOT REQUIRED**

C. Facility's Phone: 757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
C&H

001 DT 20 T

b.

. . . . .

c.

. . . . .

d.

. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118539 Transaction# 299876  
P-68 Net Weight: 20.61  
Emergency Contact: Capital Environmental Services, Inc 302-852-8099

16. 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.

Printed/Typed Name: R M Hart

Signature: [Signature] Month: 12 Day: 12 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: [Signature]

Signature: [Signature] Month: Day: Year:

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name:

Signature: [Signature] Month: Day: Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name: [Signature] Signature: [Signature] Month: 12 Day: 12 Year: 06

GENERATOR

TRANSPORTER

FACILITY

714 ~~723~~  
~~844~~

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757 440 2784

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 885 8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

01970

- 001 DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116538

Transaction# 299882

36

Net Weight 18.10

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

BM HART

Signature

[Signature]

Month Day Year

12 21 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Chester D. SLADE

Signature

C.D. Slade

Month Day Year

11 21 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

C.D. Slade

Month Day Year

11 21 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Kaura Adams

Signature

[Signature]

Month Day Year

11 21 06

GENERATOR

TRANSPORTER

FACILITY

775

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&M Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23503

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 886-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
15.77

2.01 DT . . 20 T

b.

. . . . .

c.

. . . . .

d.

. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118639 Transaction# 299881  
D-59 Net Weight 16.17  
Emergency Contact: Capital Environmental Services, Inc. 302 552-8900

16. 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.

Printed/Typed Name *RM HAZO*

Signature *[Signature]*

Month Day Year 12/17/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Adam Clark*

Signature *[Signature]*

Month Day Year 12/18/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *[Name]*

Signature *[Signature]*

Month Day Year 12/18/06

GENERATOR

TRANSPORTER

FACILITY

01570

716

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)
1510 Gilbert St., Norfolk, VA 23511-2737

Site: Paradise Creek

4. Generator's Phone (757) 445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757 440 2784

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill
100 North Park La.
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 865 8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

. . . DT . . . . . T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 299911

11

Net Weight 20.07

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

BM HART

Signature

[Signature]

Month Day Year 12 12 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year 12 12 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year . . . . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

JACKIE Blackwell

Signature

Jackie Blackwell

Month Day Year 12 12 06

GENERATOR

TRANSPORTER

FACILITY

717

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone (757) 445-8703

Attr: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

DT

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

299920

15

Net Weight:

20.78

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

RM HANT

Signature

[Signature]

Month Day Year

12 12 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Rick Tropan

Signature

[Signature]

Month Day Year

12 12 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

. . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

. . .

GENERATOR

TRANSPORTER

FACILITY

718

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction#: 299912  
Net Weight: 16.73  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.  
Printed/Typed Name: R. M. HART Signature: [Signature] Month: 12 Day: 12 Year: 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: L. R. Signature: [Signature] Month: 12 Day: 12 Year: 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Signature: Month: Day: Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name: Laura Adams Signature: [Signature] Month: 12 Day: 12 Year: 06

GENERATOR  
TRANSPORTER  
FACILITY

419

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No. . . . .

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number  
. . . . .

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

. . . . .

c.

. . . . .

d.

. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction#  
DDB 6 Net Weight:  
Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name **R M HART**

Signature *[Signature]* Month Day Year 12 12 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name **PATRICK S. ABAD**

Signature *[Signature]* Month Day Year 12 12 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name **J Adams**

Signature *[Signature]* Month Day Year 12 12 06

GENERATOR

TRANSPORTER

FACILITY

720

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name **#14**  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
**01570**

0.01 DT 20 T

b.

.

c.

.

d.

.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 299903  
Net Weight: 23.87  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8989

16. 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.  
Printed/Typed Name *Rm James* Signature *[Signature]* Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Q Cross* Signature *[Signature]* Month Day Year *1-2 1-3 06*

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name *Bethel Landfill* Signature *[Signature]* Month Day Year *1 12 12 06*  
*Laura Adams*

GENERATOR

TRANSPORTER

FACILITY

721  
~~721~~

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757 449 2784

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

01570

0001

DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#:

C&H-16

Net Weight:

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

BM HART

Signature

[Signature]

Month Day Year

12/2/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Robert Scott

Signature

[Signature]

Month Day Year

12/12/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Bethel Landfill  
Kathleen Adams

Signature

[Signature]

Month Day Year

12/2/06

GENERATOR

TRANSPORTER

FACILITY

722

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757 440 2784

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 865 6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
G1570

12. Containers  
No. Type

001 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

299935

18

Net Weight:

19.37

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

BM Hart

Signature

[Signature]

Month Day Year  
12/12/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

KW Falls

Signature

[Signature]

Month Day Year  
12/12/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Raina Adams, Bethel Landfill

Printed/Typed Name

Raina Adams

Signature

[Signature]

Month Day Year  
1/2/12/06

GENERATOR  
TRANSPORTER  
FACILITY

723

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
01570

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 299940

P-76

Net Weight: 23.46

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8998

16. 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.

Printed/Typed Name  
RM HART

Signature  
[Signature]

Month Day Year  
12/2/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
BRUCE BUGA

Signature  
[Signature]

Month Day Year  
12/2/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Bethel Landfill  
Printed/Typed Name  
Laura Adams

Signature  
[Signature]

Month Day Year  
11/2/10

GENERATOR

TRANSPORTER

FACILITY

724

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757 449-2764

7. Transporter 2 Company Name

8. US EPA ID Number  
NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
01570

13. Total Quantity  
14. Unit Wt/Vol  
DT .20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction#: 299952  
P-69 Net Weight: 22.08  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.  
Printed/Typed Name: RM HART Signature: [Signature] Month Day Year: 12/12/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Monette Madison Signature: [Signature] Month Day Year: 12/12/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name: Signature: Month Day Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Bethel Landfill  
Printed/Typed Name: Laura Adams Signature: [Signature] Month Day Year: 1/21/06

GENERATOR

TRANSPORTER

FACILITY

725

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schank

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-7761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 885-8070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

01570

No. Type

001 DT

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 299949

P-73

Net Weight: 2244 tons

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

RM HART

Signature

RM HART

Month Day Year

12/2/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Greg Winch

Signature

Greg Winch

Month Day Year

12/2/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Bethel Landfill

Printed/Typed Name

Kaure Adams

Signature

Kaure Adams

Month Day Year

11/17/05

GENERATOR

TRANSPORTER

FACILITY

726

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2757

Site:

Paradise Creek

4. Generator's Phone (757) 445-8702

Atty. Rob Schenk

5. Transporter 1 Company Name

ATCO

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-445-2761

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

DT

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116639

Transaction#

299935

AT 11

Net Weight

17.17

Emergency Contact: Capital Environmental Services, Inc. 302-852-8999

16. 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.

Printed/Typed Name

RMH

Signature

[Signature]

Month Day Year

. . .

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Jon Williams

Signature

[Signature]

Month Day Year

12 . 16

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

. . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

JA [Signature]

Signature

[Signature]

Month Day Year

11 17 06

GENERATOR

TRANSPORTER

FACILITY

727

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name

~~SSH Trucking~~ *Atco*

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#:

*299957*

*AT10*

Net Weight:

*35740*

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name

*Rm HANG*

Signature

*[Signature]*

Month Day Year

*12/2/06*

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

*Robert Carpenter*

Signature

*[Signature]*

Month Day Year

*12/2/06*

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

*12/2/06*

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

*Bethel Landfill*

Printed/Typed Name

*Laura Adams*

Signature

*[Signature]*

Month Day Year

*11/2/06*

GENERATOR

TRANSPORTER

FACILITY

728

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.  
2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757 449 2781

7. Transporter 2 Company Name

8. US EPA ID Number  
NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865 6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
G1570

12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
001	DT	20	T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction#: 299961  
T-11 Net Weight: 38940  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8990

16. 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.

Printed/Typed Name  
B M Harret

Signature  
*[Signature]*

Month Day Year  
11/21/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Torrence Sheppard

Signature  
*[Signature]*

Month Day Year  
12/12/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
Bethel Landfill  
Laura Adams

Signature  
*[Signature]*

Month Day Year  
11/21/06

GENERATOR

TRANSPORTER

FACILITY

729

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23668

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

00.1 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 118538 Transaction#: 299974  
P-68 Net Weight: 20.74  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8998

16. 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.

Printed/Typed Name *RM Harris*

Signature *[Signature]* Month Day Year 12/1/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *Rob Schonk*

Signature *[Signature]* Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name *Bethel Landfill Laura Adams*

Signature *[Signature]* Month Day Year 11/21/06

GENERATOR

TRANSPORTER

FACILITY

730

# NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (767) 445-8703

Attn: Rob Sorenson

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

767-445-2784

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Ln.  
Hampton, VA 23026

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

767-845-0100

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Sol contaminated with Wood Debris  
OS-76

12. Containers  
No. Type

001 DT

13. Total Quantity

70

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 115039

Transaction#

299976

P-58

Net Weight

17-62

Emergency Contact: Capital Environmental Services, Inc. 302-852-8999

16. 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.

Printed/Typed Name

M. H. S. IT

Signature

[Signature]

Month Day Year

12 17 00

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

12 17 00

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

[Signature]

Month Day Year

12 17 00

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

12 17 00

GENERATOR

TRANSPORTER

FACILITY

731

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 865-8070

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

01570

No. Type

DT

06/1

20

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

14-53

D-59

Net Weight

29998 lb

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

RM HART

Signature

*[Signature]*

Month Day Year

12/12/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Andera Clark

Signature

*[Signature]*

Month Day Year

12/12/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

.

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Bethel Landfill  
Andera Clark Adams

Signature

*[Signature]*

Month Day Year

12/12/06

GENERATOR

TRANSPORTER

FACILITY

732

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.  
2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-440-2761

7. Transporter 2 Company Name

8. US EPA ID Number  
NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757-865-8070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction# 300013  
36 Net Weight 19.70  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
B M HART

Signature  
B M HART  
Month Day Year  
12 22 06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Chester D. SLADE

Signature  
C D Slade  
Month Day Year  
11 21 06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
C D Slade  
Month Day Year  
11 21 06

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name  
TACKIE Blackwell

Signature  
Tackie Blackwell  
Month Day Year  
11 21 06

GENERATOR

TRANSPORTER

FACILITY

733

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schank

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Non RCRA, Non DOT Soil contaminated with Wood Debris	.	DT	.	T
b.	.	.	.	.
c.	.	.	.	.
d.	.	.	.	.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

30 00 15

Net Weight:

19.26

Emergency Contact: Capitol Environmental Services, Inc. 302 852-8999

16. 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.

Printed/Typed Name **RM HART**

Signature *[Signature]*

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **BRIAN ELLIOTT**

Signature *[Signature]*

Month Day Year **12/12/06**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name **Jackie Blackwell**

Signature *[Signature]*

Month Day Year **12/12/06**

GENERATOR

TRANSPORTER

FACILITY

734

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-449-2784

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-6070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

b.

c.

d.

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

6.01

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#:

ARC 8

Net Weight:

300018  
17.93

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

RM HART

Signature

[Signature]

Month Day Year  
12/12/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

MURTEA HANCOCK

Signature

[Signature]

Month Day Year  
12/12/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Charles Blackwell

Signature

[Signature]

Month Day Year  
12/12/06

GENERATOR

TRANSPORTER

FACILITY

735

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 865-8070

11. Waste Shipping Name and Description

12. Containers No. Type  
13. Total Quantity  
14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

001 DT  
20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 300021

14

Net Weight: 25.64

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8989

16. 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.

Printed/Typed Name  
R. M. HART

Signature

Month Day Year  
1 21 2006

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
Q. Cross

Signature

Month Day Year  
1 21 2006

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

736

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6.

US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2784

7. Transporter 2 Company Name

8.

US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10.

US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

DT

20

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 300022

T-10

Net Weight 20.65

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8899

16. 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.

Printed/Typed Name

BM HAM

Signature

[Signature]

Month Day Year

12 12 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

LR

Signature

[Signature]

Month Day Year

. . .

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

. . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

JACKIE BLACKWELL

Signature

[Signature]

Month Day Year

12 12 06

GENERATOR

TRANSPORTER

FACILITY

737

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2761

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 885-8070

11. Waste Shipping Name and Description

12. Containers  
No. Type

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

13. Total Quantity  
14. Unit Wt/Vol  
DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction#: 300029  
15 Net Weight: 23.15  
Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name  
RM HANT

Signature  
Month Day Year  
12 1 2006

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name  
Rick Trotter

Signature  
Month Day Year  
12 1 2006

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name

Signature  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature  
Month Day Year

GENERATOR

TRANSPORTER

FACILITY

438

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)

1510 Gilbert St., Norfolk, VA 23511-2737

4. Generator's Phone (757) 445-8703

Attn: Rob Schenk

Site:

Paradise Creek

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757 440 2781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill

100 North Park La.

Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 285 8070

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

DT

T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

16

Transaction#

11

Net Weight:

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

RM Hart

Signature

[Signature]

Month Day Year

12/12/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Robert Scott

Signature

[Signature]

Month Day Year

12/12/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Jackie Blackwell

Signature

[Signature]

Month Day Year

12/12/06

GENERATOR

TRANSPORTER

FACILITY

739

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone ( 757 ) 445-8703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-448-2781

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-885-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

12. Containers  
No. Type

001 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

300035

11

Net Weight

21.89

Emergency Contact: Capital Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

RM HART

Signature

[Signature]

Month Day Year

12/20/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Mark

Signature

[Signature]

Month Day Year

12/12/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Julie Blackwell

Signature

[Signature]

Month Day Year

12/12/06

GENERATOR

TRANSPORTER

FACILITY

740

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
NOT REQUIRED

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
NOT REQUIRED

C. Facility's Phone  
757 885-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
01570

001 DT 20 T

No.	Type	Total Quantity	Unit Wt/Vol
a.	DT	20	T
b.			
c.			
d.			

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116538

Transaction#:

DDB6

Net Weight:

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8899

16. 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.

Printed/Typed Name

RM HART

Signature

[Signature]

Month Day Year

12/20/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

PATRICK S. ABAD

Signature

[Signature]

Month Day Year

11/27/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Bethel Landfill  
Kaurin Adams

Signature

[Signature]

Month Day Year

11/21/06

GENERATOR

TRANSPORTER

FACILITY

741

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:

Paradise Creek

4. Generator's Phone ( 757 ) 445-6703

Attn: Rob Schonk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757 440 2761

7. Transporter 2 Company Name

8. US EPA ID Number

NOT REQUIRED

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757 886 8070

11. Waste Shipping Name and Description

Non RCRA, Non DOT Soil contaminated with Wood Debris

Q1370

12. Containers  
No. Type

001 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

300042

Net Weight

24.62

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name

RM HART

Signature

[Signature]

Month Day Year

12/2/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

BRUCE BUGG

Signature

[Signature]

Month Day Year

12/26/6

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Bethel Landfill

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year

12/12/06

GENERATOR

TRANSPORTER

FACILITY

742

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-8703 Attn: Rob Schonk

5. Transporter 1 Company Name  
C&H Trucking

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-449-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 866-8070

11. Waste Shipping Name and Description

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
**31570**

1001 DT 20 T

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information  
Project# 116539 Transaction#: 300046  
Net Weight: 20-07  
Emergency Contact: Capital Environmental Services, Inc. 302 652-8099

16. 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.  
Printed/Typed Name *R M Hart* Signature *R M Hart* Month Day Year 12/12/06

17. Transporter 1 Acknowledgement of Receipt of Materials  
Printed/Typed Name *R W Falls* Signature *R W Falls* Month Day Year 12/12/06

18. Transporter 2 Acknowledgement of Receipt of Materials  
Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.  
Printed/Typed Name *Bethel Landfill* Signature *Adams* Month Day Year 12/12/06

GENERATOR

TRANSPORTER

FACILITY

743

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.

NOT REQUIRED

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone ( 757 ) 445-6703

Attn: Rob Schenk

5. Transporter 1 Company Name

C&H Trucking

6. US EPA ID Number

NOT REQUIRED

A. Transporter's Phone

757-440-2781

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number

NOT REQUIRED

C. Facility's Phone

757-865-8070

11. Waste Shipping Name and Description

a. Non RCRA, Non DOT Soil contaminated with Wood Debris

G1570

12. Containers  
No. Type

001 DT

13. Total Quantity

20

14. Unit Wt/Vol

T

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116539

Transaction#

30042

P 73

Net Weight

24.87 Tons

Emergency Contact: Capitol Environmental Services, Inc. 302-852-8999

16. 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.

Printed/Typed Name

BM Hart

Signature

[Signature]

Month Day Year

12/20/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Gary Winch

Signature

[Signature]

Month Day Year

12/1/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Bethel Landfill  
Laura Adams

Signature

[Signature]

Month Day Year

12/12/06

GENERATOR

TRANSPORTER

FACILITY

1744  
~~1744~~

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.  
**NOT REQUIRED**

Manifest Document No.

2. Page 1 of 1

3. Generator's Name and Mailing Address  
Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Site:  
Paradise Creek

4. Generator's Phone (757) 445-6703 Attn: Rob Schenk

5. Transporter 1 Company Name  
G&H Trucking ATO

6. US EPA ID Number  
**NOT REQUIRED**

A. Transporter's Phone  
757-448-2761

7. Transporter 2 Company Name

8. US EPA ID Number  
**NOT REQUIRED**

B. Transporter's Phone

9. Designated Facility Name and Site Address  
Bethel Sanitary Landfill  
100 North Park La.  
Hampton, VA 23666

10. US EPA ID Number  
**NOT REQUIRED**

C. Facility's Phone  
757 865-6070

11. Waste Shipping Name and Description

12. Containers  
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. Non RCRA, Non DOT Soil contaminated with Wood Debris  
01570

DT  
20 T

b. . . . .

c. . . . .

d. . . . .

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Project# 116538

Transaction# 300050

AT 11

Net Weight 17.76

Emergency Contact: Capitol Environmental Services, Inc. 302 652-8999

16. 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.

Printed/Typed Name **RM HART**

Signature *[Signature]*

Month Day Year  
12/2/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **SON MILLINS**

Signature *[Signature]*

Month Day Year  
12/2/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Bethel Landfill

Printed/Typed Name **Laura Adams**

Signature *[Signature]*

Month Day Year  
12/12/06

GENERATOR

TRANSPORTER

FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number NOT REQUIRED

2. Page 1 of 1

3. Emergency Response Phone 302 652-8999

4. Waste Tracking Number 745

5. Generator's Name and Mailing Address Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737 757 445-6703 Attn: Rob Schonk

Generator's Site Address (if different than mailing address) Paradise Creek

6. Transporter 1 Company Name Puryear Trucking Atco

U.S. EPA ID Number DOT# 896050

7. Transporter 2 Company Name South Norfolk Trucking, Inc.

U.S. EPA ID Number NOT REQUIRED

8. Designated Facility Name and Site Address Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666 757-865-6070

U.S. EPA ID Number NOT REQUIRED

Facility's Phone:

9a. 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.

NONE

13. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 300054

Net Weight: 35740

Job# VIENNA-MGEM

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/Offor's Printed/Typed Name R M HART

Signature [Signature]

Month Day Year 12/12/06

15. International Shipments [ ] Import to U.S. [ ] Export from U.S.

Transporter Signature (for exports only):

Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name Robert Carpenter

Signature [Signature]

Month Day Year

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:

17b. Alternate Facility (or Generator)

U.S. EPA ID Number

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

Bethel Landfill

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name Laura Adams

Signature [Signature]

Month Day Year 12/12/06

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**796**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris  
01570**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**300057**

**Net Weight:**

**23-33**

**Job#VIENNA-MGEM**

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

**R M Haas**

Signature

**[Signature]**

Month Day Year

**12 12 06**

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

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Clark Adams**

Signature

**[Signature]**

Month Day Year

**12 12 06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**747**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
**757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
**757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**  
**01570**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 300074**

**Net Weight: 39260 19-63**

**Job#VIENNA-MGEM**

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  
**RM HART**

Signature  
*[Signature]*

Month Day Year  
**12 12 06**

15. International Shipments  Import to U.S.  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  
**TORRENCE SHEPPARD**

Signature  
*[Signature]*

Month Day Year  
**12 12 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Laura Adams**

Signature  
*[Signature]*

Month Day Year  
**12 12 06**

GENERATOR

INT'L  
TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**748**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 300069**

**2-68**

**Net Weight: 22-73**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*BSM/Haro*

Signature

*[Signature]*

Month Day Year  
**12 12 06**

15. International Shipments  Import to U.S.  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

Signature

*Mark M. Williams*

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*[Signature]*

Month Day Year

**12 12 06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**749**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM  
9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))  
**1. Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

10. Containers  
No. Type

11. Total Quantity  
**20**

12. Unit Wt./Vol.  
**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**300088**

**D-58**

**Net Weight:**

**18-88**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R M HART**

Signature

*[Signature]*

Month Day Year  
**12 12 06**

15. International Shipments  Import to U.S.  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

**JOE W GRIFFIN**

Signature

*[Signature]*

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**JACKIE BLACKWELL**

Signature

*[Signature]*

Month Day Year

**12 12 06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**750**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**300095**

**P-07**

**Net Weight:**

**18-76**

**Job#VIENNA-MGEM**

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

*B.M. HART*

Signature

*B.M. HART*

Month Day Year  
**12 12 06**

15. International Shipments  Import to U.S.  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

*Andrea Clark*

Signature

*Andrea Clark*

Month Day Year  
**12 12 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Jockie Blackwell*

Signature

*Jockie Blackwell*

Month Day Year  
**12 12 06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**757**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**  
Facility's Phone:

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**14**

**Transaction#: 300132**

**Net Weight: 25.74**

**Job#VIENNA-MGEM**

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  
**Rob Schonk**

Signature  
*[Signature]*

Month Day Year  
**12 12 06**

INT'L

15. International Shipments  Import to U.S.  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  
**D. Cross**

Signature  
*[Signature]*

Month Day Year  
**12 12 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Laura Adams**

Signature  
*[Signature]*

Month Day Year  
**12 12 06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**752**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
**757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone:  
6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
**757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**16**

**Net Weight:**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**RM HANT**

Signature

**[Signature]**

Month Day Year

**12/2/06**

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

**Robert T Scott**

Signature

**[Signature]**

Month Day Year

**12/12/06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

**[Signature]**

Month Day Year

**12/12/06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**783**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

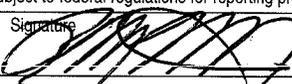
6. Transporter 1 Company Name  
**Puryear Trucking**  
U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**  
U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**  
U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 300440  
Net Weight: 19.80 Job#VIENNA-MGEM**

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 **BM AMET** Signature  Month Day Year

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **Rick Trotman** Signature  Month Day Year **12 12 06**  
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:

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name Signature Month Day Year

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**754**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**300147**

**Net Weight:**

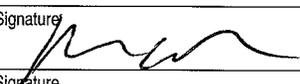
**20.82**

**Job#VIENNA-MGEM**

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.

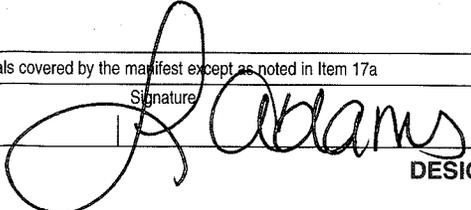
Generator's/Officer's Printed/Typed Name **RM Hayes** Signature  Month **12** Day **17** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Mark** Signature  Month **12** Day **12** Year **06**  
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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Naura Adams** Signature  Month **12** Day **12** Year **06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**757**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking** *C + H Trucking*

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**300172**

**AKK 8**

**Net Weight:**

**16-83**

**Job# VIENNA-MGEM**

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

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

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

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>756</b>
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5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737 757 445-6703 Attn: Rob Schonk</b>	Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>
--	---

6. Transporter 1 Company Name <b>Puryear Trucking</b>	U.S. EPA ID Number <b>DOT# 896050</b>
--	--

7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
--	---

8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666 757-865-6070</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
---	---

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b> <i>Q57U</i>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
	2.					
	3.					
	4.					

13. Special Handling Instructions and Additional Information <b>Project#116539      Transaction#: 300187</b> <b>DOB6      Net Weight: 17.87</b> <b>Job#VIENNA-MGEM</b>
---

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 <i>R.M. HART</i>	Signature <i>[Signature]</i>	Month <b>12</b>	Day <b>12</b>	Year <b>06</b>

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>PATRICK S. ABAD</i>	Signature <i>[Signature]</i>	Month <b>12</b>	Day <b>12</b>	Year <b>06</b>
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 hazardous materials covered by the manifest except as noted in Item 17a				
Printed/Typed Name <i>Laurie Adams</i>	Signature <i>[Signature]</i>	Month <b>12</b>	Day <b>12</b>	Year <b>06</b>

GENERATOR  
 TRANSPORTER INT'L  
 TRANSPORTER  
 DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**757**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**300166**

*P-ST*

**Net Weight:**

**23.48**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name *BM HART* Signature *[Signature]* Month Day Year

GENERATOR

15. International Shipments  Import to U.S.  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  
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:

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name *Laura Adams* Signature *[Signature]* Month Day Year *12/12/06*

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**788**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**  
**01570**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 300159**

**P-76**

**Net Weight: 20.15**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R M HART**

Signature

*[Signature]*

Month Day Year  
**12 12 06**

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

**BRUCE BUGG**

Signature

*[Signature]*

Month Day Year  
**12 12 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year  
**12 12 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**789**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**300168**

**AT-21**

**Net Weight:**

**23.34**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*B.M. HACT*

Signature

*[Signature]*

Month Day Year  
**12 12 06**

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

*Mark McLe...*

Signature

*[Signature]*

Month Day Year  
**12 12 06**

Transporter 2 Printed/Typed Name

Signature

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*[Signature]*

Month Day Year  
**12 12 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**760**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**  
**01570**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**300171**

**AT-16**

**Net Weight:**

**20.40**

**Job#VIENNA-MGEM**

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

**R.M. HART**

Signature

*[Signature]*

Month Day Year  
**12 12 06**

INT'L

15. International Shipments  Import to U.S.  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

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year  
**12 12 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**761**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539      Transaction#: 300774**  
**AT-20      Net Weight: 23.06**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name: **RM Hunt**      Signature: *[Signature]*      Month Day Year: **12/2/06**

15. International Shipments  
 Import to U.S.       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	Signature	Month	Day	Year
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: **Laura Adams**      Signature: *[Signature]*      Month Day Year: **12/12/06**

GENERATOR

INT'L  
TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**762**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**      **Transaction#: 300217**  
**P-77**      **Net Weight: 22.93 tons**      **Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name **RM HART**      Signature *[Signature]*      Month **12** Day **12** Year **06**

15. International Shipments     Import to U.S.     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 **Puryear Tkg Inc**      Signature **Harold L Shepherd**      Month **12** Day **12** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_      Signature \_\_\_\_\_      Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space     Quantity     Type     Residue     Partial Rejection     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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Cackie Blackwell**      Signature *[Signature]*      Month **12** Day **12** Year **06**

GENERATOR

INT'L  
TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**763**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**300178**

**36**

**Net Weight:**

**19.95**

**Job# VIENNA-MGEM**

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

**BMIHANT**

Signature

*[Signature]*

Month Day Year  
**12/12/06**

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

**Chester D SLADE**

Signature

*[Signature]*

Month Day Year  
**12/12/06**

Transporter 2 Printed/Typed Name

**Chester D SLADE**

Signature

*[Signature]*

Month Day Year  
**12/12/06**

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year

**12/12/06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8899**

4. Waste Tracking Number  
**764**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:** **300180**

**3**

**Net Weight:** **18.76**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R M HART**

Signature

*[Signature]*

Month Day Year  
**12 12 06**

INT'L

15. International Shipments

Import to U.S.

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

**BRIAN ELLIOTT**

Signature

*[Signature]*

Month Day Year  
**12 12 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year  
**12 12 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**765**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539 Transaction#: 300181**  
**AT-11 Net Weight: 12.67**  
**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name: **RMHart** Signature: *[Signature]* Month: Day: Year:

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter Signature (for exports only):  
Transporter 1 Printed/Typed Name: **Sad Mullins** Signature: *[Signature]* Month: **08** Day: **12** Year: **06**  
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: 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 hazardous materials covered by the manifest, except as noted in Item 17a  
Printed/Typed Name: **Laura Adams** Signature: *[Signature]* Month: **12** Day: **12** Year: **00**

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**766**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**  
Facility's Phone:

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM

9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))  
**1. Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

10. Containers  
No. Type

11. Total Quantity

12. Unit Wt./Vol.

**NONE**

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 300192**  
**P-73 Net Weight: 2124 Tons**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **B.M. Hart** Signature *[Signature]* Month **12** Day **12** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **Larry Winch** Signature *[Signature]* Month **12** Day **12** Year **06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **12** Year **06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**767**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 300190**

**18**

**Net Weight: 20,74**

**Job# VIENNA-MGEM**

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

*B.M. Hart*

Signature

*B.M. Hart*

Month Day Year  
**12 12 06**

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

*K.W. Falls*

Signature

*K.W. Falls*

Month Day Year  
**12 12 06**

Transporter 2 Printed/Typed Name

Signature

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*Laura Adams*

Month Day Year  
**12 12 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of 1  
3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**768**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 300703**

**R-T-10**

**Net Weight: 18.42**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

Signature

Month Day Year

*R.M. Hart*

*[Signature]*

12 17 04

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

Port of entry/exit:

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

*L.R.*

*L.R.*

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

*Laura Adams*

*Laura Adams*

12 12 04

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**769**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 300194**

**P-69**

**Net Weight: 23.24**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*B.M. Hart*

Signature

*[Signature]*

Month Day Year  
**12 12 06**

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

*Monette Madison*

Signature

*[Signature]*

Month Day Year  
**12 12 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*[Signature]*

Month Day Year  
**12 12 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**770**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No.

Type

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**300200**

**P-68**

**Net Weight:**

**20.75**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**B.M. HART**

Signature

*[Signature]*

Month Day Year  
**12 12 06**

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

*[Signature]*

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

**Laura Adams**

*[Signature]*

Month Day Year  
**12 12 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**771**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 300205  
P-59 Net Weight: 17.25 Job#VIENNA-MGEM**

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/Offoror's Printed/Typed Name **Rob Schonk** Signature *[Signature]* Month Day Year

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Andrea Clark** Signature *[Signature]* Month Day Year **12 12 06**  
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:

17b. Alternate Facility (or Generator) U.S. EPA ID Number  
Facility's Phone:  
17c. Signature of Alternate Facility (or Generator) Month Day Year

19. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature *[Signature]* Month Day Year **12 12 06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**772**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#: 300204**  
**T-11**      **Net Weight: 35140**      **1757**  
**Job#VIENNA-MGEM**

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 **RM HART** Signature *[Signature]* Month **12** Day **12** Year **06**

GENERATOR

INT'L

15. International Shipments  Import to U.S.  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 **TORRENCE SHEPPARD** Signature *[Signature]* Month **12** Day **12** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

DESIGNATED FACILITY

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **12** Year **06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NO REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**773**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
**757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking** *Atco*

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
**757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 300208**

*Atco*

**Net Weight: 33980**

**Job#VIENNA-MGEM**

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

*B M Hayes*

Signature

*[Signature]*

Month Day Year  
**12 12 02**

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

*Robert Carpenter*

Signature

*[Signature]*

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*[Signature]*

Month Day Year  
**12 12 02**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**779**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 300214**

**14**

**Net Weight: 22.48**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

*B.M. Hunt*

Signature

*[Signature]*

Month Day Year

**12 12 06**

15. International Shipments  Import to U.S.  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

*D. Cross*

Signature

*[Signature]*

Month Day Year

**12 12 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*[Signature]*

Month Day Year

**12 12 06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**775**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
	2.					
	3.					
	4.					

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 300220**

**D-58**

**Net Weight: 16.70**

**Job#VIENNA-MGEM**

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 **Rm Hart** Signature **[Signature]** Month **12** Day **12** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **JOE W GRIFFIN** Signature **[Signature]** Month Day Year  
Transporter 2 Printed/Typed Name Signature Month Day Year

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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

19. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Hallie Adams** Signature **[Signature]** Month **12** Day **12** Year **06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of 1  
3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**776**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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. Special Handling Instructions and Additional Information

1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539**  
**Transaction#: 300209**  
**Net Weight: 19.58**  
**Job#VIENNA-MGEM**

**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: **BM Hart** Signature: *[Signature]* Month: **12** Day: **12** Year: **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name: **Rich Troutman** Signature: *[Signature]* Month: **12** Day: **12** Year: **06**  
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:

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: **Leura Adams** Signature: *[Signature]* Month: **12** Day: **12** Year: **06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**312 652-8999**

4. Waste Tracking Number  
**777**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Purecar Trucking**

U.S. EPA ID Number  
**DOT2 006050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bothel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-885-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539      Transaction#: 300222  
16      Net Weight: 20.83      JOB# VIENNA-NGEM**

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: **BM Hart**      Signature: *[Signature]*      Month: **11**      Day: **12**      Year: **16**

15. International Shipments       Import to U.S.       Export from U.S.      Port of entry/exit:      Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: **Robert Scott**      Signature: *[Signature]*      Month: **12**      Day: **13**      Year: **16**

Transporter 2 Printed/Typed Name:      Signature:      Month:      Day:      Year:

17. Discrepancy

17a. Discrepancy Indication Space       Quantity       Type       Residue       Partial Rejection       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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: *[Signature]*      Signature: *[Signature]*      Month: **11**      Day: **16**      Year: **16**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**778**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#:** 300227  
**Net Weight:** 19.84      **Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name: *BM Grant*      Signature: *[Signature]*      Month: 12 Day: 12 Year: 06

15. International Shipments  Import to U.S.  Export from U.S.      Port of entry/exit:      Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name: *Mark*      Signature: *[Signature]*      Month: 12 Day: 12 Year: 06  
Transporter 2 Printed/Typed Name:      Signature:      Month:      Day:      Year:

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

17b. Alternate Facility (or Generator)      Manifest Reference Number:      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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: *Laura Adams*      Signature: *[Signature]*      Month: 12 Day: 12 Year: 06

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**779**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
**757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone:

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
**757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 300231**

**DD B 6**

**Net Weight: 16207**

**Job#VIENNA-MGEM**

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/Offeror's Printed/Typed Name

*B.M. Hart*

Signature

*B.M. Hart*

Month Day Year

**12 12 06**

15. International Shipments

Import to U.S.

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

**PATRICK S. ABER**

Signature

*Patrick S. Aber*

Month Day Year

**12 12 06**

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

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Caura Adams*

Signature

*Caura Adams*

Month Day Year

**12 12 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**780**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris  
01570**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**300233**

**P-76**

**Net Weight:**

**20.85**

**Job#VIENNA-MGEM**

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

**R. M. HART**

Signature

*[Signature]*

Month Day Year  
**12 12 06**

15. International Shipments  Import to U.S.  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

Signature

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

**Laura Adams**

*[Signature]*  
**Adams**

**12 12 06**

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number NOT REQUIRED 2. Page 1 of 1 3. Emergency Response Phone 302 652-8999 4. Waste Tracking Number 781

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
 Facility's Phone: **757-865-6070** U.S. EPA ID Number: **NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 300240**  
**AT-21 Net Weight: 22,93**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name: *[Signature]* Signature: *[Signature]* Month: 12 Day: 12 Year: 06

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: **MARK McLENDON** Signature: *[Signature]* Month: 12 Day: 12 Year: 06  
 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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: **Laura Adams** Signature: *[Signature]* Month: 12 Day: 12 Year: 06

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE-MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**782**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b> <i>01570</i>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
	2.					
	3.					
	4.					

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:** *300241*

*D-55*

**Net Weight:** *19.90 tons* **Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name *RMHART* Signature *[Signature]* Month *12* Day *12* Year *06*

15. International Shipments  Import to U.S.  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  
Transporter 2 Printed/Typed Name Signature Month Day Year

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name *Laura Adams* Signature *[Signature]* Adams Month *12* Day *12* Year *06*

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>783</b>
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5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b> Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>	Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>
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6. Transporter 1 Company Name <del>Express Trucking</del> <b>CH</b>	U.S. EPA ID Number <b>DOT# 896050</b>
--	--

7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
--	---

8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666 757-865-6070</b> Facility's Phone:	U.S. EPA ID Number <b>NOT REQUIRED</b>
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9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
	2.					
	3.					
	4.					

13. Special Handling Instructions and Additional Information <b>Project#116539 ANK 8</b> <b>Transaction#: 300245</b> <b>Net Weight: 15-17</b> <b>Job#VIENNA-MGEM</b>
--

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 <b>BMHart</b>	Signature <i>[Signature]</i>	Month <b>12</b>	Day <b>12</b>	Year <b>06</b>
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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 <b>MURTELA HAHOW</b>	Signature <i>[Signature]</i>	Month <b>12</b>	Day <b>12</b>	Year <b>06</b>
	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:
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17b. Alternate Facility (or Generator)	U.S. EPA ID Number
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Facility's Phone:	17c. Signature of Alternate Facility (or Generator)	Month	Day	Year
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Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a	Printed/Typed Name <b>Alta Adams</b>	Signature <i>[Signature]</i>	Month <b>12</b>	Day <b>12</b>	Year <b>06</b>
--	---	---------------------------------	--------------------	------------------	-------------------

784  
~~811~~ BNM  
~~811~~ 3

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of: **1**  
 3. Emergency Response Phone: **302 652-8999**  
 4. Waste Tracking Number: ~~811~~ **3**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
 Facility's Phone: **757-865-6070** U.S. EPA ID Number: **NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information:  
**Project#116539**      **Transaction#: 300269**  
**AT-16**      **Net Weight: 20.29**  
**Job#VIENNA-MGEM**

**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/Offor's Printed/Typed Name: **BM Hart** Signature: *[Signature]* Month: **12** Day: **12** Year: **06**

GENERATOR

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: **Anthony Turner** Signature: *[Signature]* Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_  
 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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: **Laura Adams** Signature: *[Signature]* Month: **12** Day: **12** Year: **06**

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**784**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

9a. 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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**  
*01570*

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:** *300309*

**Net Weight:** *20.40*

**Job#VIENNA-MGEM**

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  
*R M Hart*

Signature  
*[Signature]*

Month Day Year

INT'L

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
*[Signature]*

Signature  
*[Signature]*

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
*Hauzer Adams*

Signature  
*[Signature]*

Month Day Year  
*12 13 06*

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number NOT REQUIRED 2. Page 1 of 1 3. Emergency Response Phone 302 652-8999 4. Waste Tracking Number 785

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
 Facility's Phone: **757-865-6070** U.S. EPA ID Number: **NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b> 01570		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539** **Transaction#: 300305**  
**P-78** **Net Weight: 24.69**  
**Job# VIENNA-MGEM**

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: **RM HART** Signature: *[Signature]* Month Day Year: **12/13/06**

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: **JOHN CARTOS** Signature: *[Signature]* Month Day Year: **12/13/06**  
 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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: **Kaura Adams** Signature: *[Signature]* Month Day Year: **12/13/06**

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

786

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number **NOT REQUIRED** 2. Page 1 of **1** 3. Emergency Response Phone **302 652-8999** 4. Waste Tracking Number **786**

5. Generator's Name and Mailing Address **Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**  
 Generator's Site Address (if different than mailing address) **Paradise Creek**

6. Transporter 1 Company Name **Puryear Trucking** U.S. EPA ID Number **DOT# 896050**

7. Transporter 2 Company Name **South Norfolk Trucking, Inc.** U.S. EPA ID Number **NOT REQUIRED**

8. Designated Facility Name and Site Address **Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23668**  
 Facility's Phone: **757-865-6070** U.S. EPA ID Number **NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b> 01570		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539** **Transaction#: 300300**  
**3** **Net Weight: 17.82** **Job#VIENNA-MGEM**

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 **B M Hantz** Signature **[Signature]** Month Day Year

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter Signature (for exports only):  
 Transporter 1 Printed/Typed Name **DRIAN ELLIOTT** Signature **[Signature]** Month Day Year **12 13 06**  
 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) 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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name **Laura Adams** Signature **[Signature]** Month Day Year **12 12 06**

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**  
3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**787**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**  
U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**  
U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
U.S. EPA ID Number  
**NOT REQUIRED**  
Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539 Transaction#: 300299**  
**P-76 Net Weight: 23.79**  
**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name **B. M. Hart** Signature *[Signature]* Month **12** Day **13** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **BRUCE BUGG** Signature *[Signature]* Month **12** Day **13** Year **06**  
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:

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **JACKIE Blackwell** Signature *[Signature]* Month **12** Day **13** Year **06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**788**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**  
**15**

**Transaction#: 300294**  
**Net Weight: 20.91**

**Job# VIENNA-MGEM**

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

*RM Hunt*

Signature

*RM Hunt*

Month Day Year

**12 13 06**

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

*Rick Trotman*

Signature

*Rick Trotman*

Month Day Year

**12 13 06**

Transporter 2 Printed/Typed Name

Signature

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Opkie Blackwell*

Signature

*Opkie Blackwell*

Month Day Year

**12 13 06**

NON-HAZARDOUS WASTE MANIFEST	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>789</b>
------------------------------	---	--------------------------	--	--

5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b> Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>	Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>
---	---

6. Transporter 1 Company Name <b>Puryear Trucking</b>	U.S. EPA ID Number <b>DOT# 896050</b>
--	--

7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
--	---

8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666 757-865-6070</b> Facility's Phone:	U.S. EPA ID Number <b>NOT REQUIRED</b>
--	---

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information <b>Project#116539</b> <b>Transaction#:</b> <b>300293</b> <b>Net Weight:</b> <b>19.84</b> <b>Job#VIENNA-MGEM</b>
--

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 <b>B.M. Hunt</b>	Signature <i>B.M. Hunt</i>	Month <b>12</b>	Day <b>21</b>	Year <b>06</b>

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 <b>M. Cord</b>	Signature <i>M. Cord</i>	Month <b>12</b>	Day <b>13</b>	Year <b>06</b>
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 hazardous materials covered by the manifest except as noted in Item 17a				
Printed/Typed Name <b>Jackie Blackwell</b>	Signature <i>Jackie Blackwell</i>	Month <b>12</b>	Day <b>13</b>	Year <b>06</b>

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**790**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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. Special Handling Instructions and Additional Information

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris  
01570**

**DT**

**20**

**T**

**NONE**

2.				
3.				
4.				

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 300310  
DD B 6 Net Weight: 17.50 Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **RM HART** Signature **[Signature]** Month Day Year **12 13 06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Malvin L. Glover SR.** Signature **[Signature]** Month Day Year **12 13 06**  
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: 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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Laura Adams** Signature **[Signature]** Month Day Year **12 13 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**791**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**  
Facility's Phone:

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b> <i>01570</i>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
	2.					
	3.					
	4.					

13. Special Handling Instructions and Additional Information  
**Project# 116539**      **Transaction#: 300319**  
*P-58*      **Net Weight: 18.56**  
**Job# VIENNA-MGEM**

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 *BMHANT*      Signature *[Signature]*      Month Day Year **12 13 06**

15. International Shipments       Import to U.S.       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 **JOE W GRIFFIN**      Signature *[Signature]*      Month Day Year **12 13 06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed Name **Laura Adams**      Signature *[Signature]*      Month Day Year **12 13 06**

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number NOT REQUIRED 2. Page 1 of 1 3. Emergency Response Phone 302 652-8999 4. Waste Tracking Number 792

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
 757 445-6703 Attn: Rob Schonk  
 Generator's Site Address (if different than mailing address): **Paradise Creek**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
 757-865-6070  
 Facility's Phone: U.S. EPA ID Number: **NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b> OISE		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539** **Transaction#: 300320**  
**P-68** **Net Weight: 23.15** **Job# VIENNA-MGEM**

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: **R.M. Hart** Signature: *[Signature]* Month: Day: Year:

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: **Mark W. Shell** Signature: Month: Day: Year:  
 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) 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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: **Laura Adams** Signature: *[Signature]* Month: Day: Year: **12/13/06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**793**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**  
**01570**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 300321**

**T-11**

**Net Weight: 39680**

**Job# VIENNA-MGEM**

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/Offeror's Printed/Typed Name

*R M Hart*

Signature

*[Signature]*

Month Day Year

**12 13 06**

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

*T. Sheppard*

Signature

*T. Sheppard*

Month Day Year

**12 13 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Kaura Adams*

Signature

*[Signature]*

Month Day Year

**12 13 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1794**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone:

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 300287**

**16**

**Net Weight: 18.26**

**Job#VIENNA-MGEM**

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

*RM Hart*

Signature

*[Signature]*

Month Day Year

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

*R. Scott*

Signature

*[Signature]*

Month Day Year

**12 13 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Jackie Blackwell*

Signature

*[Signature]*

Month Day Year

**12 13 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 852-0909**

4. Waste Tracking Number  
**795**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CMRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOTS 890050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116530 LLDAVIS Transactions#: 300322**  
**Net Weight: 24.20**  
**JOB/VIENNA-MGEM**

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/Offor's Printed/Typed Name **RM Hart** Signature **[Signature]** Month **12** Day **13** Year **00**

15. International Shipments  Import to U.S.  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]** Signature **[Signature]** Month **12** Day **13** Year **00**  
Transporter 2 Printed/Typed Name **[Signature]** Signature **[Signature]** Month **12** Day **13** Year **00**

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1796**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**~~Puryear Trucking~~ C3H**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**~~South Norfolk Trucking, Inc.~~**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address

U.S. EPA ID Number  
**NOT REQUIRED**

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

Facility's Phone:

9a. HM  
9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))  
**1. Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

10. Containers  
No. Type

11. Total Quantity

12. Unit Wt./Vol.

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 300289**

**Net Weight: 23.25**

**Job# VIENNA-MGEM**

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

**BM Hart**

Signature

*[Signature]*

Month Day Year

**12 13 06**

INT'L

15. International Shipments

Import to U.S.

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

**D. Cross**

Signature

*[Signature]*

Month Day Year

**12 13 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Jackie Blackwell**

Signature

*[Signature]*

Month Day Year

**12 13 06**

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>797</b>
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737 757 445-6703 Attn: Rob Schonk</b>		Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>		
6. Transporter 1 Company Name <b>Puryear Trucking</b>		U.S. EPA ID Number <b>DOT# 896050</b>		
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>		
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666 757-865-6070</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>		
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
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris 01570</b>		<b>DT</b>	<b>20</b>
	2.			
	3.			
	4.			
12. Unit Wt./Vol. <b>T</b>				
13. Special Handling Instructions and Additional Information <b>Project# 116539      Transaction#: 300323      70820      29860      20.48 TONS</b> <b>DAVIS #1      Net Weight:      Job# VIENNA-MGEM</b>				
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 <b>RM HANT</b>		Signature <i>[Signature]</i>		Month Day Year <b>12 13 06</b>
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 <b>DENISE ADAMS</b>		Signature <i>[Signature]</i>		Month Day Year <b>12 13 06</b>
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 _____				
17c. Signature of Alternate Facility (or Generator)      Month Day Year				
18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a				
Printed/Typed Name <b>Kaura Adams</b>		Signature <i>[Signature]</i>		Month Day Year <b>12 13 06</b>

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1798**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b> <i>01570</i>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**  
*P-79*

**Transaction#: 300330**  
**Net Weight: 23.69**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name *RM Hunt* Signature *[Signature]* Month *12* Day *13* Year *06*

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name *Robert Carpenter* Signature *[Signature]* Month *12* Day *13* Year *06*  
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) 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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name *Laura Adams* Signature *[Signature]* Month *12* Day *13* Year *06*

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 852-8900**

4. Waste Tracking Number  
**799**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Furyear Trucking**

U.S. EPA ID Number  
**DOT# 608050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**  
Facility's Phone:

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1.	Non RCRA, Non DOT Regulated Soil contaminated with wood debris <i>01570</i>		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 118530 Transaction#: 300331  
P-64 Net Weight: 39340 / 19.67 Job# VIENNA-WGEM**

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/Offor's Printed/Typed Name **RM Hart** Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year **12/13/06**

GENERATOR

TRANSPORTER

DESIGNATED FACILITY

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Maey Kelley** Signature **M. Kelley** Month **12** Day **13** Year **06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **William Adams** Signature **W. Adams** Month **11** Day **13** Year **06**

GENERATOR  
 INT'L  
 TRANSPORTER  
 DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>800</b>
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5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>	Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>	

6. Transporter 1 Company Name <b>Puryear Trucking</b>	U.S. EPA ID Number <b>DOT# 896050</b>
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666 757-865-6070</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b> <i>61570</i>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**      **Transaction#: 300335**

*AT-11*      **Net Weight: 15.61**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name <i>RM Hart</i>	Signature <i>[Signature]</i>	Month Day Year <b>12 13 06</b>
--	---------------------------------	-----------------------------------

15. International Shipments     Import to U.S.     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 <i>Son A Mullins</i>	Signature <i>[Signature]</i>	Month Day Year <b>12 13 06</b>
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a		
Printed/Typed Name <i>Laura Adams</i>	Signature <i>[Signature]</i>	Month Day Year <b>12 13 06</b>

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**801**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Parsons Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23668  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 300340**

**ANIC8**

**Net Weight: 17.65**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

Signature

Month Day Year

*R.M. Hart*

*[Signature]*

12 13 06

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

**MURTELA HAHOU**

*[Signature]*

12 13 06

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

**JACKIE Blackwell**

*[Signature]*

12 13 06

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>802</b>		
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>		Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>				
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>						
6. Transporter 1 Company Name <b>Puryear Trucking</b>			U.S. EPA ID Number <b>DOT# 896050</b>			
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>			
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666 757-865-6070</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>			
Facility's Phone:						
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers	11. Total Quantity	12. Unit Wt./Vol.	
			No. Type			
		<b>1. Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b> <i>01570</i>		<b>DT</b>	<b>20</b>	<b>T</b>
		<b>2.</b>				
		<b>3.</b>				
	<b>4.</b>					
13. Special Handling Instructions and Additional Information  <b>Project# 116539      Transaction#: 300939</b> <b>36      Net Weight: 20.31      Job# VIENNA-MGEM</b>						
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 <i>R.M. HART</i>		Signature <i>[Signature]</i>		Month Day Year <b>12 13 06</b>		
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>Chester D. SLADE</i>		Signature <i>C.D. Slade</i>		Month Day Year <b>12 13 06</b>		
Transporter 2 Printed/Typed Name		Signature <i>C.D. Slade</i>		Month Day Year <b>12 13 06</b>		
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 _____						
17c. Signature of Alternate Facility (or Generator) _____ Month Day Year _____						
18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a						
Printed/Typed Name <i>Laura Adams</i>		Signature <i>[Signature]</i>		Month Day Year <b>12 13 06</b>		

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of 1  
3. Emergency Response Phone  
**302 652-3990**

4. Waste Tracking Number  
**803**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CHRMA)  
1510 Gilbert St, Norfolk, VA 23511-2737  
757 445-8703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 098050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23668  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**  
*01570*

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project# 110530**

**Transaction#: 300346**

**P-63**

**Net Weight: 39160**

**Job# VIENNA-MGEM**

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  
**R M HART**

Signature  
*[Signature]*

Month Day Year  
**12 13 06**

15. International Shipments  Import to U.S.  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  
**MARLON MOTTED**

Signature  
*[Signature]*

Month Day Year  
**12 18 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Lauren Adams**

Signature  
*[Signature]*

Month Day Year  
**12 13 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**804**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b> <i>61570</i>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#:** *300342*  
*Macon*      **Net Weight:** *19.75*      **Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name *B.M. Hart*      Signature *[Signature]*      Month *12* Day *13* Year *06*

15. International Shipments     Import to U.S.     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 *Nykie*      Signature *[Signature]*      Month *12* Day *13* Year *06*  
Transporter 2 Printed/Typed Name \_\_\_\_\_      Signature \_\_\_\_\_      Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space     Quantity     Type     Residue     Partial Rejection     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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name *Laura Adams*      Signature *[Signature]*      Month *12* Day *13* Year *06*

GENERATOR

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-9300**

4. Waste Tracking Number  
**805**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mkt-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-5703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Evans Trucking**

U.S. EPA ID Number  
**DOT# 068050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23668  
757-665-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	
1.	Non RCRA, Non DOT Regulated Soil contaminated with wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# **116538**

Transaction#: **300388**

**P D 6**

Net Weight: **20.77**

Job# **VIENNA-MGEM**

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  
**R M HART**

Signature  
*[Signature]*

Month Day Year  
**12 13 06**

INT'L

15. International Shipments  Import to U.S.  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

Transporter 2 Printed/Typed Name Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Spencer Blackwell**

Signature  
*[Signature]*

Month Day Year  
**12 13 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste (Packing) Number  
**806**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**  
**01570**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**300348**

**D-59**

**Net Weight:**

**19.36**

**Job#VIENNA-MGEM**

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

**RM HART**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

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

**Andrea Clark**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number NOT REQUIRED 2. Page 1 of 1 3. Emergency Response Phone 302 652-8999 4. Waste Tracking Number 807

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
**757 445-6703 Attn: Rob Schonk**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 898050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
**757-865-6070** U.S. EPA ID Number: **NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539 Transaction#: 300351**  
**T-10 Net Weight: 19.08 Job# VIENNA-MGEM**

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: **R.M. HART** Signature: *[Signature]* Month: **12** Day: **13** Year: **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: **L. K.** Signature: *[Signature]* Month: Day: Year:  
 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:

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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: **Cookie Blackwell** Signature: *[Signature]* Month: **12** Day: **13** Year: **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**606**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**16**

**Net Weight:**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

Signature

Month Day Year

15. International Shipments  Import to U.S.  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

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

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest, except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**809**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
~~Puryear Trucking~~ **C3H**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**14**

**Net Weight:**

**Job#VIENNA-MGEM**

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/Offeror's Printed/Typed Name

**RM HART**

Signature

*[Signature]*

Month Day Year

**12 13 06**

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

**G. Cross**

Signature

*[Signature]*

Month Day Year

**12 13 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Jackie Blackwell**

Signature

*[Signature]*

Month Day Year

**12 13 06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8989**

4. Waste Tracking Number  
**810**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**  
*01570*

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**300363**

**Net Weight:**

**22.43**

**Job# VIENNA-MGEM**

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/Ofier's Printed/Typed Name

Signature

Month Day Year

*AM Hart*

*[Signature]*

**12 13 06**

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

*Rich Trotman*

*[Signature]*

**12 13 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

*Carne Adams*

*[Signature]*

**12 13 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**812**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone:

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**300366**

**//**

**Net Weight:**

**25.04**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R M Hart**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

15. International Shipments  Import to U.S.  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

*[Signature]*

Signature

*[Signature]*

Month Day Year  
**12 13 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Opelie Blackwell**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**813**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**  
**01570**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**300368**

**1D-76**

**Net Weight:**

**26.13**

**Job#VIENNA-MGEM**

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/Offeror's Printed/Typed Name

**R M Hart**

Signature

**[Signature]**

Month Day Year

**12 13 06**

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

**BRUCE BUCK**

Signature

**[Signature]**

Month Day Year

**12 13 06**

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

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest, except as noted in Item 17a

Printed/Typed Name

**Debra Adams**

Signature

**[Signature]**

Month Day Year

**12 13 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**814**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone:

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.

1.

**Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**300369**

**3**

**Net Weight:**

**19.91**

**Job#VIENNA-MGEM**

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

**RM HART**

Signature

*[Signature]*

Month Day Year

**12/3/06**

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

**BRIAN ELLIOTT**

Signature

*[Signature]*

Month Day Year

**12/13/06**

Transporter 2 Printed/Typed Name

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Jackie Blackwell**

Signature

*[Signature]*

Month Day Year

**12/13/06**

GENERATOR	NON-HAZARDOUS WASTE MANIFEST	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>815</b>	
	5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>			Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>		
	Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>					
	6. Transporter 1 Company Name <b>Puryear Trucking</b>			U.S. EPA ID Number <b>DOT# 896050</b>		
	7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>		
TRANSPORTER INT'L	8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666 757-865-6070</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>		
	Facility's Phone:					
	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
		1. <b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>			<b>DT</b>	<b>20</b>
		2.				
TRANSPORTER	13. Special Handling Instructions and Additional Information <b>Project# 116539</b> <b>P-78</b>			<b>Transaction#:</b> <b>360389</b>		
				<b>Net Weight:</b> <b>25-33</b>		
				<b>Job# VIENNA-MGEM</b>		
	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/Offor's Printed/Typed Name <b>RM HANT</b>			Signature <i>[Signature]</i>		Month Day Year <b>12 13 06</b>
DESIGNATED FACILITY	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 <b>JOHN CARLOS</b>			Signature <i>[Signature]</i>		Month Day Year <b>12 13 06</b>
	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 hazardous materials covered by the manifest except as noted in Item 17a						
Printed/Typed Name <b>Laura Adams</b>			Signature <i>[Signature]</i>		Month Day Year <b>12 13 06</b>	

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**816**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-8703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b> <i>01570</i>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
	2.					
	3.					
	4.					

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 300386**

**Net Weight: 21.91**

**Job# VIENNA-MGEM**

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/Offoror's Printed/Typed Name **Rm Hart** Signature *[Signature]* Month **12** Day **13** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **DW Falls** Signature *[Signature]* Month **12** Day **13** Year **06**  
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) \_\_\_\_\_ 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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Hannah Adams** Signature *[Signature]* Month **12** Day **13** Year **06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**817**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1.  
**Non RCRA, Non DOT Regulated Soil contaminated with wood debris  
0157L**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 300389**

**DDB 6**

**Net Weight: 17.44**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

*Rm Hany*

Signature

*[Signature]*

Month Day Year

**12 13 06**

15. International Shipments  Import to U.S.  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

*Melvin L. Sporer SR*

Signature

*[Signature]*

Month Day Year

**12 13 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Kouza Adams*

Signature

*[Signature]*

Month Day Year

**12 13 06**

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**818**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone:

9a. 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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**  
*0157C*

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

*P-58*

**Transaction#:**

*300328*

**Net Weight:**

*21.04*

**Job# VIENNA-MGEM**

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

*R M Hart*

Signature

*[Signature]*

Month Day Year  
*12 13 06*

INT'L

15. International Shipments

Import to U.S.

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

*JOE W GRIFFIN*

Signature

*[Signature]*

Month Day Year  
*12 13 06*

Transporter 2 Printed/Typed Name

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Chuck Adams*

Signature

*[Signature]*

Month Day Year  
*12 13 06*

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**819**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM  
9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))  
1. **01570  
Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

10. Containers  
No. Type

11. Total Quantity

12. Unit Wt./Vol.

**NONE**

2.   
3.   
4.

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 306401**

**P-68**

**Net Weight: 24.23**

**Job# VIENNA-MGEM**

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 **RM HANG** Signature **[Signature]** Month **12** Day **13** Year **06**

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 **Mark Mitchell** Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Laura Adams** Signature **[Signature]** Month **12** Day **13** Year **06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**820**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 300418**

**T-110**

**Net Weight: 39640 19.83**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **R M Hart** Signature **[Signature]** Month **12** Day **13** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **T. Sheppard** Signature **[Signature]** Month **12** Day **13** Year **06**  
Transporter 2 Printed/Typed Name Signature Month Day Year

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

17b. Alternate Facility (or Generator) Manifest Reference Number: 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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature **[Signature]** Month **12** Day **13** Year **06**



**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

1

3. Emergency Response Phone

302 852-8900

4. Waste Tracking Number

822

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMIA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone:

**757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23060**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone:

**757-885-6070**

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.

1.

**Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#110830**

**Transactions#:**

**300 404**

**Net Weight:**

**27.62**

**Job#VIENNA-MGEM**

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

**BM Hart**

Signature

*[Signature]*

Month Day Year

**11/13/06**

INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DISCREPANCY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**  
3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**823**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM  
9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))  
**1. 61570  
Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

10. Containers  
No. Type

11. Total Quantity

12. Unit Wt./Vol.

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 300416**

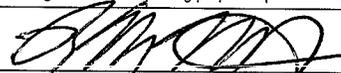
**P-79**

**Net Weight: 28.09**

**Job#VIENNA-MGEM**

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  
**RM Hart**

Signature  


Month Day Year  
**12 13 06**

15. International Shipments  
 Import to U.S.

Export from U.S.

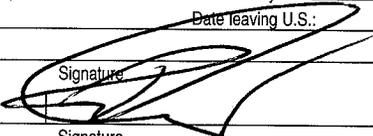
Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
**Robert Carpenter**

Signature  


Month Day Year

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:

17b. Alternate Facility (or Generator)

U.S. EPA ID Number

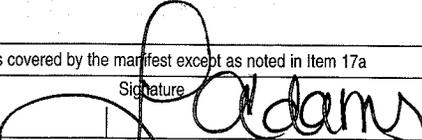
Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Kaur Adams**

Signature  


Month Day Year  
**12 13 06**

<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-5899</b>	4. Waste Tracking Number <b>824</b>
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>			Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>		
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>					
6. Transporter 1 Company Name <b>Puryear Trucking</b>		U.S. EPA ID Number <b>DOT# 888050</b>			
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>			
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>			
Facility's Phone: <b>757-865-6070</b>					
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.
		No.	Type		
	1. <b>01570 Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>
	2.				
	3.				
	4.				
13. Special Handling Instructions and Additional Information  <b>Project# 110530 Transaction#: 300W17 P-64 Net Weight: 18.51 Job# VIENNA-MGEM</b>					
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 <b>RM HART</b>		Signature <i>[Signature]</i>		Month <b>12</b>	Day <b>13</b>
				Year <b>06</b>	
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 <b>Mary Kelley</b>		Signature <i>[Signature]</i>		Month <b>12</b>	Day <b>13</b>
Transporter 2 Printed/Typed Name		Signature		Year <b>06</b>	
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 _____					
17c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____					
18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a					
Printed/Typed Name <b>Adam</b>		Signature <i>[Signature]</i>		Month <b>12</b>	Day <b>13</b>
				Year <b>06</b>	

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**825**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**  
*01570*

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 300442**  
**AT-11 Net Weight: 15,61**  
**Job#VIENNA-MGEM**

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  
**RM HANT**

Signature  
*[Signature]*

Month Day Year  
**12 13 06**

INT'L

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/ext.:  
Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
**SON MULLEN**

Signature  
*[Signature]*

Month Day Year  
**12 13 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **John Adams** Signature *[Signature]* Month Day Year **12 13 06**

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>826</b>
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5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>	Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>	

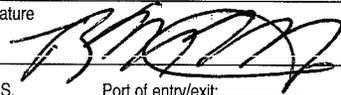
6. Transporter 1 Company Name <b>Puryear Trucking</b>	U.S. EPA ID Number <b>DOT# 896050</b>
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>

8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
Facility's Phone: <b>757-865-6070</b>	

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

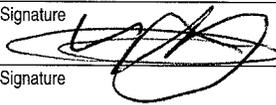
13. Special Handling Instructions and Additional Information	
<b>Project#116539</b>	<b>Transaction#: 300409</b>
<b>MANCON #</b>	<b>Net Weight: 20.27</b>
	<b>Job#VIENNA-MGEM</b>

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 **Rm Hart** Signature  Month **12** Day **13** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **Nikie** Signature  Month **12** Day **13** Year **06**

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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**  
3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**827**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-8703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**  
*OSD*

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**  
**T-10**

**Transaction#:** **300427**  
**Net Weight:** **22.65**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

*R.M. Hart*

Signature

*[Signature]*

Month Day Year  
**12 13 06**

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

*L.R.*

Signature

*[Signature]*

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*[Signature]*

Month Day Year

**12 13 06**

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number NOT REQUIRED 2. Page 1 of 1 3. Emergency Response Phone 302 652-8999 4. Waste Tracking Number 828

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**

6. Transporter 1 Company Name: ~~Parsons Trucking~~ **C. H. Tawney** U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
 Facility's Phone: **757-865-6070** U.S. EPA ID Number: **NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 300429**  
**ARIK & Net Weight: 20.26 Job#VIENNA-MGEM**

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: **R M Hart** Signature: *[Signature]* Month: **12** Day: **13** Year: **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: **MURTELA HAHOU** Signature: *[Signature]* Month: **12** Day: **13** Year: **06**  
 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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: **Jackie Blackwell** Signature: *[Signature]* Month: **12** Day: **13** Year: **06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**829**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539 Transaction#: 300431**  
**P-5-g Net Weight: 17-33 Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name **B.M. Hart** Signature *[Signature]* Month Day Year

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Andera Clark** Signature *[Signature]* Month Day Year **12 13 06**  
Transporter 2 Printed/Typed Name Signature Month Day Year

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Laura Adams** Signature *[Signature]* Month Day Year **12 13 06**

GENERATOR

INT'L TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**830**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone:  
6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No. Type

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**#16**

**Net Weight:**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*B.M. Ham*

Signature

*B.M. Ham*

Month Day Year

**12 13 06**

15. International Shipments  Import to U.S.  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

*Robert Scott*

Signature

*Robert Scott*

Month Day Year

**12 13 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Maure Adams*

Signature

*Maure Adams*

Month Day Year

**12 13 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**831**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 898050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**  
*01570*

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 300437**

**P-63**

**Net Weight: 3880 P**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name  
**R M Hans**

Signature  
*R M Hans*

Month Day Year  
**12 13 06**

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
**Marlon Mitchell**

Signature  
*Marlon Mitchell*

Month Day Year  
**12 13 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Laure Adams**

Signature  
*Laure Adams*

Month Day Year  
**12 13 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**  
3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**833**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
~~Punyear Trucking~~ **C3H**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
~~South Norfolk Trucking, Inc.~~

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 306438**

**14**

**Net Weight: 23.45**

**Job#VIENNA-MGEM**

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

**B M HART**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

INTL

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**Q. Cross**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Kaura Adams**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**834**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

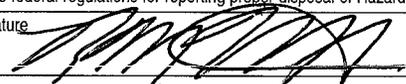
U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539**      **Transaction#: 300442**  
**P-76**      **Net Weight: 24.13**      **Job#VIENNA-MGEM**

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 **RM Hunt**      Signature       Month **12** Day **13** Year **06**

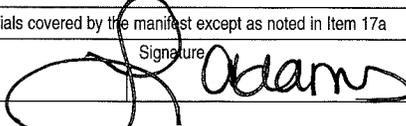
15. International Shipments     Import to U.S.     Export from U.S.    Port of entry/exit: \_\_\_\_\_  
Transporter Signature (for exports only): \_\_\_\_\_    Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **BRUCE BOGEL**      Signature       Month **12** Day **13** Year **06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laine Adams**      Signature       Month **12** Day **13** Year **06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**835**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**  
Facility's Phone:

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

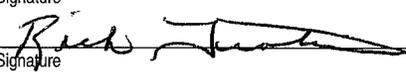
13. Special Handling Instructions and Additional Information

**Project# 116539**      **Transaction#: 300479**  
**15**      **Net Weight: 20.53**      **Job# VIENNA-MGEM**

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 **RM Hart**      Signature       Month **12** Day **13** Year **06**

15. International Shipments  Import to U.S.       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 **Rich Trotman**      Signature       Month **12** Day **13** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_      Signature \_\_\_\_\_      Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity       Type       Residue       Partial Rejection       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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Spacie Blackwell**      Signature       Month **12** Day **13** Year **06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**836**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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. Special Handling Instructions and Additional Information

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**  
**01570**

**DT**

**20**

**T**

**NONE**

**Project#116539**

**Transaction#: 300452**

**11**

**Net Weight: 20.01**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name  
**R M HART**

Signature  
*[Signature]*

Month Day Year  
**12 13 06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

15. International Shipments  
 Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
**Mark**

Signature  
*[Signature]*

Month Day Year  
**12 13 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Laura Adams**

Signature  
*[Signature]*

Month Day Year  
**12 13 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**837**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**300461**

**3**

**Net Weight:**

**17.42**

**Job#VIENNA-MGEM**

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

**B M Hart**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**BRIAN ELLIOTT**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

Transporter 2 Printed/Typed Name

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**JACKIE BLACKWELL**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**838**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **01570  
Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**300454**

**18**

**Net Weight:**

**19.89**

**Job#VIENNA-MGEM**

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

**R M Hart**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

INTL

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

Port of entry/exit:

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**K W Falls**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

Transporter 2 Printed/Typed Name

Signature

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Karen Adams**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number

**839**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**  
**01570**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 300460**

**Net Weight: 20.09**

**Job#VIENNA-MGEM**

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

*BM Hare*

Signature

*[Signature]*

Month Day Year  
**12 13 06**

INT'L

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**JOHN CARTOS**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

TRANSPORTER

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

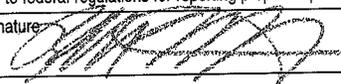
*[Signature]*

Signature

*[Signature]*

Month Day Year  
**12 13 06**

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>840</b>	
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>		Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>			
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>					
6. Transporter 1 Company Name <b>Puryear Trucking</b>			U.S. EPA ID Number <b>DOT# 896050</b>		
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>		
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666 757-865-6070</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>		
Facility's Phone:					
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.
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>
2.					
3.					
4.					
13. Special Handling Instructions and Additional Information  <b>Project#116539 DDB-6 Transaction#: 300469</b> <b>Net Weight: 18.65</b> <b>Job#VIENNA-MGEM</b>					
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 <i>BM HART</i>		Signature <i>[Signature]</i>		Month <b>12</b>	Day <b>13</b>
				Year <b>06</b>	
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/ext: Date leaving U.S.:					
16. Transporter Acknowledgment of Receipt of Materials					
Transporter 1 Printed/Typed Name <i>Malcolm L. Glover SR</i>		Signature <i>[Signature]</i>		Month <b>12</b>	Day <b>13</b>
Transporter 2 Printed/Typed Name		Signature		Year <b>06</b>	
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 hazardous materials covered by the manifest except as noted in Item 17a					
Printed/Typed Name <i>Caura Adams</i>		Signature <i>[Signature]</i>		Month <b>12</b>	Day <b>13</b>
				Year <b>06</b>	

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8000</b>	4. Waste Tracking Number <b>841</b>	
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737 757 445-8703 Attn: Rob Schonk</b>			Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>		
6. Transporter 1 Company Name <b>Puyear Trucking</b>			U.S. EPA ID Number <b>DOT# 888050</b>		
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>		
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666 757-865-8070</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>		
Facility's Phone:					
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.
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>
	2.				
	3.				
	4.				
13. Special Handling Instructions and Additional Information  <b>Project# 118539      Transaction#: 300482</b> <b>PD-6                      Net Weight: 17.1#</b> <b>Job# VIENNA-MGEM</b>					
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 <b>R M Hart</b>			Signature 		Month Day Year <b>12/13/06</b>
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			Signature		Month Day Year
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: _____ U.S. EPA ID Number _____					
17b. Alternate Facility (or Generator)					
Facility's Phone: _____					
17c. Signature of Alternate Facility (or Generator)					
18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a					
Printed/Typed Name			Signature		Month Day Year

GENERATOR  
 INT'L  
 TRANSPORTER  
 DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 852-8949**

4. Waste Tracking Number  
**842**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
Generator's Phone: 757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 09050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23668  
757-868-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Registered Soil contaminated with wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# 118538      Transaction#: 300484  
**P 58**      Net Weight: 17.33      JOB VIENNA-MGEM

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 **BMI/ART**      Signature **[Signature]**      Month **12** Day **13** Year **00**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

15. International Shipments     Import to U.S.     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 \_\_\_\_\_    Signature \_\_\_\_\_    Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **[Signature]**    Signature **[Signature]**    Month **1** Day **14** Year **00**

TIC#300483

<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-5959</b>	4. Waste Tracking Number <b>843</b>				
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>			Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>						
Generator's Phone: <b>757 445-8703 Attn: Rob Schenk</b>									
6. Transporter 1 Company Name <b>Puryear Trucking</b>			U.S. EPA ID Number <b>DOT# 886050</b>						
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>						
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23066</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>						
Facility's Phone: <b>757-865-6070</b>									
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.		
		1.		No.	Type				
		Non RCRA, Non DOT Regulated Soil contaminated with wood debris			DT	20	T	NONE	
		2.							
		3.							
	4.								
13. Special Handling Instructions and Additional Information									
Project# 116530			Transaction#:			TONS 18.74			
DAVIS #1			Net Weight:			Job#VIENNA-MGEM			
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 <i>B.M. Hunt</i>			Signature <i>[Signature]</i>			Month	Day	Year	
						12	13	06	
TRANSPORTER INT'L	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 <i>DENISE ADAMS</i>			Signature <i>[Signature]</i>			Month	Day	Year	
						12	13	06	
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:						U.S. EPA ID 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 hazardous materials covered by the manifest except as noted in Item 17a									
Printed/Typed Name <i>PICKIE Blackwell</i>			Signature <i>[Signature]</i>			Month	Day	Year	
						12	13	06	

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of 1  
 3. Emergency Response Phone: **302 652-8990**  
 4. Waste Tracking Number: **844**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA), 1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 886050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill, 100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-865-8070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
 Project#: **116530** Transaction#: **300491**  
**P-68** Net Weight: **23.09**  
**JOB VIENNA-MGEM**

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: **R M HART** Signature: *[Signature]* Month: **12** Day: **13** Year: **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: **Mark Wachter II** Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_  
 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) 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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: **JACKIE BURKE II** Signature: *[Signature]* Month: **12** Day: **13** Year: **06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8888**

4. Waste Tracking Number  
**845**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-8703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 898050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23066  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
	2.					
	3.					
	4.					

13. Special Handling Instructions and Additional Information  
**Project# 116538 Transaction#: 300487  
DAVIS H/2 Net Weight: 23-29 Job# VIENNA-MGEM**

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 **Rob Schonk** Signature *[Signature]* Month **12** Day **11** Year **06**

15. International Shipments  Import to U.S.  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  
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) 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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Mike Maxwell** Signature *[Signature]* Month **11** Day **16** Year

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**846**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 898050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

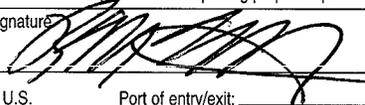
U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

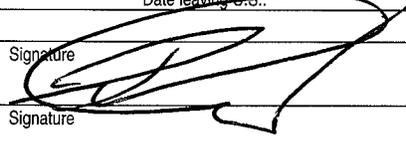
U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539 Transaction#: 300493**  
**P-79 Net Weight: 21.61**  
**Job# VIENNA-MGEM**

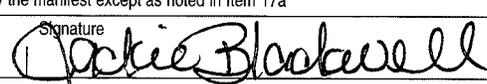
14. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.  
Generator's/Officer's Printed/Typed Name **BM Hart** Signature  Month **12** Day **13** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Robert Carpenter** Signature  Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **JACKIE Blackwell** Signature  Month **12** Day **13** Year **06**

GENERATOR

INT'L  
TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**847**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**      **Transaction#: 300497**  
**T-11**      **Net Weight: 39940 19.97**  
**Job# VIENNA-MGEM**

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 **B M HART**      Signature *[Signature]*      Month **12** Day **17** Year **06**

15. International Shipments       Import to U.S.       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 **T. Sheppard**      Signature *[Signature]*      Month **12** Day **13** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_      Signature \_\_\_\_\_      Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space       Quantity       Type       Residue       Partial Rejection       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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **JACKIE BLACKWELL**      Signature *[Signature]*      Month **12** Day **13** Year **06**

GENERATOR

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>048</b>
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5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>	Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>	

6. Transporter 1 Company Name <b>Puryear Trucking</b>	U.S. EPA ID Number <b>DOT# 896050</b>
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666 757-865-6070</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
Facility's Phone:	

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#: 300495**

**MARCONI**      **Net Weight: 20.34**

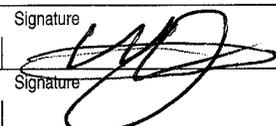
**Job#VIENNA-MGEM**

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 <b>R.M. Hart</b>	Signature 	Month Day Year <b>12 13 06</b>
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15. International Shipments  Import to U.S.  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 <b>Kylie</b>	Signature 	Month Day Year 
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 \_\_\_\_\_

7b. Alternate Facility (or Generator)

Facility's Phone: \_\_\_\_\_

Signature of Alternate Facility (or Generator) \_\_\_\_\_      Month Day Year | | |

Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Signature \_\_\_\_\_      Month Day Year | | |

**DESIGNATED FACILITY TO GENERATOR**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**849**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 300503**

**T-10**

**Net Weight: 18.15**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

*R M Hunt*

Signature

*R M Hunt*

Month Day Year  
**12 13 06**

15. International Shipments  Import to U.S.  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

Signature

*LR*

Month Day Year

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Jackie Blackwell*

Signature

*Jackie Blackwell*

Month Day Year  
**12 13 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**850**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 686050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bothel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-8070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
	2.					
	3.					
	4.					

13. Special Handling Instructions and Additional Information  
**Project# 116539 Transaction# 300505**  
**P-64 Net Weight: 17.83**  
**Job# VIENNA-MGEM**

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/Ofelor's Printed/Typed Name **R M Hunt** Signature **[Signature]** Month **12** Day **13** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Mary Kelley** Signature **[Signature]** Month **12** Day **13** Year **06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Nicke Blackwell** Signature **[Signature]** Month **12** Day **13** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**857**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-8703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone:  
6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

9a. HM  
9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))  
**1. Non RCRA, Non DOT Regulated Soil contaminated with wood debris**  
*OSTU*

10. Containers  
No. Type

11. Total Quantity

12. Unit Wt./Vol.

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 300 509**

*AT-11*

**Net Weight: 16.95**

**Job# VIENNA-MGEM**

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/Offeror's Printed/Typed Name

*R M Harris*

Signature

*R M Harris*

Month Day Year

15. International Shipments  Import to U.S.  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

*Scott A Mullins*

Signature

*Scott A Mullins*

Month Day Year

*12 13 06*

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Kaura Adams*

Signature

*Kaura Adams*

Month Day Year

*12 13 06*

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**852**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**16**

**Net Weight:**

**Job# VIENNA-MGEM**

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

**R M Hunt**

Signature

**R M Hunt**

Month Day Year  
**12 13 06**

GENERATOR  
TRANSPORTER INT'L  
DESIGNATED FACILITY

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**Robert Scott**

Signature

**Robert Scott**

Month Day Year  
**12 13 06**

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

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Kathryn Adams**

Signature

**Kathryn Adams**

Month Day Year

**12 13 06**

GENERATOR  
 TRANSPORTER INT'L  
 TRANSPORTER  
 DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>853</b>
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5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737 757 445-6703 Attn: Rob Schonk</b>	Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>
--	---

6. Transporter 1 Company Name <b>Puryear Trucking</b>	U.S. EPA ID Number <b>DOT# 896050</b>
--	--

7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
--	---

8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666 757-865-6070</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
---	---

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information			
<b>Project#116539</b>	<b>Transaction#:</b> 300512	<b>Net Weight:</b> 17.93	<b>Job#VIENNA-MGEM</b>
<i>D-59</i>			

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/Offor's Printed/Typed Name <i>R M Hunt</i>	Signature <i>[Signature]</i>	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 <i>Andrea Clark</i>	Signature <i>[Signature]</i>	Month	Day	Year
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 hazardous materials covered by the manifest except as noted in Item 17a				
Printed/Typed Name <i>Laura Adams</i>	Signature <i>[Signature]</i>	Month	Day	Year
		12	30	

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**854**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
~~Paragon Trucking~~ **CEH TRUCKING**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 300517**

**ARK-8**

**Net Weight: 19.06**

**Job# VIENNA-MGEM**

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  
**B M HART**

Signature  
*[Signature]*

Month Day Year  
**12/13/06**

INT'L

15. International Shipments  Import to U.S.  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  
**MURTELA HANOU**

Signature  
*[Signature]*

Month Day Year  
**12/13/06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Laura Adams**

Signature  
*[Signature]*

Month Day Year  
**12/13/06**

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number NOT REQUIRED 2. Page 1 of 1 3. Emergency Response Phone 302 652-8999 4. Waste Tracking Number *EST*

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Phone: **757 445-6703** Attn: **Rob Schonk**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 896050**  
 7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
 Facility's Phone: **757-865-6070** U.S. EPA ID Number: **NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539** **Transaction#: 308516**  
**14** **Net Weight: 2400**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name: **B M Hant** Signature: *[Signature]* Month: **12** Day: **13** Year: **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: **Q. Cross** Signature: *[Signature]* Month: **12** Day: **13** Year: **06**  
 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) 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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: **Laura Adams** Signature: *[Signature]* Month: **12** Day: **13** Year: **06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**856**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))  
**1. Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

10. Containers  
No. Type

11. Total Quantity

12. Unit Wt./Vol.

**20 T NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 300579**

**P-76**

**Net Weight: 23.46**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name  
**R M HUNT**

Signature  
*[Signature]*

Month Day Year  
**12 13 06**

GENERATOR

TRANSPORTER INT'L

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:  
Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
**BRUCE BUGH**

Signature  
*[Signature]*

Month Day Year  
**12 13 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Laura Adams**

Signature  
*[Signature]*

Month Day Year  
**12 13 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1** 3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**857**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name **Puryear Trucking** U.S. EPA ID Number **DOT# 896050**

7. Transporter 2 Company Name **South Norfolk Trucking, Inc.** U.S. EPA ID Number **NOT REQUIRED**

8. Designated Facility Name and Site Address **Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number **NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539 Transaction#: 300523**  
**P-63 Net Weight: 36860**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **R M Hant** Signature *[Signature]* Month **12** Day **13** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Marlon Marlon** Signature *[Signature]* Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Kaura Adams** Signature *[Signature]* Month **12** Day **13** Year **06**

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**858**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>0157e Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539      Transaction#: 300530**  
**11      Net Weight: 19.41**  
**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name **B M Hart** Signature *[Signature]* Month **12** Day **13** Year **06**

15. International Shipments  Import to U.S.  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]* Signature *[Signature]* Month **12** Day **13** Year **06**

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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **13** Year **06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8900**

4. Waste Tracking Number  
**859**

5. Generator's Name and Mailing Address

**Commander, New Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703** Attn: **Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 889050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-0070**

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.

1.

**Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project# **116539**

Transaction#: **300536**

**P-78**

Net Weight: **21.52**

Job# **VIENNA-MGEM**

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

**Rob Schonk**

Signature

*[Signature]*

Month Day Year

**12/13/06**

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

**John Cannon**

Signature

*[Signature]*

Month Day Year

**12/13/06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**860**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1.  
**Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 300535**  
**18 Net Weight: 20.43**  
**Job#VIENNA-MGEM**

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 **B M Hunt** Signature *[Signature]* Month Day Year **12/13/06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **K W Falls** Signature *[Signature]* Month Day Year **12/13/06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **JACKIE BLACKWELL** Signature *[Signature]* Month Day Year **10/30/06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**861**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#:**  
**Net Weight:**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **BM Hart** Signature **[Signature]** Month Day Year

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Rich Trotman** Signature Month Day Year  
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:

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **JACKIE Blackwell** Signature **Cookie Blackwell** Month Day Year **12/13/06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**862**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Pureyear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**300546**

**DDB6**

**Net Weight:**

**18.63**

**Job# VIENNA-MGEM**

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

**B M / HANT**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

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

**Malvin L. Spover SR.**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

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:

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 hazardous materials covered by the manifest, except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

300549

<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-6590</b>	4. Waste Tracking Number <b>863</b>			
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>			Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>					
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>								
6. Transporter 1 Company Name <b>Puryear Trucking</b>				U.S. EPA ID Number <b>DOT# 890050</b>				
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>				U.S. EPA ID Number <b>NOT REQUIRED</b>				
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23668</b>				U.S. EPA ID Number <b>NOT REQUIRED</b>				
Facility's Phone: <b>757-865-6070</b>								
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
				No.	Type			
	1. <b>OS1570 Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>				<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
	2.							
	3.							
4.								
13. Special Handling Instructions and Additional Information  <b>Project# 116539      Transaction#:</b> <b>Davis #1      Net Weight:</b> <b>TONS - 21.86</b> <b>Job# VIENNA-MGEM</b>								
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 <b>RM Hunt</b> Signature <i>[Signature]</i> Month <b>12</b> Day <b>13</b> Year <b>06</b>								
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 <b>Denise Adams</b> Signature <i>[Signature]</i> Month <b>12</b> Day <b>13</b> Year <b>06</b> 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:      U.S. EPA ID Number								
17b. Alternate Facility (or Generator)      U.S. EPA ID 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 hazardous materials covered by the manifest except as noted in Item 17a Printed/Typed Name <b>Denise Adams</b> Signature <i>[Signature]</i> Month <b>12</b> Day <b>13</b> Year <b>06</b>								

GENERATOR

INT'L  
TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8699**

4. Waste Tracking Number  
**864**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-8703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 898050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23066  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. 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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

Project# **116539**

Transaction#: **300351**

**DAVIS #2**

Net Weight: **21.47**

Job# **VIENNA-MGEM**

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  
**12/13/06**

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

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**868**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

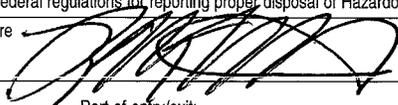
U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539 Transaction#: 360554**  
**P-68 Net Weight: 21.47**  
**Job# VIENNA-MGEM**

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 **R M HART** Signature  Month **12** Day **13** Year **06**

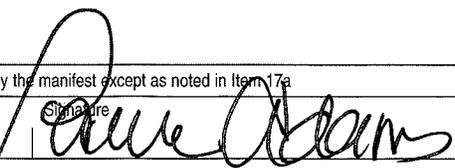
15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Mark Mische II** Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature  Month **12** Day **13** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**  
3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**866**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

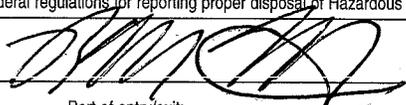
6. Transporter 1 Company Name  
**Puryear Trucking** U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.** U.S. EPA ID Number  
**NOT REQUIRED**

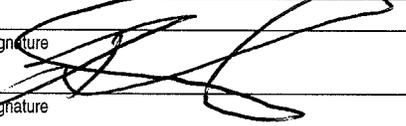
8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number  
**NOT REQUIRED**  
Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 300541**  
**P-79 Net Weight: 21.1**  
**Job#VIENNA-MGEM**

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 **RM HAN** Signature  Month **12** Day **13** Year **06**

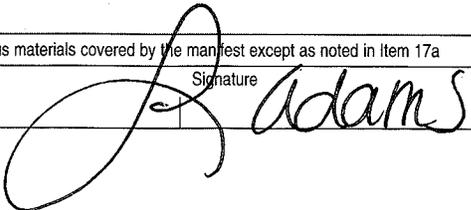
15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter Signature (for exports only): \_\_\_\_\_  
Transporter 1 Printed/Typed Name **Robert Carpenter** Signature  Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Kevin Adams** Signature  Month **12** Day **13** Year **06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-WASTE

Generator ID Number

NOT REQUIRED -

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

867

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. 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.

1. 01570  
Non RCRA, Non DOT Regulated Soil contaminated with wood debris

DT

20

T

NONE

13. Special Handling Instructions and Additional Information

Project# 116539

P-58

Transaction#:

300562

Net Weight:

16.56

Job# VIENNA-MGEM

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

BM Hault

Signature

[Signature]

Month Day Year

12 13 06

15. International Shipments

Import to U.S.

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

JOE W GRIFFIN

Signature

[Signature]

Month Day Year

12 13 06

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year

12 13 06

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**868**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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. Special Handling Instructions and Additional Information

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 300563**

**T-11**

**Net Weight: 33480**

**Job#VIENNA-MGEM**

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

*BM Hunt*

Signature

*[Signature]*

Month Day Year  
**12 13 06**

INT'L

15. International Shipments

Import to U.S.

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

*T. Sheppard*

Signature

*J. Sheppard*

Month Day Year  
**12 13 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*[Signature]*

Month Day Year  
**12 13 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**869**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**  
U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**  
U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**  
U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: Net Weight: 21.70**  
**MARCONI Job#VIENNA-MGEM**

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 **RM Harris** Signature  Month **12** Day **13** Year **06**

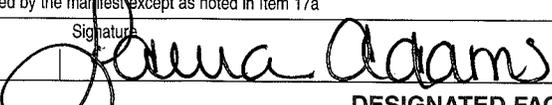
15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Nykie** Signature  Month Day Year  
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:

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature  Month **12** Day **13** Year **06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**  
3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**871**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b> <i>OT57C</i>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:** *300571*  
**Net Weight:** *17.39*

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name *RM HART* Signature *[Signature]* Month *12* Day *13* Year *06*

INT'L

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials  
Transporter Printed/Typed Name *BRIAN ELLIOTT* Signature *[Signature]* Month *12* Day *13* Year *06*  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

DESIGNATED FACILITY

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name *W. Adams* Signature *[Signature]* Month *12* Day *13* Year *06*

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1** 3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**872**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**  
*81570*

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 300578**

**T-10**

**Net Weight: 19.40**

**Job#VIENNA-MGEM**

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

*R M Hunt*

Signature

*[Signature]*

Month Day Year  
**12 13 09**

INT'L

15. International Shipments

Import to U.S.

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

*L. R*

Signature

*L. R*

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Karen Adams*

Signature

*[Signature]*

Month Day Year  
**12 13 09**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**873**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**300581**

**P-55**

**Net Weight:**

**23.25**

**Job# VIENNA-MGEM**

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  
**RM Schonk**

Signature  
*[Signature]*

Month Day Year  
**12 13 06**

INT'L

15. International Shipments  Import to U.S.  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

Transporter 2 Printed/Typed Name Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Jackie Blackwell**

Signature  
*[Signature]*

Month Day Year  
**12 13 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**874**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23668**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 300580**

**AT-20**

**Net Weight: 21.38**

**Job#VIENNA-MGEM**

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

*RM Hunt*

Signature

*[Signature]*

Month Day Year

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

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*JACKIE Blackwell*

Signature

*JACKIE Blackwell*

Month Day Year

*12 30*

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1** 3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**875**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name **Puryear Trucking** U.S. EPA ID Number **DOT# 896050**

7. Transporter 2 Company Name **South Norfolk Trucking, Inc.** U.S. EPA ID Number **NOT REQUIRED**

8. Designated Facility Name and Site Address **Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number **NOT REQUIRED**  
Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 300583  
AT-21 Net Weight: 24.63 Job#VIENNA-MGEM**

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 **R M HANT** Signature *[Signature]* Month Day Year **12 13 06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **MARK McLENDON** Signature *[Signature]* Month Day Year **12 13 06**  
Transporter 2 Printed/Typed Name Signature Month Day Year

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **JACKIE Blackwell** Signature *[Signature]* Month Day Year **12 13 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**876**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone:

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 300586**

**D-77**

**Net Weight: 20.68**

**Job# VIENNA-MGEM**

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

**RM Hunt**

Signature

**[Signature]**

Month Day Year  
**12 13 06**

15. International Shipments

Import to U.S.

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

**Puryear Tkg Inc**

Signature

**[Signature]**

Month Day Year  
**12 13 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**JACKIE BLACKWELL**

Signature

**[Signature]**

Month Day Year

**12 13 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1** 3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**8707**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539 Transaction#:**

**Net Weight:**

**Job#VIENNA-MGEM**

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 **BM Hans** Signature **[Signature]** Month **12** Day **13** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials

Transporter Signature (for exports only): \_\_\_\_\_

Transporter 1 Printed/Typed Name **Robert T Slap** Signature **[Signature]** Month **12** Day **13** Year **06**

Transporter 2 Printed/Typed Name **1** Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Jackie Blackwell** Signature **[Signature]** Month **12** Day **13** Year **06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Picking Number  
**878**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 300588  
AT-11 Net Weight: 17.38 Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **RM Hunt** Signature *[Signature]* Month Day Year

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Scott A Mullins** Signature *[Signature]* Month Day Year **12 13 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Joanie Blackwell** Signature *[Signature]* Month Day Year **12 13 06**

GENERATOR

INTL TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1** 3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**879**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking** U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.** U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number  
**NOT REQUIRED**  
Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 300590**  
**AT-16 Net Weight: 21.29**  
**Job#VIENNA-MGEM**

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 **RM HANT** Signature **[Signature]** Month Day Year

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **A. TURNER** Signature **[Signature]** Month Day Year  
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:

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Jackie Blackwell** Signature **[Signature]** Month Day Year **12 13 06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**880**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 300591**  
**D-76 Net Weight: 21.47**  
**Job#VIENNA-MGEM**

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 **RM Hant** Signature **[Signature]** Month Day Year

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **BRUCE BOUG** Signature **[Signature]** Month Day Year **12 13 06**  
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:

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **[Signature]** Signature **[Signature]** Month Day Year **12 13 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

881

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with wood debris

DT

20

T

NONE

13. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 300593

P-59

Net Weight: 20.02

Job# VIENNA-MGEM

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

RM HANT

Signature

RM HANT

Month Day Year

15. International Shipments

Import to U.S.

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

Andera Clark

Signature

Andera Clark

Month Day Year

12 15 06

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

JACKIE Blackwell

Signature

JACKIE Blackwell

Month Day Year

12 13 06

GENERATOR	<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8699</b>	4. Waste Tracking Number <b>882</b>	
	5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>			Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>		
	Generator's Phone: <b>757 445-5703 Attn: Rob Schonk</b>					
	6. Transporter 1 Company Name <b>Puryear Trucking</b>			U.S. EPA ID Number <b>DOT# 898050</b>		
	7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>		
	8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23066</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>		
	Facility's Phone: <b>757-885-6070</b>					
	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity
			No.	Type		
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>			<b>DT</b>	<b>20</b>	<b>T</b>
	2.					
	3.					
	4.					
13. Special Handling Instructions and Additional Information						
<b>Project# 116539</b> <b>Transaction# 300595</b> <b>P-63</b> <b>Net Weight: 39900</b> <span style="float: right;"><b>Job# VIENNA-MGEM</b></span>						
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 <b>R M Hunt</b>			Signature <i>[Signature]</i>		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 <b>Marlon Mitchell</b>			Signature <i>[Signature]</i>		Month Day Year <b>12 13 06</b>	
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 hazardous materials covered by the manifest except as noted in Item 17a						
Printed/Typed Name <b>[Signature]</b>			Signature <i>[Signature]</i>		Month Day Year <b>12 13 06</b>	

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

1

3. Emergency Response Phone

302 652-8680

4. Waste Tracking Number

883

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone:

**757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 698030**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone:

**757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 300599

**R-64**

Net Weight: 17.65

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R M Hart**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**MARY KELLEY**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Vicki Kewell**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8899**

4. Waste Tracking Number  
**884**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**P-62**

**Net Weight:**

**Job#VIENNA-MGEM**

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 **R M Hant** Signature **R M Hant** Month **12** Day **13** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Jewell Y. Lockamy** Signature **Jewell Y. Lockamy** Month **12** Day **13** Year **06**  
Transporter 2 Printed/Typed Name **Jewell Y.** Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Patrick Blackwell** Signature **Patrick Blackwell** Month **12** Day **13** Year **06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**885**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23686**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 300605**

**18**

**Net Weight: 19.04**

**Job# VIENNA-MGEM**

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

**RM Hant**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

INT'L

15. International Shipments

Import to U.S.

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

**KW Falls**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Jackie Blackwell**

Signature

*[Signature]*

Month Day Year  
**12 13 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1** 3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**886**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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. Special Handling Instructions and Additional Information

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**16**

**Net Weight:**

**Job#VIENNA-MGEM**

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 **RM Hunt**

Signature *[Signature]*

Month Day Year **12 15 06**

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **Robert Scott**

Signature *[Signature]*

Month Day Year **12 15 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Jackie Blackwell**

Signature *[Signature]*

Month Day Year **12 15 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**887**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Dunbar Trucking**

**E 3 H**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**14**

**Transaction#: 300988**

**Net Weight: 20.84**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R M Hans**

Signature

**R M Hans**

Month Day Year

**12 15 06**

15. International Shipments

Import to U.S.

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

**Q. Cross**

Signature

**Q. Cross**

Month Day Year

**12 15 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Jackie Blackwell**

Signature

**Jackie Blackwell**

Month Day Year

**12 15 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**088**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris** DT 20 T NONE

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 300210**

**Net Weight: 15,71**

**Job#VIENNA-MGEM**

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

*R.M. Harris*

Signature

*R.M. Harris*

Month Day Year  
**12 15 06**

INT'L

15. International Shipments

Import to U.S.

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

**PATRICK S. ADAMS**

Signature

*Patrick S. Adams*

Month Day Year  
**12 15 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Kourea Adams*

Signature

*Kourea Adams*

Month Day Year  
**12 15 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1** 3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**889**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name **Puryear Trucking** U.S. EPA ID Number **DOT# 896050**

7. Transporter 2 Company Name **South Norfolk Trucking, Inc.** U.S. EPA ID Number **NOT REQUIRED**

8. Designated Facility Name and Site Address **Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number **NOT REQUIRED**  
Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 300997**  
**Net Weight: 21.32**  
**Job#VIENNA-MGEM**

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 **B M Hanni** Signature *[Signature]* Month **12** Day **15** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **BRUCE BUGG** Signature *[Signature]* Month **12** Day **15** Year **06**  
Transporter 2 Printed/Typed Name Signature *[Signature]* Month Day Year

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **15** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**899**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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. Special Handling Instructions and Additional Information

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**  
**3**

**Transaction#: 301003**  
**Net Weight: 15.22**

**Job#VIENNA-MGEM**

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/Offoror's Printed/Typed Name

Signature  
Month Day Year  
**12/15/06**

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  
**R M Thomas**

Signature  
Month Day Year

Transporter 2 Printed/Typed Name  
**BRIAN ELLIOTT**

Signature  
Month Day Year  
**12/15/06**

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Laura Adams**

Signature  
Month Day Year  
**12/15/06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of 1  
3. Emergency Response Phone  
**302 662-5000**

4. Waste Tracking Number  
**8971**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Phone: **757 445-6703** Attn: Rob Schonk

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bothel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23066**

Facility's Phone: **757-665-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# 10639  
**4**

Transaction#: **301154**

Net Weight: **19.68**

Job# VIENNA-MGEM

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/Offor's Printed/Typed Name: **John P. ...** Signature: **[Signature]** Month: **12** Day: **15** Year: **2006**

GENERATOR

TRANSPORTER

DESIGNATED FACILITY

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: **Stephen ...** Signature: **[Signature]** Month: **12** Day: **15** Year: **2006**

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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

GENERATOR

NON-HAZARDOUS WASTE MANIFEST      1. Generator ID Number: **NOT REQUIRED**      2. Page 1 of **1**      3. Emergency Response Phone: **302 652-8999**      4. Waste Tracking Number: **892**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-8703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Puryear Trucking**      U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.**      U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666**  
 Facility's Phone: **757-865-6070**      U.S. EPA ID Number: **NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information:  
**Project#116539      Transaction#: 301010**  
**T2 HAN      Net Weight: 16.70**  
**Job#VIENNA-MGEM**

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: **R M Hamt**      Signature: *[Signature]*      Month Day Year: **12 15 06**

TRANSPORTER

15. International Shipments       Import to U.S.       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: **Ronald Hambric**      Signature: *[Signature]*      Month Day Year: **12 15 06**  
 Transporter 2 Printed/Typed Name: \_\_\_\_\_      Signature: \_\_\_\_\_      Month Day Year: \_\_\_\_\_

DESIGNATED FACILITY

17. Discrepancy  
 17a. Discrepancy Indication Space       Quantity       Type       Residue       Partial Rejection       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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: **Laura Adams**      Signature: *[Signature]*      Month Day Year: **12 15 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**893**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**      **Transaction#: 301024**

**15**      **Net Weight: 17.99**

**Job# VIENNA-MGEM**

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: **R M Trotman**      Signature: *[Signature]*      Month: **12** Day: **15** Year: **06**

15. International Shipments     Import to U.S.     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: **Rock Trotman**      Signature: *[Signature]*      Month: **12** Day: **15** Year: **06**

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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: **Laura Adams**      Signature: *[Signature]*      Month: **12** Day: **15** Year: **06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1** 3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number

**894**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number

**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**18**

**Transaction#:**

**300120**

**Net Weight:**

**18.94**

**Job#VIENNA-MGEM**

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

**R M Hant**

Signature

**[Signature]**

Month Day Year

**12/15/06**

INT'L

15. International Shipments

Import to U.S.

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]**

Signature

**[Signature]**

Month Day Year

**12/15/06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**James Adams**

Signature

**[Signature]**

Month Day Year

**12/15/06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-3523

4. Waste Tracking Number

895

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (NRMMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-5700 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 698050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23065

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-885-6078

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project# 116530

Transaction#: 301026

PS 2

Net Weight: 22.06

JLB/VIENNA-MGEM

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/Offor's Printed/Typed Name

RM Hant

Signature

[Signature]

Month Day Year

12/15/08

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Jim [Signature]

Signature

[Signature]

Month Day Year

12/15/08

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

[Signature]

Month Day Year

12/15/08

GENERATOR

INTL

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**890**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23668**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539**      **Transaction#: 901030**  
**P-73**      **Net Weight: 23.56 Tons**  
**Job#VIENNA-MGEM**

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 **R M Hart**      Signature *[Signature]*      Month Day Year **12/15/06**

15. International Shipments       Import to U.S.       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 **Gary Wrench**      Signature *[Signature]*      Month Day Year **12/15/06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laure Adams**      Signature *[Signature]*      Month Day Year **12/15/06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**897**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539      Transaction#: 301033**

**AT21      Net Weight: 21-27**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name: **R M Hans**      Signature: *[Signature]*      Month: **12** Day: **15** Year: **06**

15. International Shipments  Import to U.S.  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: **MAFF McLENNON**      Signature: *[Signature]*      Month: **12** Day: **15** Year: **06**

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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: **Jackie Blackwell**      Signature: *[Signature]*      Month: **12** Day: **15** Year: **06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8900**

4. Waste Tracking Number  
**898**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information  
**Project#116539**      **Transaction#: 301096**  
**07**      **Net Weight: 15-84**  
**Job#VIENNA-MGEM**

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  
**Bm Hunt**

Signature  
**Bm Hunt**      Month Day Year  
**12 15 06**

15. International Shipments  
 Import to U.S.       Export from U.S.

Port of entry/exit:  
Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
**Diane L. Robinson**

Signature  
**Diane L. Robinson**      Month Day Year  
**12 15 06**

Transporter 2 Printed/Typed Name  
Signature      Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space  
 Quantity       Type       Residue       Partial Rejection       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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**JACKIE BLACKWELL**

Signature  
**JACKIE BLACKWELL**      Month Day Year  
**12 15 06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8899**

4. Waste Tracking Number  
**899**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-8703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#:** **301043**  
**ABBI2**      **Net Weight:** **16-70**  
**Job#VIENNA-MGEM**

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: **R M HANT**      Signature: *[Signature]*      Month Day Year: **12/15/06**

GENERATOR

TRANSPORTER

15. International Shipments     Import to U.S.     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: **Melvin L. Glover Jr.**      Signature: *[Signature]*      Month Day Year: **12/15/06**

Transporter 2 Printed/Typed Name: \_\_\_\_\_      Signature: \_\_\_\_\_      Month Day Year: \_\_\_\_\_

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space     Quantity     Type     Residue     Partial Rejection     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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: **Jackie Blackwell**      Signature: *[Signature]*      Month Day Year: **12/15/06**

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**900**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 301040**  
**P-69 Net Weight: 23.12**  
**Job#VIENNA-MGEM**

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/Offeror's Printed/Typed Name **R M Hand** Signature *[Signature]* Month **12** Day **15** Year **06**

15. International Shipments  Import to U.S.  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 \_\_\_\_\_  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **JACKIE BLACKWELL** Signature *[Signature]* Month **12** Day **15** Year **06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

901

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone:

757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone:

757-865-6070

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.

1.

Non RCRA, Non DOT Regulated Soil contaminated with wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 301046

Net Weight: 20.37

Job#VIENNA-MGEM

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

BM Hant

Signature

[Signature]

Month Day Year 12/15/06

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

MAIK

Signature

[Signature]

Month Day Year 12/15/06

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Jackie Blackwell

Signature

[Signature]

Month Day Year 12/15/06

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**907**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#: 301057**

**P-68**      **Net Weight: 24.42**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name: **R.M. Hume**      Signature: *[Signature]*      Month: **12** Day: **15** Year: **06**

15. International Shipments     Import to U.S.     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: **Mark Mitchell**      Signature: \_\_\_\_\_      Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed Name: **Wade Blackwell**      Signature: *[Signature]*      Month: **12** Day: **15** Year: **06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of 1  
3. Emergency Response Phone  
**302 852-8000**

4. Waste Tracking Number  
**903**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

U.S. EPA ID Number

**Puryear Trucking**

**DOT# 858050**

7. Transporter 2 Company Name

U.S. EPA ID Number

**South Norfolk Trucking, Inc.**

**NOT REQUIRED**

8. Designated Facility Name and Site Address

U.S. EPA ID Number

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23068  
757-895-6070**

**NOT REQUIRED**

Facility's Phone:

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No.

Type

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project# 116530**

**Transaction#: 301156**

**T-10**

**Net Weight: 18,36**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

**RM HART**

Signature

**RM HART**

Month Day Year

**12 15 06**

15. International Shipments  Import to U.S.  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

**L.R**

Signature

**L.R**

Month Day Year

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**JACKIE BLACKWELL**

Signature

**JACKIE BLACKWELL**

Month Day Year

**12 15 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8909**

4. Waste Tracking Number  
**904**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-0703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 086050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

Project# **116339**

Transaction# **301073**

Net Weight: **19.09 TONS**

Job# **VIENNA-MGEM**

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/Offor's Printed/Typed Name  
**R M Grant**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

15. International Shipments  Import to U.S.  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  
**W R Wood**

Signature  
*[Signature]*

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**J Marie Pinkwell**

Signature  
*[Signature]*

Month Day Year  
**12 14**

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**908**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**  
Facility's Phone:

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301075**

**AT17**

**Net Weight: 23.35**

**Job#VIENNA-MGEM**

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  
**RM Hunt**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

15. International Shipments  
 Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

Port of entry/exit:  
Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
**Robert Carpenter**

Signature  
*[Signature]*

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Jackie Blackwell**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**906**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

No. Type

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301078**

**AT-14**

**Net Weight: 27.89**

**Job#VIENNA-MGEM**

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

**Rm Hant**

Signature

*Rm Hant*

Month Day Year  
**12 18 06**

INT'L

15. International Shipments

Import to U.S.

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

**Roy Lloyd**

Signature

*Roy Lloyd*

Month Day Year  
**12 15 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Patricia Blackwell**

Signature

*Patricia Blackwell*

Month Day Year

**12 13 06**

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number NOT REQUIRED 2. Page 1 of 1 3. Emergency Response Phone 302 652-8999 4. Waste Tracking Number 907

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Phone: **757 445-8703 Attn: Rob Schonk**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
 Facility's Phone: **757-865-6070** U.S. EPA ID Number: **NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 301083**  
**P-63 Net Weight: 33740**  
**Job#VIENNA-MGEM**

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/Offeror's Printed/Typed Name: **Rm Hans** Signature: *[Signature]* Month Day Year: **12/15/06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: **Marlon Mitchell** Signature: *[Signature]* Month Day Year: **12/15/06**  
 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: \_\_\_\_\_ 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 hazardous materials covered by the manifest, except as noted in Item 17a  
 Printed/Typed Name: **Laura Adams** Signature: *[Signature]* Month Day Year: **12/15/06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**908**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

**01570**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301086**

**F45KUS 6**

**Net Weight: 18.83**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name  
**RM HANT**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

GENERATOR

INT'L

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  
**PAUL KELLER**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

TRANSPORTER

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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

DESIGNATED FACILITY

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year  
**12 15 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**909**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-8703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

**NONE**

1. **01570 Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301087**

**FKUS**

**Net Weight: 20.60**

**Job#VIENNA-MGEM**

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

*Rob Schonk*

Signature

*[Signature]*

Month Day Year  
**12 15 06**

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

*Allen W*

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

*Allen W*

Signature

*Allen W*

Month Day Year  
**12 15 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Robert Adams*

Signature

*[Signature]*

Month Day Year  
**12 15 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**910**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539**      **Transaction#: 306097**  
**P-72**      **Net Weight: 22.99**  
**Job# VIENNA-MGEM**

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: **RM HANT**      Signature: *[Signature]*      Month: **12** Day: **15** Year: **08**

15. International Shipments  Import to U.S.  Export from U.S.      Port of entry/exit:      Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: **John A Mullins**      Signature: *[Signature]*      Month: **12** Day: **15** Year: **08**

Transporter 2 Printed/Typed Name:      Signature:      Month:      Day:      Year:

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: **Kaurz Adams**      Signature: *[Signature]*      Month: **12** Day: **15** Year: **08**

GENERATOR  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**911**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23668  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 22-17  
P-77 Net Weight: 301101 Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **R M Hart** Signature *[Signature]* Month **12** Day **15** Year **06**

GENERATOR INT'L TRANSPORTER DESIGNATED FACILITY

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Harold h Shepherd** Signature *[Signature]* Month **12** Day **15** Year **06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **15** Year **06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

912

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone:

757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone:

757-865-6070

9a. 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.

1. *Q570*  
Non RCRA, Non DOT Regulated Soil contaminated with wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 30#103

T-11

Net Weight: 38160

19.08

Job# VIENNA-MGEM

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/Offor's Printed/Typed Name

*R M Hawk*

Signature

*R M Hawk*

Month Day Year  
12 15 06

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

*T. Sheppard*

Signature

*Terrance Sheppard*

Month Day Year  
12 15 06

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Kaurz Adams*

Signature

*K Adams*

Month Day Year  
12 15 06

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8899**

4. Waste Tracking Number  
**913**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
~~Degussa Trucking~~ **C + H**

U.S. EPA ID Number  
**DOT# 886050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23668  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

*ARIC 8*

**Net Weight:**

**Job# VIENNA-MGEM**

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  
**R M HART**

Signature  
*R M Hart*

Month Day Year  
**12 15 06**

INT'L

15. International Shipments  Import to U.S.  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  
**MURTEZA HAHOLI**

Signature  
*Murteza Haholi*

Month Day Year  
**12 15 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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

Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Signature  
*R Adams*

Signature  
*R Adams*

Month Day Year  
**12 15 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**514**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**19.52 Tons**

**U 5 3 2 4 8**

**Net Weight:**

**301117**

**Job#VIENNA-MGEM**

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

**R M Hunt**

Signature

*[Signature]*

Month Day Year

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**Julie Christian**

Signature

*[Signature]*

Month Day Year

**12 15 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Kaura Adams**

Signature

*[Signature]*

Month Day Year

**12 15 06**

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**515**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**  
Facility's Phone:

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**16**

**Net Weight:**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

**BM Hant**

Signature

**[Signature]**

Month Day Year  
**12 15 06**

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

**Robert Scott**

Signature

**[Signature]**

Month Day Year  
**12 15 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

**[Signature]**

Month Day Year  
**12 15 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**916**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 301127**

**14**

**Net Weight: 27.05**

**Job# VIENNA-MGEM**

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  
**R.M. Hunt**

Signature  
*[Signature]*

Month Day Year  
**12 15 05**

15. International Shipments  Import to U.S.  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  
**A. Cross**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Jackie Blackwell**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**917**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**  
Facility's Phone:

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539 Transaction#: 301132**  
**DDB6 Net Weight: 17.74**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **BM Hunt** Signature **[Signature]** Month **12** Day **15** Year **06**

INT'L

15. International Shipments  Import to U.S.  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 **PATRICK S. ABAD** Signature **[Signature]** Month **12** Day **15** Year **06**  
Transporter 2 Printed/Typed Name Signature Month Day Year

DESIGNATED FACILITY

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in item 17a  
Printed/Typed Name **Clare Adams** Signature **[Signature]** Month **12** Day **15** Year **06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**918**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23668**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301140**

**P-76**

**Net Weight: 24-53**

**Job#VIENNA-MGEM**

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

**Rm Hunt**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

INT'L

15. International Shipments

Import to U.S.

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

**BRUCE BUGG**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 1a

Printed/Typed Name

**Jackie Blackwell**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**919**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 301152**

**Net Weight: 18.80**

**Job# VIENNA-MGEM**

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

*RM Hunt*

Signature

*[Signature]*

Month Day Year  
**12 15 06**

INT'L

15. International Shipments

Import to U.S.

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

**BRIAN ELLIOTT**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**JACKIE BHATEWELL**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

<b>GENERATOR</b>	<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 662-8000</b>	4. Waste Tracking Number <b>970</b>			
	5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>			Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>				
Generator's Phone: <b>757 445-5703 Alt: Rob Schonk</b>								
6. Transporter 1 Company Name <b>Puryear Trucking</b>				U.S. EPA ID Number <b>DOT# 898050</b>				
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>				U.S. EPA ID Number <b>NOT REQUIRED</b>				
8. Designated Facility Name and Site Address <b>Bothel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>				U.S. EPA ID Number <b>NOT REQUIRED</b>				
Facility's Phone: <b>757-865-8070</b>								
<b>TRANSPORTER</b>	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
				No.	Type			
		1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>7</b>	<b>NONE</b>
		2.						
		3.						
	4.							
13. Special Handling Instructions and Additional Information  <b>Project# 110530      Transaction#: 30118-4</b> <b>4      Net Weight: 19.65</b> <b>Job# VIENNA-NGEM</b>								
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/Offor's Printed/Typed Name <b>RM Haro</b>				Signature <i>[Signature]</i>		Month Day Year <b>1/7/06</b>		
<b>INT'L</b>	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.: _____			
<b>TRANSPORTER</b>	16. Transporter Acknowledgment of Receipt of Materials							
	Transporter 1 Printed/Typed Name <b>Stephen E. Hooper Jr</b>				Signature <i>[Signature]</i>		Month Day Year <b>12/15/06</b>	
	Transporter 2 Printed/Typed Name				Signature		Month Day Year	
<b>DESIGNATED FACILITY</b>	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 hazardous materials covered by the manifest except as noted in Item 17a								
Printed/Typed Name				Signature		Month Day Year		

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8899**

4. Waste Tracking Number  
~~921~~ **921**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
Generator's Phone: 757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070  
Facility's Phone:**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539 Transaction#: 301158**  
**TZMAR Net Weight: 22.05**  
**Job#VIENNA-MGEM**

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 **R M Hambric** Signature *[Signature]* Month **12** Day **15** Year **06**

INT'L

15. International Shipments  Import to U.S.  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 **Ronald Hambric** Signature *[Signature]* Month **12** Day **15** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

DESIGNATED FACILITY

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **15** Year **06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**922**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#:** 301164  
**15**      **Net Weight:** 21.58  
**Job#VIENNA-MGEM**

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 **B. M. HART**      Signature **[Signature]**      Month **12** Day **15** Year **06**

15. International Shipments     Import to U.S.     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 **Rick Trostman**      Signature **[Signature]**      Month **12** Day **15** Year **06**

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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Laura Adams**      Signature **[Signature]**      Month **12** Day **15** Year **06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

**NOT REQUIRED**

1

302-652-8999

923

5. Generator's Name and Mailing Address

Generator's Site Address (if different than mailing address)

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

**Paradise Creek**

Generator's Phone: **757-445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

U.S. EPA ID Number

**Puryear Trucking**

**DOT# 896050**

7. Transporter 2 Company Name

U.S. EPA ID Number

**South Norfolk Trucking, Inc.**

**NOT REQUIRED**

8. Designated Facility Name and Site Address

U.S. EPA ID Number

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

301182

18

**Net Weight:**

21.35

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*B M Hart*

Signature

*[Signature]*

Month Day Year  
02 15 06

INT'L	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.:			
TRANSPORTER	16. Transporter Acknowledgment of Receipt of Materials				
	Transporter 1 Printed/Typed Name	Signature	Month	Day	Year
	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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*[Signature]*

Month Day Year

12 15 06

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: ~~NE-112-SL-1122~~  
2. Page 1 of 1  
3. Emergency Response Phone: ~~757-662-8224~~  
4. Waste Tracking Number: 924

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNFMA)**  
1510 Gilbert St., Norfolk, VA 23511-2737  
Generator's Site Address (if different than mailing address): **Paradise Creek**  
Generator's Phone: **757-445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 806050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill**  
100 North Park Lane, Hampton, VA 23066  
Facility's Phone: **757-865-8070** U.S. EPA ID Number: **NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539 Transactions# 301173**  
**P. S Z Net Weight: 21.41**  
**Job# VIENNA-MGEM**

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]* Signature: *[Signature]* Month: **11** Day: **15** Year: **06**

15. International Shipments  Import to U.S.  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: \_\_\_\_\_  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**925**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b> <i>01570</i>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301187**

**Net Weight: 14.33**

**Job#VIENNA-MGEM**

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

*R M Hart*

Signature

*[Signature]*

Month Day Year

*12 11 06*

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

*Liane Robinson*

Signature

*Liane Robinson*

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space  Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in item 17a

Printed/Typed Name

*Laura Adams*

Signature

*L Adams*

Month Day Year  
*12 15 06*

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1** 3. Emergency Response Phone  
**302-652-8999**

4. Waste Tracking Number  
**926**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757-445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name **Puryear Trucking** U.S. EPA ID Number **DOT# 896050**

7. Transporter 2 Company Name **South Norfolk Trucking, Inc.** U.S. EPA ID Number **NOT REQUIRED**

8. Designated Facility Name and Site Address **Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number **NOT REQUIRED**  
Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 301186  
AT-21 Net Weight: 21.33 Job#VIENNA-MGEM**

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/Offoror's Printed/Typed Name **Rob Schonk** Signature *[Signature]* Month Day Year

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Mark McLendon** Signature *[Signature]* Month Day Year **12 15 06**  
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) 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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Jackie Blackwell** Signature *[Signature]* Month Day Year **12 15 06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**927**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301191**

**P-69**

**Net Weight: 21.66**

**Job#VIENNA-MGEM**

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: **BM HANT**

Signature: *[Signature]*

Month Day Year  
**12 15 06**

INT'L

15. International Shipments  Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

*[Signature]*

*[Signature]*

**12 15 06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302.652.8999**

4. Waste Tracking Number  
**928**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 301200**  
**HBB 12 Net Weight: 16.91**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **Rm Hayes** Signature *[Signature]* Month **12** Day **15** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **Melvin L. Spore Sr.** Signature *[Signature]* Month **12** Day **15** Year **06**

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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **15** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**929**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking** U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.** U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

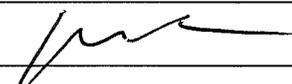
13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 301199**  
**Net Weight: 21.75**  
**Job#VIENNA-MGEM**

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/Offeror's Printed/Typed Name **R M Hans** Signature  Month **12** Day **15** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **Mark** Signature  Month **12** Day **15** Year **06**

Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

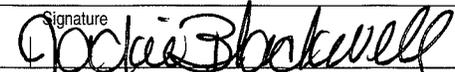
Manifest Reference Number: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Jackie Blackwell** Signature  Month **12** Day **15** Year **06**

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**930**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**  
U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**  
U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
U.S. EPA ID Number  
**NOT REQUIRED**  
Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539 P-68 Transaction#: 301204 Net Weight: 22.67 Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name **R M HUNT** Signature *[Signature]* Month **12** Day **15** Year **06**

GENERATOR

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter Signature (for exports only):  
Transporter 1 Printed/Typed Name **Mark Mitchell** Signature *[Signature]* Month Day Year  
Transporter 2 Printed/Typed Name Signature Month Day Year

TRANSPORTER INT'L

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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

DESIGNATED FACILITY

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **15** Year **06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

1

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**931**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b> <i>01570</i>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301206**

*T-10*

**Net Weight: 21.18**

**Job#VIENNA-MGEM**

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

*Rm Hart*

Signature

*[Signature]*

Month Day Year  
*12 15 06*

TRANSPORTER INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Material

Transporter 1 Printed/Typed Name

*L.R*

Signature

*L.R*

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in item 17a

Printed/Typed Name

*Laura Adams*

Signature

*[Signature]*

Month Day Year

*12 15 06*

GENERATOR

TRANSPORTER

DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>932</b>
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5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>	Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>	

6. Transporter 1 Company Name <b>Puryear Trucking</b>	U.S. EPA ID Number <b>DOT# 896050</b>
--	--

7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
--	---

8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23668</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
Facility's Phone: <b>757-865-6070</b>	

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information	
<b>Project#116539</b>	<b>Transaction#: 301210</b>
<b>RDR #1</b>	<b>Net Weight: 26.63 TONS</b>
	<b>Job#VIENNA-MGEM</b>

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 <b>B MITTANT</b>	Signature <i>[Signature]</i>	Month Day Year <b>12 15 06</b>
--	---------------------------------	-----------------------------------

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name <b>RANDALL D. ROGERSON</b>	Signature <i>[Signature]</i>	Month Day Year <b>12 15 06</b>
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name <b>Kaura Adams</b>	Signature <i>[Signature]</i>	Month Day Year <b>12 15 06</b>
--	---------------------------------	-----------------------------------

GENERATOR  
 INT'L  
 TRANSPORTER  
 DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8099</b>	4. Waste Tracking Number <b>933</b>
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5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>	Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>	

6. Transporter 1 Company Name <b>Puryear Trucking</b>	U.S. EPA ID Number <b>DCTM 886050</b>
--	--

7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
--	---

8. Designated Facility Name and Site Address <b>Bothal Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
Facility's Phone: <b>757-865-6070</b>	

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DDT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# **116539**      Transaction# **301231**

Net Weight: **19.04**      Job# **VIENNA-MGEM**

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: **R M Hart**      Signature: *[Signature]*      Month Day Year: **12/15/06**

15. International Shipments     Import to U.S.     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	Signature	Month	Day	Year
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: \_\_\_\_\_      Signature: *[Signature]*

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

2. Page 1 of 1

3. Emergency Response Phone

4. Waste Tracking Number

NOT REQUIRED

1

302 652-8999

934

5. Generator's Name and Mailing Address

Generator's Site Address (if different than mailing address)

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

U.S. EPA ID Number

Puryear Trucking

DOT# 896050

7. Transporter 2 Company Name

U.S. EPA ID Number

South Norfolk Trucking, Inc.

NOT REQUIRED

8. Designated Facility Name and Site Address

U.S. EPA ID Number

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No.

Type

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 301223

AT-17

Net Weight: 20.81

Job# VIENNA-MGEM

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

RM Hart

Signature

[Signature]

Month Day Year

12 15 06

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

Robert Carpenter

Signature

[Signature]

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in item 17a

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year

12 15 06

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**938**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 301226**  
**AT-14 Net Weight: 21.12 Job#VIENNA-MGEM**

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 **RM Hart** Signature *[Signature]* Month **12** Day **15** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Rpy Lloyd** Signature *[Signature]* Month **12** Day **15** Year **06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Adam Adams** Signature *[Signature]* Month **12** Day **15** Year **06**

GENERATOR  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**936**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking** U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.** U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number  
**NOT REQUIRED**  
Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 301235**  
**P-63 Net Weight: 38140 19.07**  
**Job#VIENNA-MGEM**

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 **RM Harst** Signature *[Signature]* Month Day Year **12/15/06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **MARLON MITCHELL** Signature *[Signature]* Month Day Year **12/15/06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Leura Adams** Signature *[Signature]* Month Day Year **12/15/06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**937**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301237**

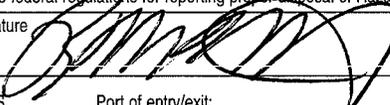
**P-72**

**Net Weight: 21.29**

**Job#VIENNA-MGEM**

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  
**R M Harris**

Signature  


Month Day Year  
**12 15 06**

15. International Shipments  Import to U.S.  Export from U.S.

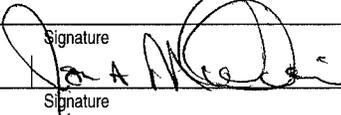
Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
**SON A Mullins**

Signature  


Month Day Year  
**12 15 06**

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:

17b. Alternate Facility (or Generator)

U.S. EPA ID Number

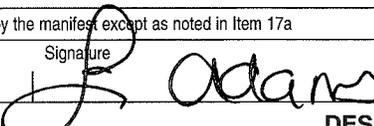
Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Calvin Adams**

Signature  


Month Day Year  
**12 15 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**938**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539 Transaction#: 301240**  
**T-11 Net Weight: 36920 78.46 Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **R M Hart** Signature *[Signature]* Month **12** Day **15** Year **06**

GENERATOR

INT'L

15. International Shipments  Import to U.S.  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 **T. Sheppard** Signature *[Signature]* Month **12** Day **15** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

DESIGNATED FACILITY

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **15** Year **06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**939**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301242**

**P-77**

**Net Weight:**

**22.40**

**Job#VIENNA-MGEM**

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

**R M HART**

Signature

**[Signature]**

Month Day Year  
**12/15/06**

INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**Harold L Shepherd**

Signature

**Harold L Shepherd**

Month Day Year

**12/15/06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

**[Signature]**

Month Day Year

**12/15/06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

940

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 301246

Fiskus 6

Net Weight: 17.21

Job#VIENNA-MGEM

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

R M Hart

Signature

[Signature]

Month Day Year  
12 15 06

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

Paul Keller

Signature

[Signature]

Month Day Year

12 15 06

Transporter 2 Printed/Typed Name

Signature

17. Discrepancy

17a. Discrepancy Indication Space  Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year  
12 15 06

GENERATOR

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**941**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539 Transaction#: 301258**  
**Fiskus Net Weight: 21.44 Job#VIENNA-MGEM**

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 **Rm Hunt** Signature *[Signature]* Month **12** Day **15** Year **06**

TRANSPORTER

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Allen W** Signature *[Signature]* Month **12** Day **15** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

DESIGNATED FACILITY

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Kara Adams** Signature *[Signature]* Month **12** Day **15** Year **06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**

3. Emergency Response Phone  
**302.652.8999**

4. Waste Tracking Number  
**942**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539 Transaction#: 18.64 TONS**  
**U 53 248 Net Weight: 301252 Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **RM Hurst** Signature *[Signature]* Month **12** Day **15** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **J. L. Christian** Signature *[Signature]* Month **12** Day **15** Year **06**  
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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **15** Year **06**

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**943**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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. Other

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 300328**

**16**

**Net Weight: 22.76**

**Job#VIENNA-MGEM**

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  
**RM HANT**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
**Robert Scott**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**JACKIE Blackwell**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302-652-8999</b>	4. Waste Tracking Number <b>944</b>
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5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>	Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>
--	---

Generator's Phone: <b>757-445-6703 Attn: Rob Schonk</b>	U.S. EPA ID Number <b>DOT# 896050</b>
---	--

6. Transporter 1 Company Name <del>Puryear Trucking</del> <b>C 3 H</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
---	---

7. Transporter 2 Company Name <del>South Norfolk Trucking, Inc.</del>	U.S. EPA ID Number <b>NOT REQUIRED</b>
--	---

8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
--	---

Facility's Phone: <b>757-865-6070</b>	
---------------------------------------	--

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information <b>Project#116539</b> <b>Transaction#: 381261</b> <b>14</b> <b>Net Weight: 23.73</b> <b>Job#VIENNA-MGEM</b>
---

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: <b>B.M. HANT</b> Signature: <i>[Signature]</i> Month: <b>12</b> Day: <b>15</b> Year: <b>06</b>

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: <b>Q. C. [Signature]</b> Signature: <i>[Signature]</i> Month: <b>12</b> Day: <b>15</b> Year: <b>06</b>
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:      U.S. EPA ID 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 hazardous materials covered by the manifest except as noted in Item 17a
Printed/Typed Name: <b>Laura Adams</b> Signature: <i>[Signature]</i> Month: <b>12</b> Day: <b>15</b> Year: <b>06</b>

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**948**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301267**

**DD B6**

**Net Weight:**

**17.64**

**Job#VIENNA-MGEM**

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

**BM HART**

Signature

**[Signature]**

Month Day Year  
**12 15 06**

INT'L

15. International Shipments

Import to U.S.

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

**PATRICK S. ADAMS**

Signature

**[Signature]**

Month Day Year  
**12 15 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year  
**12**

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Patrick Adams**

Signature

**[Signature]**

Month Day Year  
**12 15 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1** 3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**946**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301274**

**D 50**

**Net Weight:**

**21.76**

**Job#VIENNA-MGEM**

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

**RM Adams**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

INT'L

15. International Shipments

Import to U.S.

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

**FRED SFORZA**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**947**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**

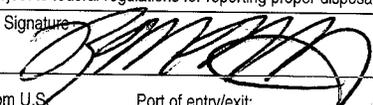
**Transaction#: 301272**

**P-76**

**Net Weight: 22.31**

**Job# VIENNA-MGEM**

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 **R M Hayes** Signature  Month **12** Day **15** Year **06**

GENERATOR  
INTL  
TRANSPORTER  
DESIGNATED FACILITY

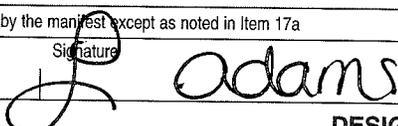
15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **BRUCE BUGG** Signature  Month **12** Day **15** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Kaura Adams** Signature  Month **12** Day **15** Year **06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**948**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#: 301284**  
**P-73**      **Net Weight: 24.19 TONS**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name: **R M Harris**      Signature: *[Signature]*      Month: **12** Day: **15** Year: **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

15. International Shipments  Import to U.S.  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: **Steve Winch**      Signature: *[Signature]*      Month: **12** Day: **15** Year: **06**

Transporter 2 Printed/Typed Name: \_\_\_\_\_      Signature: \_\_\_\_\_      Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: **Cher Adams**      Signature: *[Signature]*      Month: **12** Day: **15** Year: **06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**949**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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. Special Handling Instructions and Additional Information

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301336**

**3**

**Net Weight:**

**19.22**

**Job#VIENNA-MGEM**

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/Ofieror's Printed/Typed Name

*R M H*

Signature

*[Signature]*

Month Day Year  
**12 15 06**

INT'L

15. International Shipments

Import to U.S.

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

**BRIAN Elliott**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

Transporter 2 Printed/Typed Name

Signature

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Chimer Adams**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 852-8909**

4. Waste Tracking Number  
**950**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-8703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 898050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-855-0370**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 110530 Transaction#: 301289**  
**4 Net Weight: 20.38**  
**Job#VIENNA-NGEM**

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: **JM [Signature]** Signature: **[Signature]** Month: **12** Day: **15** Year: **106**

GENERATOR

TRANSPORTER

DESIGNATED FACILITY

15. International Shipments  Import to U.S.  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: \_\_\_\_\_  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**957**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

No.

Type

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301293**

**T2 HAN**

**Net Weight: 17.55**

**Job#VIENNA-MGEM**

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

*R M Hunt*

Signature

*[Signature]*

Month Day Year  
**12 15 06**

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

*Ronald Hambric*

Signature

*[Signature]*

Month Day Year

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Jocice Buckwell*

Signature

*[Signature]*

Month Day Year

**2 15 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**952**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539**      **Transaction#: 303317**  
**15**      **Net Weight: 20.86**      **Job# VIENNA-MGEM**

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 **B. MITCHELL**      Signature *[Signature]*      Month **12** Day **15** Year **06**

15. International Shipments       Import to U.S.       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 **Rich Trotman**      Signature *[Signature]*      Month **12** Day **15** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_      Signature \_\_\_\_\_      Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space       Quantity       Type       Residue       Partial Rejection       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 hazardous materials covered by the manifest, except as noted in Item 17a  
Printed/Typed Name **Laura Adams**      Signature *[Signature]*      Month **12** Day **15** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 852-8900**

4. Waste Tracking Number  
**953**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (ONRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schenk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23068**  
Facility's Phone: **757-968-8070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM

9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

No. Type

20

T

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information  
**Project# 116839 Transaction#: 301296  
P-52 Net Weight: 21.26  
Job# VIENNA-WGEM**

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  
**A M HART**

Signature  
*[Signature]*

Month Day Year  
**12/15/06**

GENERATOR

INT'L

15. International Shipments  Import to U.S.  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  
**John M. Hart**

Signature  
*[Signature]*

Month Day Year  
**12/15/06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**John M. Hart**

Signature  
*[Signature]*

Month Day Year

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**984**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#:** **301303**  
**18**      **Net Weight:** **19.29**      **Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **Rm Hart**      Signature **[Signature]**      Month Day Year **12/15/06**

15. International Shipments     Import to U.S.     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 **[Signature]**      Signature **[Signature]**      Month Day Year **12/15/06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_      Signature \_\_\_\_\_      Month Day Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space     Quantity     Type     Residue     Partial Rejection     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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **[Signature]**      Signature **[Signature]**      Month Day Year **12/15/06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**955**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301301**

**0-7**

**Net Weight: 17.18**

**Job#VIENNA-MGEM**

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 **BM HART** Signature **[Signature]** Month **12** Day **15** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **Diane Robinson** Signature **[Signature]** Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in item 17a

Printed/Typed Name **Jackie Blackwell** Signature **[Signature]** Month **12** Day **15** Year **06**

GENERATOR

TRANSPORTER INTL

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number

**986**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301321**

**P-69**

**Net Weight:**

**21.85**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**BM Hunt**

Signature

**[Signature]**

Month Day Year  
**12/15/06**

15. International Shipments

Import to U.S.

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

Signature

Month Day Year

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

**Laura Adams**

**[Signature]**

Month Day Year  
**12/15/06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

1

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**987**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

*11*

**Transaction#:**

*301322*

**Net Weight:**

*19.12*

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*Bm Hart*

Signature

*[Signature]*

Month Day Year

*12/15/06*

INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

*Marie*

Signature

*[Signature]*

Month Day Year

*12/15/06*

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Dee Blackwell*

Signature

*[Signature]*

Month Day Year

*12/15/06*

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**958**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 301326**  
**HBB12 Net Weight: 18.61**  
**Job#VIENNA-MGEM**

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 **BM HART** Signature *[Signature]* Month **12** Day **15** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Melvin H. Glover SR.** Signature *[Signature]* Month **12** Day **15** Year **06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **15** Year **06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**959**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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. Special Handling Instructions and Additional Information

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 301325**  
**P-68 Net Weight: 22.94**  
**Job#VIENNA-MGEM**

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  
**RM Hart**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
**Mark M. Schell**

Signature  
*[Signature]*

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Sackie Blackwell**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**960**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

NONE

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

DT

20

T

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301333**

**T-10**

**Net Weight: 17.91**

**Job#VIENNA-MGEM**

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  
**RMHART**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:  
Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Material

Transporter 1 Printed/Typed Name

*L.R.*

Signature  
*L.R.*

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
*Laura Adams*

Signature  
*L Adams*

Month Day Year  
**12 15 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**961**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301334**

**RDR-1**

**Net Weight:**

**24.50 TONS**

**Job#VIENNA-MGEM**

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

*Rm Hany*

Signature

*Rm Hany*

Month Day Year

**12 15 06**

15. International Shipments

Import to U.S.

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

**RANDALL D. ROCKERSON**

Signature

*Randall D. Rocerson*

Month Day Year

**12 15 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*Laura Adams*

Month Day Year

**12 15 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**962**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-5703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 898750**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23866**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transactions#: 301340**

**AT**

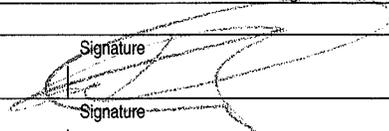
**Net Weight: 20.18**

**Job# VIENNA-MIGEM**

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/Offor's Printed/Typed Name **Ron Hart** Signature  Month **12** Day **15** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

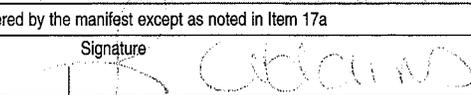
16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Robert Carpenter** Signature  Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection  
Manifest Reference Number: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **William Adams** Signature  Month **12** Day **15** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of 1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

963

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No.

Type

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 301341

AT-14

Net Weight: 21.26

Job#VIENNA-MGEM

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/Offor's Printed/Typed Name

B M Hany

Signature

[Signature]

Month Day Year  
12 15 06

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

RAY LLOYD

Signature

Ray Lloyd

Month Day Year  
12 15 06

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year  
12 15 06

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**964**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**T-11**

**Net Weight: 34060**

**1703**

**Job#VIENNA-MGEM**

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  
**RM HUNT**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

INT'L

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
**T. Sheppard**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

Transporter 2 Printed/Typed Name

Signature

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Laura Adams**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8889**

4. Waste Tracking Number  
**765**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St, Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6700 Attn: Rob Schont**

6. Transporter 1 Company Name  
**Purecar Trucking**

U.S. EPA ID Number  
**DOT# 806050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23066  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

9a. 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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

Project# **116539**

Transaction#:

**301346**

Net Weight:

**15.91**

Job# **VIENNA-MGEM**

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

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

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**966**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301354**

**P-72**

**Net Weight: 17.40**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*Rob Schonk*

Signature

*Rob Schonk*

Month Day Year

12 15 06

GENERATOR

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

*John A. Mellins*

Signature

*John A. Mellins*

Month Day Year

12 15 06

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*John R. Adams*

Signature

*John R. Adams*

Month Day Year

12 15 06

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

967

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 301356

P-63

Net Weight: 16.84

Job#VIENNA-MGEM

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/Offoror's Printed/Typed Name

Rm HART

Signature

[Signature]

Month Day Year  
12 15 06

15. International Shipments

Import to U.S.

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

MARLON MITCHELL

Signature

[Signature]

Month Day Year  
12 15 06

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year  
12 15 06

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**968**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301358**

**P-77**

**Net Weight:**

**20.06**

**Job#VIENNA-MGEM**

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

*R M Hart*

Signature

*[Signature]*

Month Day Year  
**12 15 06**

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

**Harold L Shepherd**

Signature

*Harold L Shepherd*

Month Day Year  
**12 15 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Jackie Blackwell**

Signature

*Jackie Blackwell*

Month Day Year  
**12 15 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302-652-8999**

4. Waste Tracking Number

**969**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301359**

**Fiskus 6**

**Net Weight: 16.32**

**Job#VIENNA-MGEM**

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/Offoror's Printed/Typed Name

**RM HART**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**PAUL KELLER**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**970**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

*10-29-06*

*U 53248*

**Net Weight:**

*301366*

**Job#VIENNA-MGEM**

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

*RMHART*

Signature

*[Signature]*

Month Day Year  
*12 15 06*

INT'L

15. International Shipments

Import to U.S.

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

*Mike Chestnut*

Signature

*[Signature]*

Month Day Year

*12 15 06*

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Karen Adams*

Signature

*[Signature]*

Month Day Year

*12 15 06*

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

971

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

DT

20

T

NONE

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

301364

FISK 5

**Net Weight:**

17-29

**Job#VIENNA-MGEM**

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

R M Hart

Signature

*[Signature]*

Month Day Year  
12 15 06

15. International Shipments

Import to U.S.

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

Allen W

Signature

*[Signature]*

Month Day Year

12 15 06

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:

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 hazardous materials covered by the manifest except as noted in item 17a

Printed/Typed Name

Laura Adams

Signature

*[Signature]*

Month Day Year

12 15 06

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**972**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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. Special Handling Instructions and Additional Information

1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**DDB 6**

**Net Weight: 13.91**

**Job#VIENNA-MGEM**

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

*R. M. Adams*

Signature

*[Signature]*

Month Day Year  
**12/15/06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

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

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*[Signature]*

Month Day Year  
**12/15/06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of: **1**  
 3. Emergency Response Phone: **302 652-8999**  
 4. Waste Tracking Number: **973**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information:  
**Project# 116539**      **Transaction#: 301370**  
**14**      **Net Weight: 20.70**  
**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name: **R.M. Hunt** Signature: *[Signature]* Month: **12** Day: **15** Year: **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: **A. Cross** Signature: *[Signature]* Month: **12** Day: **15** Year: **06**

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: **Adam Adams** Signature: *[Signature]* Month: **9** Day: **15** Year: **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**974**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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. Special Handling Instructions and Additional Information

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301372**

**P-76**

**Net Weight:**

**20.93**

**Job#VIENNA-MGEM**

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

**BM HART**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

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

**BRUCE BOGG**

Signature

*[Signature]*

Month Day Year

**12 15 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Keith Adams**

Signature

*[Signature]*

Month Day Year

**12 15 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**975**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**301378**

**P-50**

**Net Weight:**

**20.68**

**Job# VIENNA-MGEM**

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 **Rob Schonk** Signature **[Signature]** Month **12** Day **15** Year **00**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter Signature (for exports only):  
Transporter 1 Printed/Typed Name **FRED SFORZA** Signature **[Signature]** Month Day Year  
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) 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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Adam Adams** Signature **[Signature]** Month **12** Day **15** Year **02**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 852-8000**

4. Waste Tracking Number  
**976**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703** Attn: **Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 806050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

Project# **118530**

Transaction#:

**4**

Net Weight:

**18.87**

Job# **VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R.M. HART**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

INT'L

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

Port of entry/exit:

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**Stephen S. Hooper Sr**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Robert Williams**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID# Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**977**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

GENERATOR

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539  
P-73**

**Transaction#: 301385  
Net Weight: 20.25 Tons**

**Job#VIENNA-MGEM**

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 **R M HUNT** Signature *[Signature]* Month **12** Day **15** Year **06**

TRANSPORTER

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Gary W. Coch** Signature *[Signature]* Month **12** Day **15** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

DESIGNATED FACILITY

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Laurie Adams** Signature *[Signature]* Month **12** Day **15** Year **06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**978**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539 Transaction#:**  
**T-2 Net Weight: 18.42 Job#VIENNA-MGEM**

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 **RM Hunt** Signature **[Signature]** Month **12** Day **18** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **Ronald Hambric** Signature Month Day Year  
Transporter 2 Printed/Typed Name Signature Month Day Year

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Laura Adams** Signature **[Signature]** Month **12** Day **15** Year **06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**979**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 301393  
D-52 Net Weight: 21.34 Job#VIENNA-MGEM**

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 **R M Harris** Signature **[Signature]** Month **12** Day **15** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **JOHN CARROLL** Signature **[Signature]** Month **12** Day **15** Year **06**

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) \_\_\_\_\_ 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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Kevin Adams** Signature **[Signature]** Month **12** Day **15** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**980**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-8703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301388**

**18**

**Net Weight: 18,86**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **R M Hunt** Signature **[Signature]** Month **12** Day **15** Year **06**

15. International Shipments  Import to U.S.  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]** Signature **[Signature]** Month **12** Day **15** Year **06**

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: \_\_\_\_\_

17b. Alternate Facility (or Generator) \_\_\_\_\_ 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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Laura Adams** Signature **[Signature]** Month **12** Day **15** Year **06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**981**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. 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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**07**

**Net Weight:**

**14.82**

**Job#VIENNA-MGEM**

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

**RMHART**

Signature

**[Signature]**

Month Day Year

**12 15 06**

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

Port of entry/exit:

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**Diane Robinson**

Signature

**Diane L. Robinson**

Month Day Year

**12 15 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

**[Signature]**

Month Day Year

**12 15 06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**987**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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. Special Handling Instructions and Additional Information

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**15**

**Net Weight:**

**18.65**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**Rob Hart**

Signature

*[Signature]*

Month Day Year  
**12/15/06**

15. International Shipments

Import to U.S.

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

**Rick Trotman**

Signature

*[Signature]*

Month Day Year

**12/15/06**

Transporter 2 Printed/Typed Name

Signature

17. Discrepancy

17a. Discrepancy Indication Space  Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year

**12/15/06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**983**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

NONE

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301399**

**D-69**

**Net Weight: 20.29**

**Job#VIENNA-MGEM**

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  
**RM HART**

Signature  
*[Signature]*

Month Day Year  
**12 10 06**

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

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Laura Adams**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

984

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
~~XXXXXXXXXX~~

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**AT-21**

**Net Weight:**

**Job#VIENNA-MGEM**

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

*Rm Hagan*

Signature

*Rm Hagan*

Month Day Year  
**12 15 06**

INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**MARK McLENDON**

Signature

*Mark McLendon*

Month Day Year

**12 15 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Jackie Blackwell**

Signature

*Jackie Blackwell*

Month Day Year

**12 15 06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
~~985~~ **985**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

NONE

1. **Non RCRA, Non DOT Regulated Soil  
contaminated with Wood debris**

DT

20

T

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 301406

AT-21

Net Weight: 23.4

Job#VIENNA-MGEM

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

Rm Adams

Signature

[Signature]

Month Day Year  
12 15 06

INT'L

15. International Shipments

Import to U.S.

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

MARK McLEOD

Signature

[Signature]

Month Day Year  
12 15 06

Transporter 2 Printed/Typed Name

Signature

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Leann Adams

Signature

[Signature]

Month Day Year  
12 15 06

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1** 3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**986**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name **Puryear Trucking** U.S. EPA ID Number **DOT# 896050**

7. Transporter 2 Company Name **South Norfolk Trucking, Inc.** U.S. EPA ID Number **NOT REQUIRED**

8. Designated Facility Name and Site Address **Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number **NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 301410**  
**P-68 Net Weight: 21.19** **Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **RMITTANT** Signature *[Signature]* Month Day Year **12 15 06**

GENERATOR

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

INT'L

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **MARK MITCHELL** Signature \_\_\_\_\_ Month Day Year \_\_\_\_\_  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month Day Year \_\_\_\_\_

TRANSPORTER

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection  
Manifest Reference Number: \_\_\_\_\_

DISCREPANCY

17b. Alternate Facility (or Generator) \_\_\_\_\_ U.S. EPA ID Number \_\_\_\_\_  
Facility's Phone: \_\_\_\_\_

DESIGNATED FACILITY

17c. Signature of Alternate Facility (or Generator) \_\_\_\_\_ Month Day Year \_\_\_\_\_

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature *[Signature]* Month Day Year **12 15 06**

DESIGNATED FACILITY TO GENERATOR

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**987**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#:**

**16**      **Net Weight:**

**Job#VIENNA-MGEM**

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  
**B.M. HART**      Signature  
*[Signature]*      Month **12** Day **15** Year **06**

15. International Shipments     Import to U.S.     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  
**Robert Scott**      Signature  
*[Signature]*      Month **12** Day **15** Year **06**

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: \_\_\_\_\_

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 hazardous materials covered by the manifest, except as noted in Item 17a

Printed/Typed Name  
**John Adams**      Signature  
*[Signature]*      Month **12** Day **15** Year **06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**988**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**Net Weight:**

**21.37**

**Job# VIENNA-MGEM**

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

*RMITANT*

Signature

*[Signature]*

Month Day Year

**12 15 06**

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]*

Signature

*[Signature]*

Month Day Year

**12 15 06**

Transporter 2 Printed/Typed Name

Signature

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*John Adams*

Signature

*[Signature]*

Month Day Year

**12 15 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

989

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. 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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#:

HBB12

Net Weight:

16.84

Job#VIENNA-MGEM

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

R. M. Hantz

Signature

[Signature]

Month Day Year 12 15 06

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

Robin L. Spore SR

Signature

[Signature]

Month Day Year 12 11 06

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Carm Adams

Signature

[Signature]

Month Day Year 12 15 06

GENERATOR

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**990**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil  
contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**301424**

**Net Weight:**

**16.13**

**Job# VIENNA-MGEM**

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

**R M HART**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

TRANSPORTER INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**BRIAN Elliott**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space  Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year  
**12 15 06**

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8899**

4. Waste Tracking Number  
**792**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 889050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23060**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-835-0070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

Project# **116539**

Transaction#:

Net Weight: **15.81**

Job# **VIENNA-MGEM**

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/Offor's Printed/Typed Name

Signature

Month Day Year

*RM H...*

*[Signature]*

**12/15/00**

INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

*[Signature]*

*[Signature]*

**12/15/00**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**993**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-8070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

*Isicks 6*

**Net Weight: 16.20**

**Job#VIENNA-MGEM**

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  
**BM HART**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:  
Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
**PAUL KELLER**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Adams**

Signature  
*[Signature]*

Month Day Year  
**12 15 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**995**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address

U.S. EPA ID Number  
**NOT REQUIRED**

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

Facility's Phone: **757-865-6070**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

*FUSK 5*

**Net Weight: 17.75**

**Job#VIENNA-MGEM**

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

*RM HART*

*[Signature]*

*12 15 06*

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

*ALLEN W*

*Allen W*

*12 15 06*

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

*Laura Adams*

*[Signature]*

*12 15 06*

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**996**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-8703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539      Transaction#: 301448**  
**HBB12      Net Weight: 16.36      Job# VIENNA-MGEM**

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 **BM Hart** Signature *[Signature]* Month **12** Day **16** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Diane L Robinson** Signature *[Signature]* Month **12** Day **16** Year **06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Cara Adams** Signature *[Signature]* Month **12** Day **16** Year **06**

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

997  
997

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number NOT REQUIRED 2. Page 1 of 1 3. Emergency Response Phone 302.652.8999 4. Waste Tracking Number 997

5. Generator's Name and Mailing Address: Commander, Navy Region Mid-Atlantic (CNRMA), 1510 Gilbert St., Norfolk, VA 23511-2737. Generator's Site Address (if different than mailing address): Paradise Creek. Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name: Puryear Trucking. U.S. EPA ID Number: DOT# 896050

7. Transporter 2 Company Name: South Norfolk Trucking, Inc. U.S. EPA ID Number: NOT REQUIRED

8. Designated Facility Name and Site Address: Bethel Sanitary Landfill, 100 North Park Lane, Hampton, VA 23666. U.S. EPA ID Number: NOT REQUIRED. Facility's Phone: 757-865-6070

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information: Project#116539 Transaction#: 301443 Net Weight: 14.45 Job#VIENNA-MGEM

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: B M HUNT Signature: [Signature] Month: 12 Day: 16 Year: 06

15. International Shipments:  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials: Transporter 1 Printed/Typed Name: P. S. ABAD Signature: [Signature] Month: 12 Day: 16 Year: 06

17. Discrepancy: 17a. Discrepancy Indication Space:  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a. Printed/Typed Name: Laura Adams Signature: [Signature] Month: 12 Day: 15 Year: 06

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**998**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

2.				
3.				
4.				

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#:** **301446**  
**16**      **Net Weight:** **19.73**      **Job#VIENNA-MGEM**

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  
**BMHART**

Signature  
*[Signature]*

Month Day Year  
**12/16/06**

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit: \_\_\_\_\_  
Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
**Robert Scott**

Signature  
*[Signature]*

Month Day Year  
**12/16/06**

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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Adams**

Signature  
*[Signature]*

Month Day Year  
**12/16/06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

1

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**999**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301457**

**17.77 TONS**

**U 83 248**

**Net Weight:**

**Job#VIENNA-MGEM**

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

**RM Hart**

Signature

**RM Hart**

Month Day Year

**12 16 06**

15. International Shipments

Import to U.S.

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

**Luke Christie**

Signature

**LC**

Month Day Year

**12 14 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

**Laura Adams**

Month Day Year

**12 16 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1000**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

NONE

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

DT

20

T

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:** 301458

**Net Weight:** 19.82

**Job#VIENNA-MGEM**

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  
**R M Hume**

Signature  
*R M Hume*

Month Day Year  
**12/16/06**

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

Port of entry/exit:  
Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
**Rich Trotman**

Signature  
*Rich Trotman*

Month Day Year  
**12/16/06**

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Kaura Adams**

Signature  
*K Adams*

Month Day Year  
**12/16/06**

GENERATOR

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8000</b>	4. Waste Tracking Number <b>1001</b>
-------------------------------------	---	--------------------------	--	---

5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (NRMMA) 1510 Gilbert St, Norfolk, VA 23513-2737</b>	Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>
Generator's Phone: <b>757 445-5700 Attn: Rob Schenk</b>	

6. Transporter 1 Company Name <b>Puryear Trucking</b>	U.S. EPA ID Number <b>DOT# 686050</b>
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
8. Designated Facility Name and Site Address <b>Bothel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
Facility's Phone: <b>757-865-8070</b>	

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 110530      Transaction#: 301453**

**14      Net Weight: 20.85**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name: **SMH/T**      Signature: *[Signature]*      Month: **12** Day: **12** Year: **06**

TRANSPORTER

15. International Shipments     Import to U.S.     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: \_\_\_\_\_    Signature: \_\_\_\_\_    Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Transporter 2 Printed/Typed Name: \_\_\_\_\_    Signature: \_\_\_\_\_    Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space     Quantity     Type     Residue     Partial Rejection     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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: \_\_\_\_\_    Signature: \_\_\_\_\_    Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8886**

4. Waste Tracking Number  
**1002**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schork**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Pureyear Trucking**

U.S. EPA ID Number  
**DOT# 696050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**OT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

Project# **118530**

Transaction#:

**301452**

Net Weight:

**16.52**

**JOB/VIENNA-AGEM**

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

**KIM HAIN**

Signature

*[Signature]*

Month Day Year

15. International Shipments  Import to U.S.  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

Signature

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

958/1003

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
~~958~~

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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. Special Handling Instructions and Additional Information

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

DT

20

T

NONE

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Special Handling Instructions and Additional Information
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		DT	20	T	NONE
2.						
3.						
4.	3					

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

301456

**Net Weight:**

16.65

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

R m Hunt

Signature

*[Signature]*

12/16/06

Month Day Year

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

BRIAN Elliott

Signature

*[Signature]*

Month Day Year

12/16/06

Transporter 2 Printed/Typed Name

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Karla Adams

Signature

*[Signature]*

Month Day Year

12/16/06

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1004**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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. Special Handling Instructions and Additional Information

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301457**

**Net Weight:**

**18.87**

**Job#VIENNA-MGEM**

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/Offoror's Printed/Typed Name

*Rm Hane*

Signature

*[Signature]*

Month Day Year

**12/16/06**

15. International Shipments  Import to U.S.  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

*Mark*

Signature

*[Signature]*

Month Day Year

**12/18/06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*[Signature]*

Month Day Year

**12/16/06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of **1**  
 3. Emergency Response Phone: **302 652-8999**  
 4. Waste Tracking Number: **1005**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information:  
**Project#116539**      **Transaction#: 301461**  
**18**      **Net Weight: 18-36**      **Job#VIENNA-MGEM**

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: **RM HART** Signature: *[Signature]* Month: **12** Day: **16** Year: **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: **KW FALLS** Signature: *[Signature]* Month: **12** Day: **16** Year: **06**  
 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: \_\_\_\_\_

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 hazardous materials covered by the manifest, except as noted in Item 17a  
 Printed/Typed Name: **Hourie Adams** Signature: *[Signature]* Month: **12** Day: **16** Year: **06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8000**

4. Waste Tracking Number  
**1006**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-8703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bothel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# **116509**

Transaction# **301463**

Net Weight: **16.03**

Job# **VIENNA-MGEM**

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  
**R. M. Hart**

Signature  
*[Signature]*

Month Day Year  
**12/16/06**

GENERATOR

INT'L

15. International Shipments  Import to U.S.  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

Transporter 2 Printed/Typed Name Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name Signature

Month Day Year

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302.652.8999**

4. Waste Tracking Number

**1007**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

*R-69*

**Transaction#:**

*301465*

**Net Weight:**

*18.39*

**Job#VIENNA-MGEM**

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

*R M Harts*

Signature

*R M Harts*

Month Day Year

*12 16 06*

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

TRANSPORTER INT'L

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

*Monette Madison*

Signature

*Monette Madison*

Month Day Year

*12 16 06*

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Michael Adams*

Signature

*Michael Adams*

Month Day Year

*12 16 06*

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>1008</b>		
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>		Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>				
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>						
6. Transporter 1 Company Name <b>Puryear Trucking</b>		U.S. EPA ID Number <b>DOT# 896050</b>				
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>				
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>				
Facility's Phone: <b>757-865-6070</b>						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
	2.					
	3.					
4.						
13. Special Handling Instructions and Additional Information  <b>Project#116539</b> <b>Transaction#: 301464</b> <i>P-76</i> <b>Net Weight: 2113</b> <span style="float: right;"><b>Job#VIENNA-MGEM</b></span>						
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 <i>BM Hart</i>		Signature <i>[Signature]</i>		Month <i>12</i>	Day <i>16</i>	
Year <i>06</i>						
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 <i>BRUCE BUGG</i>		Signature <i>[Signature]</i>		Month <i>12</i>	Day <i>16</i>	
Transporter 2 Printed/Typed Name		Signature <i>[Signature]</i>		Year <i>06</i>		
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 hazardous materials covered by the manifest except as noted in Item 17a						
Printed/Typed Name <i>Laura Adams</i>		Signature <i>[Signature]</i>		Month <i>12</i>	Day <i>16</i>	
				Year <i>06</i>		

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1009

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project# 116539

Transaction# 381429

P-73

Net Weight: 19.83 tons

Job# VIENNA-MGEM

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/Offor's Printed/Typed Name

BM Adams

Signature

[Signature]

Month Day Year

12/16/06

15. International Shipments

Import to U.S.

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

Gary Wloch

Signature

[Signature]

Month Day Year

12/16/06

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:

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 hazardous materials covered by the manifest, except as noted in Item 17a

Printed/Typed Name

William Adams

Signature

[Signature]

Month Day Year

12/16/06

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1010**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301472**

**AT-14**

**Net Weight:**

**21.08**

**Job#VIENNA-MGEM**

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

*R M Hayes*

Signature

*[Signature]*

Month Day Year

**12/16/06**

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**RAY LLOYD**

Signature

*Ray Lloyd*

Month Day Year

**12/16/06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year

**12/16/06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1011

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 301481

Net Weight: 17.71

Job#VIENNA-MGEM

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/Offor's Printed/Typed Name

R.M. Harris

Signature

[Signature]

Month Day Year

12/16/08

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

Andera Clark

Signature

[Signature]

Month Day Year

12/16/08

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

12/16/08

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1012**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 301497**  
**Net Weight: 14.20**  
**Job#VIENNA-MGEM**

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 **R M HANT** Signature  Month **12** Day **16** Year **06**

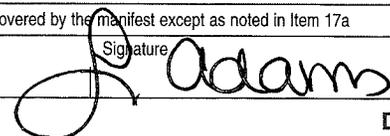
15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit \_\_\_\_\_ Date leaving U.S. \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter Signature (for exports only): \_\_\_\_\_  
Transporter 1 Printed/Typed Name **P. S. ABAD** Signature  Month **12** Day **16** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature  Month **12** Day **16** Year **06**

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1013

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project#116539

16

Transaction#:

301499

Net Weight:

19.26

Job#VIENNA-MGEM

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/Offoror's Printed/Typed Name

RM HANT

Signature

[Signature]

Month Day Year  
12 16 06

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

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

Robert Scott

Signature

[Signature]

Month Day Year  
12 16 06

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year  
12 16 06

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1014**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address

U.S. EPA ID Number  
**NOT REQUIRED**

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

Facility's Phone:

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301500**

**HBB12**

**Net Weight:**

**15.21**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*Rob Schonk*

Signature

*[Signature]*

Month Day Year

**12/16/09**

15. International Shipments  Import to U.S.  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

Signature

Month Day Year

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Karen Adams*

Signature

*[Signature]*

Month Day Year

**12/16/09**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

1

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1015**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301505**

**16.48 Tons**

**U53248**

**Net Weight:**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**RMHAGT**

Signature

**[Signature]**

Month Day Year  
**12 16 06**

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

INTL

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

**[Signature]**

Month Day Year  
**12 14 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

TRANSPORTER

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

DESIGNATED FACILITY

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

**[Signature]**

Month Day Year  
**12 16 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8000**

4. Waste Tracking Number  
**1019**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNMSTA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Alt: Rob Schonk**

6. Transporter 1 Company Name  
**Purecar Trucking**

U.S. EPA ID Number  
**DOT# 886050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Belhel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-055-0070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project#118530      Transaction#: 301819  
Net Weight: 20.24      Job#VIENNA-10GEM

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: **B.M. Hart**      Signature: *[Signature]*      Month:      Day:      Year:

GENERATOR

15. International Shipments       Import to U.S.       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: **Steve S. Hartman**      Signature: *[Signature]*      Month:      Day:      Year:

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:

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name:      Signature:      Month:      Day:      Year:

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302-652-8999

4. Waste Tracking Number

1017

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757-445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 301534

Net Weight: 19.20

Job# VIENNA-MGEM

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

RM HART

Signature

[Signature]

Month Day Year  
12 16 06

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

INT'L

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year  
12 16 06

Transporter 2 Printed/Typed Name

Signature

Month Day Year  
12 16 06

TRANSPORTER

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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

DESIGNATED FACILITY

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year  
12 15 06

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1018**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil  
contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 301533**

**Net Weight: 18.72**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

Signature

Month Day Year

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

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:

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 hazardous materials covered by the manifest, except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1019

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-8703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. 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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

3

Transaction#:

301548

Net Weight:

18.25

Job#VIENNA-MGEM

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/Offor's Printed/Typed Name

R M Hans

Signature

[Signature]

Month Day Year  
12 16 06

INTL

15. International Shipments

Import to U.S.

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

BRIAN Elliott

Signature

[Signature]

Month Day Year  
12 16 06

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year  
12 16 06

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8000**

4. Waste Tracking Number  
**1070**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-8703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Pureyear Trucking**

U.S. EPA ID Number  
**DOT# 696050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-665-0070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# 118336  
**14**  
Transaction#: **301835**  
Net Weight: **22.24**  
Job# VIENNA-MGEM

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/Offor's Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

GENERATOR

15. International Shipments  Import to U.S.  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: \_\_\_\_\_  
Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1021**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 301545**

**Net Weight: 20.02**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

*R M Hart*

Signature

*R M Hart*

Month Day Year  
**12/16/06**

INT'L

15. International Shipments  Import to U.S.  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

*Z M Falls*

Signature

*Z M Falls*

Month Day Year  
**12/16/06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*L Adams*

Month Day Year  
**12/16/06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1022**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

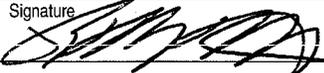
8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

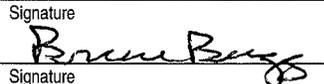
13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 301537**  
**P-76 Net Weight: 20.67**  
**Job#VIENNA-MGEM**

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 **RMHans** Signature  Month **12** Day **16** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **BRUCE BUGG** Signature  Month **12** Day **16** Year **06**

Transporter 2 Printed/Typed Name Signature Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

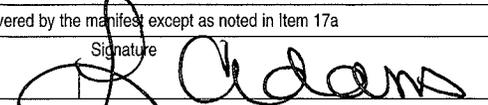
Manifest Reference Number: U.S. EPA ID Number

17b. Alternate Facility (or Generator) 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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Laura Adams** Signature  Month **12** Day **16** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 852-8333

4. Waste Tracking Number

1023

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (NAFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-5703 Attn: Rob Schenk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 886050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23066

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-8070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

*I weigh tickets for one load.*

13. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 301547

Net Weight: 10.15 + 7.0

*NOTE had to go over Scales twice because Debris stuck in tailgate*

JOB/VIENNA-MGEM

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/Offor's Printed/Typed Name

*R.M. Hagan*

Signature

*[Signature]*

Month Day Year

*12 16 06*

15. International Shipments  Import to U.S.  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

*[Signature]*

Signature

*[Signature]*

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>1024</b>
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5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>	Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>	

6. Transporter 1 Company Name <b>Puryear Trucking</b>	U.S. EPA ID Number <b>DOT# 896050</b>
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
Facility's Phone: <b>757-865-6070</b>	

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

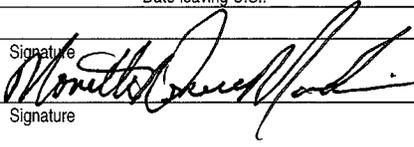
**Project#116539**      **Transaction#: 301544**  
**P-69**      **Net Weight: 20.77**  
**Job#VIENNA-MGEM**

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/Offorer's Printed/Typed Name <b>R M HART</b>	Signature 	Month Day Year <b>12 16 06</b>
---	---	-----------------------------------

15. International Shipments     Import to U.S.     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 <b>Monette Madison</b>	Signature 	Month Day Year <b>12 16 06</b>
Transporter 2 Printed/Typed Name	Signature	Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space     Quantity     Type     Residue     Partial Rejection     Full Rejection

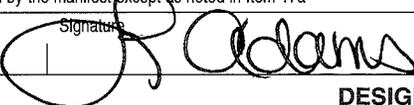
Manifest Reference Number: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name <b>Leura Adams</b>	Signature 	Month Day Year <b>12 16 06</b>
--	---	-----------------------------------

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1025**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 301549**

**P-73**

**Net Weight: 21.84 lbs**

**Job# VIENNA-MGEM**

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

**R M HART**

Signature

*[Signature]*

Month Day Year

GENERATOR

INT'L  
TRANSPORTER

DESIGNATED FACILITY

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

Port of entry/exit:

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**BOB WINCH**

Signature

*[Signature]*

Month Day Year

**12 16 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

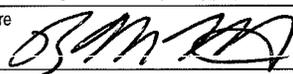
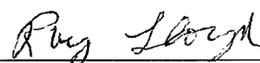
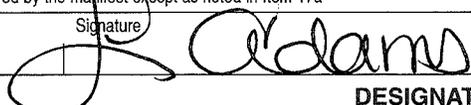
**Kalura Adams**

Signature

*[Signature]*

Month Day Year

**12 16 06**

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>1026</b>		
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>		Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>				
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>						
6. Transporter 1 Company Name <b>Puryear Trucking</b>			U.S. EPA ID Number <b>DOT# 896050</b>			
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>			
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>			
Facility's Phone: <b>757-865-6070</b>						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
	2.					
	3.					
4.						
13. Special Handling Instructions and Additional Information  <div style="display: flex; justify-content: space-between;"> <div>Project# <b>116539</b> <b>AT-14</b></div> <div>Transaction#: <b>301551</b> Net Weight: <b>18.81</b></div> <div>Job# <b>VIENNA-MGEM</b></div> </div>						
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/Offor's Printed/Typed Name <b>R M HART</b>		Signature 		Month Day Year <b>12 16 06</b>		
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 <b>RAY LOYD</b>		Signature 		Month Day Year <b>12 16 06</b>		
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 hazardous materials covered by the manifest except as noted in Item 17a						
Printed/Typed Name <b>Kelvin Adams</b>		Signature 		Month Day Year <b>12 16 06</b>		

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1027

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 30155 4

DDB 6

Net Weight: 16.70

Job# VIENNA-MGEM

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/Offor's Printed/Typed Name

R M Harris

Signature

[Signature]

Month Day Year

12 16 08

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

PATRICK S. ABAD

Signature

[Signature]

Month Day Year

12 16 08

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

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year

12 16 08

GENERATOR  
 INT'L  
 TRANSPORTER  
 DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>1028</b>
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5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>	Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>	

6. Transporter 1 Company Name <b>Puryear Trucking</b>	U.S. EPA ID Number <b>DOT# 896050</b>
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
Facility's Phone: <b>757-865-6070</b>	

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#:** **301555**  
*P-59*      **Net Weight:** **16.37**      **Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name: **R M Hantz**      Signature: *[Signature]*      Month: **12** Day: **16** Year: **06**

15. International Shipments       Import to U.S.       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: **Andrea Clark**      Signature: *[Signature]*      Month: **12** Day: **16** Year: **06**

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)      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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: **Adams**      Signature: *[Signature]*      Month: **12** Day: **16** Year: **06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1030**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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. Special Handling Instructions and Additional Information

1. **Non RCRA, Non DOT Regulated Soil  
contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301562**

**HB3**

**Net Weight: 17.19**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*B.M. Hayes*

Signature

*B.M. Hayes*

Month Day Year

**12 16 06**

15. International Shipments  Import to U.S.  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

Signature

Month Day Year

*Diane L. Robinson*

*Diane L. Robinson*

**12 16 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

*Clara Adams*

*Clara Adams*

**12 16 06**

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

1

3. Emergency Response Phone

**302.652.8999**

4. Waste Tracking Number

**1031**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757.445.6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil  
contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301572**

**U52348**

**Net Weight:**

**18.22 TONS**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*BM Hans*

Signature

*[Signature]*

Month Day Year  
**12 16 06**

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

*J. L. Christian*

Signature

*[Signature]*

Month Day Year

**12 14 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*[Signature]*

Month Day Year

**12 16 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8000**

4. Waste Tracking Number  
**1032**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (NRMMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 888050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bothel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23066**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>OT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# **110530**

Transaction# **301578**

Net Weight: **17.22**

**JOE VIENNA-MGEM**

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/Offor's Printed/Typed Name

Signature

Month Day Year  
**12/16/06**

INT'L

15. International Shipments  Import to U.S.  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  
**12/16**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 852-8000</b>	4. Waste Tracking Number <b>1035</b>		
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>			Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>				
Generator's Phone: <b>757 445-6703 Attn: Rob Schork</b>							
6. Transporter 1 Company Name <b>Puryear Trucking</b>		U.S. EPA ID Number <b>DOT# 880050</b>					
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>					
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>				
Facility's Phone: <b>757-865-6070</b>							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
			No.	Type			
	1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
	2.						
	3.						
4.							
13. Special Handling Instructions and Additional Information							
<b>Project# 116530</b>		<b>Transaction#:</b>		<b>301583</b>			
<b>14</b>		<b>Net Weight:</b>		<b>23.23</b>		<b>Job# VIENNA-MGEM</b>	
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 <b>S.M. Harris</b>			Signature <i>[Signature]</i>		Month Day Year <b>12/16/06</b>		
TRANSPORTER	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 <b>[Name]</b>			Signature <i>[Signature]</i>		Month Day Year ____		
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						
	17b. Alternate Facility (or Generator)			Manifest Reference Number:			
	Facility's Phone:			U.S. EPA ID Number			
17c. Signature of Alternate Facility (or Generator)			Signature		Month Day Year		
18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a							
Printed/Typed Name			Signature		Month Day Year		

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**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1036**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 3015-85**  
**P-76 Net Weight: 19.78**  
**Job#VIENNA-MGEM**

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 **R M HART** Signature *[Signature]* Month **12** Day **16** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **BRUCE BUGG** Signature *[Signature]* Month **12** Day **16** Year **06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Allen Adams** Signature *[Signature]* Month **12** Day **16** Year **06**

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of 1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1037

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No.

Type

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 301588

P-69

Net Weight: 20.16

Job#VIENNA-MGEM

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

BM HANT

Signature

[Signature]

Month Day Year 12/16/06

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

Monetta Madison

Signature

[Signature]

Month Day Year 12/16/06

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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

Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Typed Name

Kura Adams

Signature

[Signature]

Month Day Year 12/16/06

10498

DESIGNATED FACILITY TO GENERATOR

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1038**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301594**

**18**

**Net Weight:**

**19.66**

**Job#VIENNA-MGEM**

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

**RM HART**

Signature

**[Signature]**

Month Day Year  
**12 16 06**

INT'L

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

**[Signature]**

Month Day Year

Transporter 2 Printed/Typed Name

Signature

**[Signature]**

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest, except as noted in Item 17a

Printed/Typed Name

Signature

**Adam Adams**

**[Signature]**

Month Day Year  
**12 16 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8900**

4. Waste Tracking Number  
**1039**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 301595**

**P-73**

**Net Weight: 20.62 Tons**

**Job# VIENNA-MGEM**

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

**B M Hams**

Signature

*B M Hams*

Month Day Year

**12/16/06**

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

**GARY WINCH**

Signature

*Gary Winch*

Month Day Year

**12/16/06**

Transporter 2 Printed/Typed Name

Signature

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*Laura Adams*

Month Day Year

**12/16/06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1040**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 30597**

**AT-14**

**Net Weight: 21.58**

**Job#VIENNA-MGEM**

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

*R M Hantz*

Signature

*R M Hantz*

Month Day Year

GENERATOR

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

*RAY LLOYD*

Signature

*Ray Lloyd*

Month Day Year

**12 16 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Kelora Adams*

Signature

*K Adams*

Month Day Year

**12 16 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1041**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539      Transaction#: 301598**

**DD36      Net Weight: 17.2)**

**Job# VIENNA-MGEM**

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  
**RM HART**

Signature  
*[Signature]*

Month Day Year  
**12 16 06**

15. International Shipments  
 Import to U.S.       Export from U.S.

Port of entry/exit:  
Date leaving U.S.

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
**PATRICK S. ABAD**

Signature  
*[Signature]*

Month Day Year  
**12 16 06**

Transporter 2 Printed/Typed Name  
Signature  
Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space  
 Quantity       Type       Residue       Partial Rejection       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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Laura Adams**

Signature  
*[Signature]*

Month Day Year  
**12 16 06**

GENERATOR

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of **1**  
 3. Emergency Response Phone: **302 652-8999**  
 4. Waste Tracking Number: **1042**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information:  
**Project#116539 Transaction#: 301600**  
**P-59 Net Weight: 15.98**  
**Job#VIENNA-MGEM**

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: **R M Hant** Signature: *[Signature]* Month: **12** Day: **16** Year: **06**

INT'L

15. International Shipments  Import to U.S.  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: **Andrea Clark** Signature: *[Signature]* Month: **12** Day: **18** Year: **06**  
 Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

DESIGNATED FACILITY

17. Discrepancy  
 17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: **Laura Adams** Signature: *[Signature]* Month: **12** Day: **16** Year: **06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302.652.8999

4. Waste Tracking Number

1043

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 301601

HBB12

Net Weight: 17.14

Job#VIENNA-MGEM

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

R.M. HANT

Signature

[Signature]

Month Day Year  
12 16 06

15. International Shipments

Import to U.S.

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

DITHE ROBINSON

Signature

[Signature]

Month Day Year  
12 16 06

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year  
12 16 06

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1044**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301613**

*U 53248*

**Net Weight: 17.49**

**17.49 TONS**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*BM HART*

Signature

*BM HART*

Month Day Year  
**12 16 06**

GENERATOR INTL TRANSPORTER DESIGNATED FACILITY

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

Port of entry/exit:

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

*Jude Christian*

Signature

*Jude Christian*

Month Day Year  
**12 16 06**

Transporter 2 Printed/Typed Name

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Adams*

Signature

*Adams*

Month Day Year  
**12 16 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8622**

4. Waste Tracking Number  
**1045**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Site Address (if different than mailing address)  
**Paradise Creek**  
Generator's Phone: **757 445-6703 Attn: Rob Soborik**

6. Transporter 1 Company Name  
**Furyear Trucking**  
U.S. EPA ID Number  
**DOT# 896150**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**  
U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23066**  
U.S. EPA ID Number  
**NOT REQUIRED**  
Facility's Phone: **757-865-8070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116530**  
**4**  
**Transaction# 301615**  
**Net Weight: 17.29**  
**Job# VIENNA-MGEM**

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: **RMH...** Signature: *[Signature]* Month: **12** Day: **16** Year: **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name: **Stephen E. Heater Sr** Signature: *[Signature]* Month: **12** Day: **16** Year: **06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1046**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301617**

**3**

**Net Weight:**

**15.37**

**Job#VIENNA-MGEM**

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 **Rm Hart** Signature **[Signature]** Month **12** Day **16** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **BRIAN Elliott** Signature **[Signature]** Month **12** Day **16** Year **06**  
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:

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature **[Signature]** Month **12** Day **16** Year **06**

GENERATOR

INT'L  
TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302-652-8080

4. Waste Tracking Number

1047

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNMFA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757-445-8703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 886050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23606

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-8070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DOT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project# 116500

14

Transaction#:

301618  
22.79

Net Weight:

JOB#VIENNA-MGEM

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

RM [Signature]

Signature

[Signature]

Month Day Year

10 16 06

15. International Shipments  Import to U.S.  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

Signature

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1048**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 301620**

**P 76**

**Net Weight: 22.65**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R M HART**

Signature

**[Signature]**

Month Day Year  
**12/16/06**

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

**BRUCE BULL**

Signature

**[Signature]**

Month Day Year

**12/16/06**

Transporter 2 Printed/Typed Name

Signature

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

**[Signature]**

Month Day Year  
**12/16/06**

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number **NOT REQUIRED** 2. Page 1 of **1** 3. Emergency Response Phone **302 652-8999** 4. Waste Tracking Number **1049**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address)  
**Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name **Puryear Trucking** U.S. EPA ID Number **DOT# 896050**

7. Transporter 2 Company Name **South Norfolk Trucking, Inc.** U.S. EPA ID Number **NOT REQUIRED**

8. Designated Facility Name and Site Address **Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
 Facility's Phone: **757-865-6070** U.S. EPA ID Number **NOT REQUIRED**

GENERATOR

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 301621**  
**P-69 Net Weight: 20.49**  
**Job#VIENNA-MGEM**

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 **R.M. HART** Signature *[Signature]* Month **12** Day **16** Year **06**

INT'L

15. International Shipments  Import to U.S.  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 **Monette Madison** Signature *[Signature]* Month **12** Day **16** Year **06**  
 Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

DESIGNATED FACILITY

17. Discrepancy  
 17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **16** Year **06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1050**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No.

Type

NONE

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

DT

20

T

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 301646**

**T-11**

**Net Weight: 37180 18.59**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

*R.M. Hant*

Signature

*R.M. Hant*

Month Day Year  
**12 18 06**

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

*T. Sheppard*

Signature

*T. Sheppard*

Month Day Year  
**12 18 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8699**

4. Waste Tracking Number  
**1051**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 090050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address

U.S. EPA ID Number  
**NOT REQUIRED**

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23696  
757-865-8070**

Facility's Phone:

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

Project# **116530**

Transaction#:

**301556**

**Pay DIRT**

Net Weight:

**15.82**

Job# **VIENNA-MGEM**

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/Offor's Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER INT'L

15. International Shipments  Import to U.S.  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

Signature

Month Day Year

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:

17b. Alternate Facility (or Generator)

U.S. EPA ID Number

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

DESIGNATED FACILITY

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

GENERATOR  
 INT'L  
 TRANSPORTER  
 DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8939</b>	4. Waste Tracking Number <b>1052</b>
-------------------------------------	---	--------------------------	--	---

5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (NRMMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>	Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>
Generator's Phone: <b>757 445-5703 Attn: Rob Schunk</b>	

6. Transporter 1 Company Name <b>Puryear Trucking</b>	U.S. EPA ID Number <b>EXJTW 80050</b>
--	--

7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
--	---

8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23065</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
Facility's Phone: <b>757-865-8970</b>	

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# 116530      Transaction#: 301647  
 Net Weight: 21.12  
 Job# VIENNA-MGEM

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: \_\_\_\_\_

15. International Shipments     Import to U.S.     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: \_\_\_\_\_

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

17. Discrepancy

17a. Discrepancy Indication Space     Quantity     Type     Residue     Partial Rejection     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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: **T. Watson**    Signature: \_\_\_\_\_    Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1053**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris** DT 20 T NONE

13. Special Handling Instructions and Additional Information

**Project# 116539** **Transaction#: 301649**  
**16** **Net Weight: 19.35**  
**Job# VIENNA-MGEM**

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 **R M HART** Signature *[Signature]* Month **12** Day **08** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Robert Scott** Signature *[Signature]* Month **12** Day **18** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name \_\_\_\_\_ Signature *[Signature]* Month **12** Day **18** Year **06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1054

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 301657

Net Weight: 17.38

Job#VIENNA-MGEM

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

BM Hunt

Signature

*BM Hunt*

Month Day Year

12 18 06

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

W R Wood

Signature

*WR Wood*

Month Day Year

12 18 06

Transporter 2 Printed/Typed Name

Signature

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

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

12 18 06

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1055**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking** U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.** U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 301655**  
**Net Weight: 21.31 Job#VIENNA-MGEM**

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 **R M Hart** Signature *[Signature]* Month **12** Day **18** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Rick Topman** Signature *[Signature]* Month **12** Day **18** Year **06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name \_\_\_\_\_ Signature *[Signature]* Month **12** Day **18** Year **06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1056**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301659**

**36**

**Net Weight:**

**19.01**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R M HART**

Signature

**R M HART**

Month Day Year

**12/18/06**

15. International Shipments

Import to U.S.

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

**Chester D SLADE**

Signature

**C. D. Seede**

Month Day Year

**12/18/06**

Transporter 2 Printed/Typed Name

Signature

**C D Seede**

Month Day Year

**12/18/06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

**12/18/06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1057

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 301661

Net Weight: 21.32

Job# VIENNA-MGEM

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

R M HART

Signature

[Signature]

Month Day Year

12/18/06

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

K W Falls

Signature

[Signature]

Month Day Year

12/18/06

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

12/18/06

GENERATOR

INTL

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of 1  
 3. Emergency Response Phone: **302 652-8000**  
 4. Waste Tracking Number: **1058**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA), 1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-8703 Attn: Rob Schenk**

6. Transporter 1 Company Name: **Furyear Trucking** U.S. EPA ID Number: **DOT# 088050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill, 100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-865-8070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information:  
**Project# 118530 Transaction#: 301660**  
**Net Weight: 15.74**  
**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name: **[Signature]** Signature: **[Signature]** Month: **12** Day: **18** Year: **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter Signature (for exports only): \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

Transporter 1 Printed/Typed Name: **[Signature]** Signature: **[Signature]** Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_  
 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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: **12** Day: **18** Year: **06**

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**7059**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301664**

**AT-17**

**Net Weight: 20.90**

**Job#VIENNA-MGEM**

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

**BM HART**

Signature

*[Signature]*

Month Day Year

**12/18/06**

INT'L

15. International Shipments  Import to U.S.  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

**Robert Carpenter**

Signature

*[Signature]*

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Calvin Adams**

Signature

*[Signature]*

Month Day Year

**12/18/06**

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>1060</b>		
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>		Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>				
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>						
6. Transporter 1 Company Name <b>Puryear Trucking</b>			U.S. EPA ID Number <b>DOT# 896050</b>			
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>			
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>			
Facility's Phone: <b>757-865-6070</b>						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
	2.					
	3.					
4.						
13. Special Handling Instructions and Additional Information  <b>Project#116539      Transaction#: 301665</b> <b>Net Weight: 19.13      Job#VIENNA-MGEM</b> <i>P-7</i>						
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/Offor's Printed/Typed Name <i>BM HANT</i>		Signature <i>[Signature]</i>		Month Day Year <i>12/18/06</i>		
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 <i>BRUCE BUGA</i>		Signature <i>[Signature]</i>		Month Day Year <i>12/18/06</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						
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 hazardous materials covered by the manifest except as noted in Item 17a						
Printed/Typed Name <i>Allen Adams</i>		Signature <i>[Signature]</i>		Month Day Year <i>12/16/06</i>		

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1061

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 301668

P-63

Net Weight: 32800 16-40

Job#VIENNA-MGEM

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/Offor's Printed/Typed Name

RMILITANT

Signature

[Signature]

Month Day Year

12 18 06

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

MARLON MITCHELL

Signature

[Signature]

Month Day Year

12 18 06

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year

12 16 06

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1062**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:** *301669*

*P-73*

**Net Weight:** *20.93 tons*

**Job# VIENNA-MGEM**

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

*R M HANT*

Signature

*R M HANT*

Month Day Year

*12/18/06*

GENERATOR

15. International Shipments  Import to U.S.  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

*Greg Welch*

Signature

*Greg Welch*

Month Day Year

*12/18/06*

Transporter 2 Printed/Typed Name

Signature

Month Day Year

TRANSPORTER

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

DESIGNATED FACILITY

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*Laura Adams*

Month Day Year

*12/16/06*

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1063**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703** Attn: **Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301672**

**AT-14**

**Net Weight: 19.32**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R M Adams**

Signature

**[Signature]**

Month Day Year

**12 18 06**

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

**RAY LLOYD**

Signature

**[Signature]**

Month Day Year

**12 18 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

**hours Adams**

**[Signature]**

Month Day Year

**12 18 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-0900**

4. Waste Tracking Number  
**1062**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMMA)  
1510 Gilbert St, Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-8703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 988050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# **118530**

Transaction# **301678**

**PIA I**

Net Weight: **18.56**

Job# **VIENNA-MGEM**

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

**12/18/06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

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

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1065

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 301677

3

Net Weight: 18.24

Job# VIENNA-MGEM

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

BSM HANS

Signature

[Signature]

Month Day Year

12/18/06

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

Port of entry/exit:

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

BRIAN ELLICK

Signature

[Signature]

Month Day Year

12/18/06

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

12/16/06

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number **NOT REQUIRED** 2. Page 1 of **1** 3. Emergency Response Phone **302 652-8999** 4. Waste Tracking Number **1066**

5. Generator's Name and Mailing Address **Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**  
Generator's Site Address (if different than mailing address) **Paradise Creek**

6. Transporter 1 Company Name **Puryear Trucking** U.S. EPA ID Number **DOT# 896050**

7. Transporter 2 Company Name **South Norfolk Trucking, Inc.** U.S. EPA ID Number **NOT REQUIRED**

8. Designated Facility Name and Site Address **Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070** U.S. EPA ID Number **NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539** **Transaction#: 301683**  
**P-69** **Net Weight: 20-34** **Job# VIENNA-MGEM**

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 **R M Hartz** Signature *[Signature]* Month **12** Day **18** Year **06**

INT'L

15. International Shipments  Import to U.S.  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 **Monette Madison** Signature *[Signature]* Month **12** Day **18** Year **06**  
 Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

DESIGNATED FACILITY

17. Discrepancy  
 17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name **Clare Adams** Signature *[Signature]* Month **12** Day **16** Year **06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302.652.8999**

4. Waste Tracking Number

**1067**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone:

**757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone:

**757-865-6070**

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>
2.	
3.	
4.	

10. Containers

No.

Type

11. Total Quantity

12. Unit Wt./Vol.

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301682**

*P-SJ*

**Net Weight:**

**21.23**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*R.M. Hart*

Signature

*[Signature]*

Month Day Year

*12/18/05*

15. International Shipments

Import to U.S.

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

Signature

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*[Signature]*

Month Day Year

*12/18/05*

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>1068</b>			
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>		Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>					
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>							
6. Transporter 1 Company Name <b>Puryear Trucking</b>			U.S. EPA ID Number <b>DOT# 896050</b>				
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>				
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>				
Facility's Phone: <b>757-865-6070</b>							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
			No.	Type			
		1. <b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
		2.					
		3.					
	4.						
13. Special Handling Instructions and Additional Information  <b>Project#116539      Transaction#: 301685</b> <b>R-68      Net Weight: 19.45</b> <span style="float:right;"><b>Job#VIENNA-MGEM</b></span>							
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/Offor's Printed/Typed Name		Signature		Month	Day	Year	
<i>RM Hart</i>		<i>[Signature]</i>		12	18	06	
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		Signature		Month	Day	Year	
<i>Mark Mitchell</i>		<i>[Signature]</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							
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 hazardous materials covered by the manifest except as noted in Item 17a							
Printed/Typed Name		Signature		Month	Day	Year	
<i>Laura Adam</i>		<i>[Signature]</i>		12	18	06	

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number NOT REQUIRED 2. Page 1 of 1 3. Emergency Response Phone 302 652-8999 4. Waste Tracking Number 1069

5. Generator's Name and Mailing Address: Commander, Navy Region Mid-Atlantic (CNRMA), 1510 Gilbert St., Norfolk, VA 23511-2737  
 Generator's Site Address (if different than mailing address): Paradise Creek  
 Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name: Puryear Trucking U.S. EPA ID Number: DOT# 896050

7. Transporter 2 Company Name: South Norfolk Trucking, Inc. U.S. EPA ID Number: NOT REQUIRED

8. Designated Facility Name and Site Address: Bethel Sanitary Landfill, 100 North Park Lane, Hampton, VA 23666 U.S. EPA ID Number: NOT REQUIRED  
 Facility's Phone: 757-865-6070

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
 Project# 116539 Transaction#: 301688  
 D-72 Net Weight: 18,22 Job# VIENNA-MGEM

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/Offor's Printed/Typed Name: R M H... Signature: [Signature] Month Day Year: 12/18/08

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter Signature (for exports only):  
 Transporter 1 Printed/Typed Name: [Signature] Signature: [Signature] Month Day Year: 12 18 08  
 Transporter 2 Printed/Typed Name: [Signature] Signature: [Signature] Month Day Year:

17. Discrepancy  
 17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: [Signature] Signature: [Signature] Month Day Year: 12 18 08

169-BLC-O 6 10498 DESIGNATED FACILITY TO GENERATOR

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1070**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-0703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puycor Trucking**

U.S. EPA ID Number  
**DOT# 800050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23660  
757-365-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. 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.

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		OT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: **3016 95**

**DAVIS #1 2**

Net Weight: **18.36**

Job# VIENNA-MGEM

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

INT'L

15. International Shipments

Import to U.S.

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

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in item 17a

Printed/Typed Name

Signature

Month Day Year

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number

**1071**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil  
contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 301699**

**Net Weight: 18.27**

**Job# VIENNA-MGEM**

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

*RM Hart*

Signature

*[Signature]*

Month Day Year

**12 18 06**

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

*Malvin H. Spence Sr*

Signature

*[Signature]*

Month Day Year

**12 18 06**

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

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*John Adams*

Signature

*[Signature]*

Month Day Year

**12 18 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1072**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**14**

**Transaction#: 301715**

**Net Weight: 22.46**

**Job#VIENNA-MGEM**

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

*RM Haney*

Signature

*[Signature]*

Month Day Year

**12 18 06**

INTL

15. International Shipments

Import to U.S.

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

*Q. Cross*

Signature

*[Signature]*

Month Day Year

**12 18 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*JOANN BARLOW*

Signature

*[Signature]*

Month Day Year

**12 18 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1073**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23668  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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. Special Handling Instructions and Additional Information

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**16**

**Net Weight:**

**Job#VIENNA-MGEM**

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

*BAM Hunt*

Signature

*BAM Hunt*

Month Day Year  
**12 18 06**

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

**Robert Scott**

Signature

*Robert Scott*

Month Day Year  
**12 18 06**

Transporter 2 Printed/Typed Name

Signature

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Kaur Adams**

Signature

*K Adams*

Month Day Year

**12 18 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1074**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#: 301729**  
**15**      **Net Weight: 21.91**  
**Job#VIENNA-MGEM**

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: **B M Hunt**      Signature: *[Signature]*      Month: **12** Day: **18** Year: **06**

INT'L

15. International Shipments       Import to U.S.       Export from U.S.      Port of entry/exit: \_\_\_\_\_  
Transporter Signature (for exports only): \_\_\_\_\_      Date leaving U.S.: \_\_\_\_\_

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name: **Rich Trotman**      Signature: *[Signature]*      Month: **12** Day: **18** Year: **06**  
Transporter 2 Printed/Typed Name: \_\_\_\_\_      Signature: \_\_\_\_\_      Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

DESIGNATED FACILITY

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)      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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: **JOANN BARLOW**      Signature: *[Signature]*      Month: **12** Day: **18** Year: **06**

GENERATOR  
 INT'L  
 TRANSPORTER  
 DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>312 652-8900</b>	4. Waste Tracking Number <b>1075</b>
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNFMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>		Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>		
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>				
6. Transporter 1 Company Name <b>Pureyear Trucking</b>		U.S. EPA ID Number <b>DOT# 686150</b>		
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>		
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23066</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>		
Facility's Phone: <b>757-865-6070</b>				
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
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>
	2.			
	3.			
	4.			
12. Unit Wt./Vol. <b>T</b>				
<b>NONE</b>				
13. Special Handling Instructions and Additional Information <b>Project# 118539 Transaction#: 301741</b> <b>Kaydint 6 Net Weight: 20.67</b> <b>Job# VIENNA-MGEM</b>				
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 <b>SM HART</b>		Signature <i>[Signature]</i>		Month Day Year <b>12/8/06</b>
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
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 hazardous materials covered by the manifest except as noted in Item 17a				
Printed/Typed Name		Signature		Month Day Year

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>1076</b>
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5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name <b>Puryear Trucking</b>	U.S. EPA ID Number <b>DOT# 896050</b>
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#: 301744**

**T-11**      **Net Weight: 37240 18.62**

**Job#VIENNA-MGEM**

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/Offoror's Printed/Typed Name: **R.M. HART**      Signature: *[Signature]*      Month: **12** Day: **18** Year: **06**

15. International Shipments       Import to U.S.       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: **T. Sheppard**      Signature: *[Signature]*      Month: **12** Day: **18** Year: **06**

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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: **JOANN BARLOW**      Signature: *[Signature]*      Month: **12** Day: **18** Year: **06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1077**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 301745**  
**T-10 Net Weight: 18.20**  
**Job#VIENNA-MGEM**

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 **RM HART** Signature **[Signature]** Month **12** Day **18** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **L.R.** Signature **[Signature]** Month Day Year  
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) U.S. EPA ID Number  
Facility's Phone:  
17c. Signature of Alternate Facility (or Generator) Month Day Year

19. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature **[Signature]** Month **12** Day **18** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1078**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301757**

**RDR#1**

**Net Weight: 28,49 TONS**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*SM HART*

Signature

*[Signature]*

Month Day Year  
**12 18 06**

15. International Shipments  Import to U.S.  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

**RANDALL D ROGERSON**

Signature

*[Signature]*

Month Day Year  
**12 18 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year  
**12 18 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1079**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 301755**  
**D-76 Net Weight: 21.46**  
**Job#VIENNA-MGEM**

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 **R M Hart** Signature *[Signature]* Month **12** Day **18** Year **06**

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 **BRUCE BUGG** Signature *[Signature]* Month **12** Day **18** Year **06**  
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) \_\_\_\_\_ 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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Calvin Adams** Signature *[Signature]* Month **12** Day **18** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

2. Page 1 of 1

3. Emergency Response Phone

4. Waste Tracking Number

NOT REQUIRED

1

302 652-8999

1080

5. Generator's Name and Mailing Address

Generator's Site Address (if different than mailing address)

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

U.S. EPA ID Number

Puryear Trucking

DOT# 896050

7. Transporter 2 Company Name

U.S. EPA ID Number

South Norfolk Trucking, Inc.

NOT REQUIRED

8. Designated Facility Name and Site Address

U.S. EPA ID Number

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23686

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 301759

AT-17

Net Weight: 22.13

Job# VIENNA-MGEM

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/Offor's Printed/Typed Name

SM HART

Signature

[Signature]

Month Day Year

12 18 06

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

Robert Carpenter

Signature

[Signature]

Month Day Year

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

JOANN BARLOW

Signature

[Signature]

Month Day Year

12 18 06

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1081**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301763**

**36**

**Net Weight: 21.79**

**Job#VIENNA-MGEM**

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

*R M Hant*

Signature

*[Signature]*

Month Day Year  
**12 18 06**

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

*C Slade*

Month Day Year  
**12 18 06**

Transporter 2 Printed/Typed Name

Signature

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

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest, except as noted in Item 17a

Printed/Typed Name

*Chris Adams*

Signature

*[Signature]*

Month Day Year  
**12 18 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302.652.8999

4. Waste Tracking Number

1082

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 301765

P-73

Net Weight: 22.47 Tons

Job#VIENNA-MGEM

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/Offor's Printed/Typed Name

BM HART

Signature

[Signature]

Month Day Year  
12 18 06

INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Tary W. Welch

Signature

[Signature]

Month Day Year  
12 18 06

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Adam Adams

Signature

[Signature]

Month Day Year  
12 18 06

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1083**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**18**

**Transaction#:**

**301771**

**Net Weight:**

**20.88**

**Job#VIENNA-MGEM**

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

**RM HART**

Signature

*[Signature]*

Month Day Year

**12/18/06**

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**RW Fals**

Signature

*[Signature]*

Month Day Year

**12/18/06**

Transporter 2 Printed/Typed Name

Signature

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year

**12/18/06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8989

4. Waste Tracking Number

1084

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 3775 301775

P 63

Net Weight: 43780 21.89

Job#VIENNA-MGEM

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/Offoror's Printed/Typed Name

RM Hart

Signature

[Signature]

Month Day Year

12 18 06

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

DESIGNATED FACILITY TO GENERATOR

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1085**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301776**

**AT14**

**Net Weight:**

**21.25**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R. M. Adams**

Signature

*[Signature]*

Month Day Year

**12 18 06**

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

**Ray Lloyd**

Signature

*[Signature]*

Month Day Year

**12 18 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

**Lauren Adams**

*[Signature]*

Month Day Year

**12 18 06**

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8889**

4. Waste Tracking Number  
**1086**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilmer St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703** Attn: **Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 88050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23668**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#118539**

**Transaction#:**

**301779**

**P-52**

**Net Weight:**

**22.13**

**Job#VIENNA-MGEM**

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

**Rob Schonk**

Signature

*[Signature]*

Month Day Year

**11 18 05**

INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space  Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1087**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301783**

**P-58**

**Net Weight:**

**17.78**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name  
**R M HANT**

Signature  
*[Signature]*

Month Day Year  
**12/18/06**

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  
**JOE W GRIFFIN**

Signature  
*[Signature]*

Month Day Year  
**12/18/06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Laure Adams**

Signature  
*[Signature]*

Month Day Year  
**12/18/06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1088

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. 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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

13. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 301782

P-69

Net Weight: 20.84

Job# VIENNA-MGEM

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/Offor's Printed/Typed Name

BMHant

Signature

[Signature]

Month Day Year

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

Monette Madison

Signature

[Signature]

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Karen Adams

Signature

[Signature]

Month Day Year

12/18/08

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 852-8888**

4. Waste Tracking Number  
**1089**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-8703 Attn: Rob Schenk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Pureyear Trucking**

U.S. EPA ID Number  
**DC17 888050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23066**  
Facility's Phone: **757-865-0070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539 Transaction# 301792**  
**CIA 1 Net Weight: 17.05**  
**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name: **SM HART** Signature: **[Signature]** Month: **12** Day: **18** Year: **2006**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

15. International Shipments  Import to U.S.  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: \_\_\_\_\_  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in item 17a  
Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**

3. Emergency Response Phone  
**302.652.8999**

4. Waste Tracking Number  
**1090**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#: 301798**

**P-68**      **Net Weight: 21.47**

**Job#VIENNA-MGEM**

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/Offoror's Printed/Typed Name: **RM HART**      Signature: *[Signature]*      Month:      Day:      Year:

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: **MARK MITCHELL**      Signature:      Month:      Day:      Year:

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: **JOANN BARLOR**      Signature: *[Signature]*      Month:      Day:      Year: **12/18/06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8339**

4. Waste Tracking Number  
**1091**

5. Generator's Name and Mailing Address  
**Commander, New Region Mid-Atlantic (CHRTMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-8703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 690050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23060  
757-866-8070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# **116539**

Transaction#:

**301802**

**Davis 1/2**

Net Weight:

**25.00**

**Job#VIENNA-MGEN**

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/Offor's Printed/Typed Name

**SM Haver**

Signature

**[Signature]**

Month Day Year  
**1 18 05**

GENERATOR

15. International Shipments

Import to U.S.

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

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space  Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302.652.8999**

4. Waste Tracking Number

**1092**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 301811**

**Net Weight: 24.68 tons**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

*R.M. Hart*

Signature

*[Signature]*

Month Day Year

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

*Charles Wilson*

Signature

*[Signature]*

Month Day Year

**12 18 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Clare Adams*

Signature

*[Signature]*

Month Day Year

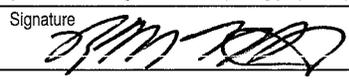
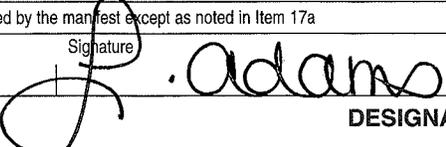
**12 18 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>1093</b>				
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>		Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>						
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>								
6. Transporter 1 Company Name <b>Puryear Trucking</b>			U.S. EPA ID Number <b>DOT# 896050</b>					
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>					
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>					
Facility's Phone: <b>757-865-6070</b>								
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.		
			No.	Type				
		1. <b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>	
		2.						
		3.						
	4.							
13. Special Handling Instructions and Additional Information  <b>Project#116539                      Transaction#: 301813</b> <b>P-72                                      Net Weight: 22.04</b> <div style="text-align:right;"><b>Job#VIENNA-MGEM</b></div>								
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/Offor's Printed/Typed Name <b>R.M. Grant</b>				Signature 		Month Day Year <b>12 18 06</b>		
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 <b>Don A Mullins</b>				Signature 		Month Day Year <b>12 18 06</b>		
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								
19. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a								
Printed/Typed Name <b>Cheryl Adams</b>				Signature 		Month Day Year <b>12 18 06</b>		

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302.652.8999

4. Waste Tracking Number

1094

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757.445.6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project# 116539

14

Transaction#: 301820

Net Weight: 25.75

Job# VIENNA-MGEM

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

R.M. Hunt

Signature

R.M. Hunt

Month Day Year

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

A. Cross

Signature

A. Cross

Month Day Year

12 18 06

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

JOANN BARLOW

Signature

Joann Barlow

Month Day Year

12 18 06

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY



NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number **NOT REQUIRED** 2. Page 1 of **1** 3. Emergency Response Phone **302 652-8999** 4. Waste Tracking Number **1096**

5. Generator's Name and Mailing Address **Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Site Address (if different than mailing address) **Paradise Creek**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name **Puryear Trucking** U.S. EPA ID Number **DOT# 896050**

7. Transporter 2 Company Name **South Norfolk Trucking, Inc.** U.S. EPA ID Number **NOT REQUIRED**

8. Designated Facility Name and Site Address **Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number **NOT REQUIRED**  
Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539** **Transaction#: 301837**  
**Net Weight: 22.32** **Job#VIENNA-MGEM**

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 **B M Harris** Signature *[Signature]* Month **12** Day **18** Year **06**

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 **Rick Trotman** Signature *[Signature]* Month **12** Day **18** Year **06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **JOANN BARLOW** Signature *[Signature]* Month **12** Day **18** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8888**

4. Waste Tracking Number  
**1097**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CMRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-8703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Furyear Trucking**

U.S. EPA ID Number  
**DOT# 888050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23066**  
Facility's Phone: **757-565-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
	2.					
	3.					
	4.					

13. Special Handling Instructions and Additional Information

**Project# 116539**      **Transaction# 301846**  
**PAADIA 6**      **Net Weight 23.28**      **Job# VIENNA-MGEM**

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: **J.M. HAN**      Signature: *[Signature]*      Month: **12** Day: **16** Year: **2006**

15. International Shipments       Import to U.S.       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: \_\_\_\_\_      Signature: *[Signature]*      Month: **12** Day: **16** Year: **2006**  
Transporter 2 Printed/Typed Name: \_\_\_\_\_      Signature: \_\_\_\_\_      Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space       Quantity       Type       Residue       Partial Rejection       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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: \_\_\_\_\_      Signature: \_\_\_\_\_      Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

GENERATOR  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1098**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301845**  
**Net Weight: 40540 20.27**

**Job#VIENNA-MGEM**

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/Offoror's Printed/Typed Name **RM HAAT** Signature **[Signature]** Month **12** Day **18** Year **06**

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 **T. Sheppard** Signature **[Signature]** Month **12** Day **18** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **JOANN BARLOW** Signature **[Signature]** Month **12** Day **18** Year **06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1099**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
	2.					
	3.					
	4.					

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**361886**

**0-7**

**Net Weight:**

**22.04**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R M HART**

Signature

*[Signature]*

Month Day Year  
**12 18 06**

15. International Shipments  Import to U.S.  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

**Mark**

Signature

*[Signature]*

Month Day Year  
**12 18 06**

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 hazardous materials covered by the manifest except as noted in Item 17a.

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year  
**12 18 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1100**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301849**

**T-10**

**Net Weight: 18.23**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**RM HANT**

Signature

**[Signature]**

Month Day Year  
**12/15/00**

INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**L.R**

Signature

**[Signature]**

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**haura Adams**

Signature

**[Signature]**

Month Day Year  
**12/8/00**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**101**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23866**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 301860  
AT17 Net Weight: 24.34  
Job#VIENNA-MGEM**

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 **R M HART** Signature **[Signature]** Month **12** Day **18** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Robert Carpenter** Signature **[Signature]** Month Day Year  
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:

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Wanda Adams** Signature **[Signature]** Month **12** Day **18** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1102

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project# 116539

P-76

Transaction#: 301863

Net Weight: 23.47

Job# VIENNA-MGEM

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/Offor's Printed/Typed Name

R M Hunt

Signature

[Signature]

Month Day Year 12 18 06

15. International Shipments

Import to U.S.

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

BRUCE BUOB

Signature

[Signature]

Month Day Year 12 18 05

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Kauri Adams

Signature

[Signature]

Month Day Year 12 18 06

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1103**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539      Transaction#: 301874**  
**ROR #1      Net Weight: 27.79 Tons**  
**Job#VIENNA-MGEM**

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: **AM HANE**      Signature: *[Signature]*      Month: **12** Day: **15** Year: **06**

15. International Shipments       Import to U.S.       Export from U.S.      Port of entry/exit:      Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name: **RANDALL D ROGERSON**      Signature: *[Signature]*      Month: **12** Day: **18** Year: **06**  
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)      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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: **Adams Adams**      Signature: *[Signature]*      Month: **12** Day: **18** Year: **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1104**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301873**

**36**

**Net Weight:**

**21.14**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*RMHmt*

Signature

*[Signature]*

Month Day Year  
**12 18 00**

15. International Shipments  Import to U.S.  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

Signature

*C Seale*

Month Day Year  
**12 18 00**

Transporter 2 Printed/Typed Name

Signature

*C Seale*

Month Day Year  
**12 18 00**

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a.

Printed/Typed Name

**JOANN BARLOW**

Signature

*Joann Barlow*

Month Day Year  
**12 18 00**

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number **NOT REQUIRED** 2. Page 1 of **1** 3. Emergency Response Phone **302 652-8999** 4. Waste Tracking Number **1105**

5. Generator's Name and Mailing Address **Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**  
Generator's Site Address (if different than mailing address) **Paradise Creek**

6. Transporter 1 Company Name **Puryear Trucking** U.S. EPA ID Number **DOT# 896050**

7. Transporter 2 Company Name **South Norfolk Trucking, Inc.** U.S. EPA ID Number **NOT REQUIRED**

8. Designated Facility Name and Site Address **Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number **NOT REQUIRED**  
Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 201878**  
**P-73 Net Weight: 22.19 tons**  
**Job#VIENNA-MGEM**

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/Ofier's Printed/Typed Name **R M Hart** Signature *[Signature]* Month **12** Day **18** Year **06**

INT'L

15. International Shipments  Import to U.S.  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 **Steve Winch** Signature *[Signature]* Month **12** Day **18** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

DESIGNATED FACILITY

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

17b. Alternate Facility (or Generator) \_\_\_\_\_ U.S. EPA ID Number \_\_\_\_\_  
Manifest Reference Number: \_\_\_\_\_

Facility's Phone: \_\_\_\_\_

17c. Signature of Alternate Facility (or Generator) \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **David Adams** Signature *[Signature]* Month **12** Day **18** Year **06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1106

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 301882

AT 14

Net Weight: 22.91

Job#VIENNA-MGEM

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/Offor's Printed/Typed Name

RM Hart

Signature

[Signature]

Month Day Year

12 18 06

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

Ray Lloyd

Signature

[Signature]

Month Day Year

12 18 06

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Karen Adams

Signature

[Signature]

Month Day Year

12 18 06

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1107**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301890**

**Net Weight:**

**2042**

**Job#VIENNA-MGEM**

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

**RM Hant**

Signature

*[Signature]*

Month Day Year

**12/18/06**

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

**KW Falls**

Signature

*[Signature]*

Month Day Year

**12/18/06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year

**12/18/06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**

3. Emergency Response Phone  
**302 852-5929**

4. Waste Tracking Number  
**1108**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23866**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# **116539**  
**P-52**

Transaction#: **301893**  
Net Weight: **20.26**

Job# **VIENNA-MGEM**

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/Offor's Printed/Typed Name **R M HART** Signature *[Signature]* Month **12** Day **18** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **JOHN CARTOS** Signature *[Signature]* Month **12** Day **18** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Kellie Adams** Signature *[Signature]* Month **12** Day **18** Year **06**

GENERATOR

INT'L TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1109**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301887**

*P-69*

**Net Weight: 19.69**

**Job#VIENNA-MGEM**

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

*RMITANT*

Signature

*RMITANT*

Month Day Year

*12 18 06*

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

*Monette Madison*

Signature

*Monette Madison*

Month Day Year

*12 18 06*

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 hazardous materials covered by the manifest except as noted in item 17a

Printed/Typed Name

*Anna Adams*

Signature

*Anna Adams*

Month Day Year

*12 18 06*

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number **NOT REQUIRED** 2. Page 1 of **1** 3. Emergency Response Phone **302 652-8999** 4. Waste Tracking Number **1110**

5. Generator's Name and Mailing Address **Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737** Generator's Site Address (if different than mailing address) **Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name **Puryear Trucking** U.S. EPA ID Number **DOT# 896050**

7. Transporter 2 Company Name **South Norfolk Trucking, Inc.** U.S. EPA ID Number **NOT REQUIRED**

8. Designated Facility Name and Site Address **Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23686** U.S. EPA ID Number **NOT REQUIRED**  
 Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539 Transaction#: 301892**  
**P-58 Net Weight: 17-27**  
**Job# VIENNA-MGEM**

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 **R.M. HART** Signature **[Signature]** Month **12** Day **18** Year **06**

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 **JOE W GRIFFIN** Signature **[Signature]** Month **12** Day **18** Year **06**  
 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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name **Karen Adams** Signature **[Signature]** Month **12** Day **18** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1111**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (NRMMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Pureyear Trucking**

U.S. EPA ID Number  
**DOT# 898050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23066  
757-825-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. 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.

1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539 Transaction#: 301902  
PIA 1 Net Weight: 16-02  
Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name **RM H...** Signature **[Signature]** Month **12** Day **18** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **WENDELL SYLVESTER** Signature **[Signature]** Month **12** Day **1** Year  
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:

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name Signature Month Day Year

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1112**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address

U.S. EPA ID Number

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301910**

*P-68*

**Net Weight: 20,82**

**Job#VIENNA-MGEM**

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/Offoror's Printed/Typed Name

*R.M. Hant*

Signature

*[Signature]*

Month Day Year  
**12 18 06**

15. International Shipments  Import to U.S.  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

Signature

*Mark Mitchell*

Month Day Year

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*William Adams*

Signature

*[Signature]*

Month Day Year  
**12 18 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 952-8990**

4. Waste Tracking Number  
**1113**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-8703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 890050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23060  
757-865-6070**  
Facility's Phone:

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# **116539** Transaction# **301906**  
**DAVIS #2** Net Weight: **20-30** Job# **VIENNA-MGEM**

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 **Rob Schonk** Signature **[Signature]** Month **12** Day **18** Year **06**

15. International Shipments  Import to U.S.  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 \_\_\_\_\_  
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) \_\_\_\_\_ 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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

GENERATOR  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1114**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No.

Type

1. **Non RCRA, Non DOT Regulated Soil  
contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 381913**

**14**

**Net Weight: 24.04**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R M Hant**

Signature

*[Signature]*

Month Day Year  
**12 18 06**

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

**D. Cross**

Signature

*[Signature]*

Month Day Year  
**12 18 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**JOANN BARLOW**

Signature

*[Signature]*

Month Day Year  
**12 18 06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1175**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

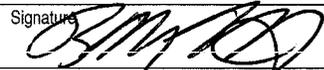
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

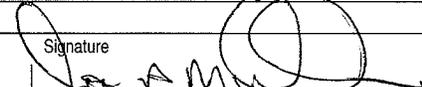
**Project# 116539 72 Transaction#: 301932**  
**Net Weight: 25.99**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name **R.M. HART** Signature  Month **12** Day **18** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Scott A Mullins** Signature  Month **12** Day **18** Year **06**  
Transporter 2 Printed/Typed Name Signature Month Day Year

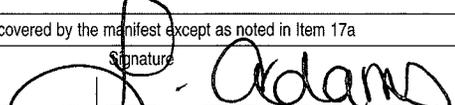
17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Laura Adams** Signature  Month **12** Day **18** Year **06**

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>114</b>			
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>		Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>					
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>		U.S. EPA ID Number <b>DOT# 896050</b>					
6. Transporter 1 Company Name <b>Puryear Trucking</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>					
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>					
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>					
Facility's Phone: <b>757-865-6070</b>							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.		
		No.	Type				
		1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>	<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
		2.					
		3.					
4.							
13. Special Handling Instructions and Additional Information  <b>Project#116539      Transaction#: 301930</b> <b>P-63      Net Weight: 39600 19.80</b> <b>Job#VIENNA-MGEM</b>							
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/Offor's Printed/Typed Name <b>B.M. Hart</b>		Signature <i>[Signature]</i>		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 <b>MARLON MITCHELL</b>		Signature <i>[Signature]</i>		Month	Day Year		
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 hazardous materials covered by the manifest except as noted in Item 17a							
Printed/Typed Name <b>Laurence Adams</b>		Signature <i>[Signature]</i>		Month	Day Year		
				Month	Day Year		

1117

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**307 652-6909**

4. Waste Tracking Number  
**1117**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-8703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896030**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-466-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

Project# **110539**

Transaction# **301910**

**P-64**

Net Weight: **21.75**

Job# **VIENNA-MGEM**

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  
**12 18 06**

INT'L

15. International Shipments  Import to U.S.  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

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302-652-8999

4. Waste Tracking Number

MTB

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757-445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 301945

AT-11

Net Weight: 18.07

Job#VIENNA-MGEM

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

R.M. Hantz

Signature

[Signature]

Month Day Year

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

Bill Holland

Signature

[Signature]

Month Day Year

12 15 06

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Alura Adams

Signature

[Signature]

Month Day Year

12 15 06

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of **1**  
 3. Emergency Response Phone: **302 652-8859**  
 4. Waste Tracking Number: **1119**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA), 1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 880050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Dethel Sanitary Landfill, 100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539 Transaction# 30195-6**  
**PA 7 D 12 1 6 Net Weight: 19.75**  
**Job# VIENNA-MGEM**

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: **R M Hact** Signature: *[Signature]* Month: **12** Day: **18** Year: **06**

GENERATOR  
INTL  
TRANSPORTER  
DESIGNATED FACILITY

15. International Shipments  Import to U.S.  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: \_\_\_\_\_  
 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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1120**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address

U.S. EPA ID Number  
**NOT REQUIRED**

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**  
*16*

**Transaction#:**  
**Net Weight:**

**Job#VIENNA-MGEM**

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: *R.M. Harris* Signature: *[Signature]* Month: Day: Year:

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name: *R. Scott* Signature: *[Signature]* Month: Day: Year:  
Transporter 2 Printed/Typed Name: Signature: Month: Day: Year:

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: *[Signature]* Signature: *[Signature]* Month: Day: Year: *12 18 06*

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of: **1**  
 3. Emergency Response Phone: **302 652-8899**  
 4. Waste Tracking Number: **1121**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St, Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Purecar Trucking** U.S. EPA ID Number: **DOT# 89050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23065** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-866-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information:  
 Project# 116530  
 Transaction#: 301964  
 Net Weight: 21.80  
 Job# VIENNA-MGEM

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: *R. Miller* Signature: *[Signature]* Month: 11 Day: 18 Year: 06

15. International Shipments  Import to U.S.  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: \_\_\_\_\_  
 Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

17. Discrepancy  
 17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: 10 Day: 10 Year: 10

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1122

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 301 967

T-11

Net Weight: 41440 20-72

Job#VIENNA-MGEM

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

R. M. Hart

Signature

*R. M. Hart*

Month Day Year

12 18 06

15. International Shipments  Import to U.S.  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

Signature

T. Sheppard

*T. Sheppard*

Month Day Year

12 18 06

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

B. Sumrell

Signature

*B. Sumrell*

Month Day Year

12 18 06

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1123**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301973**

**AT-17**

**Net Weight: 24.09**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*R.M. Hart*

Signature

*R.M. Hart*

Month Day Year

**12 18 06**

15. International Shipments  Import to U.S.  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

*Robert Carpenter*

Signature

*Robert Carpenter*

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*L Adams*

Month Day Year

**12 18 06**

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1124

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 301976

P-74

Net Weight: 23.71

Job#VIENNA-MGEM

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/Offor's Printed/Typed Name

BMHant

Signature

[Signature]

Month Day Year 12 18 06

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

BRUCE BUGG

Signature

[Signature]

Month Day Year

12 18 06

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Julia Adams

Signature

[Signature]

Month Day Year

12 18 06

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number

**A25**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**0-7**

**Net Weight:**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**RM Hans**

Signature

*[Signature]*

Month Day Year

**12/15/06**

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]*

Signature

*[Signature]*

Month Day Year

**12/15/06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Naure Adams**

Signature

*[Signature]*

Month Day Year

**12/18/06**

GENERATOR

INT'L  
TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

NOT REQUIRED

1

302.652.8989

1126

5. Generator's Name and Mailing Address

Generator's Site Address (if different than mailing address)

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Paradise Creek

Generator's Phone: 757.445.6703 Attn: Rob Schonk

6. Transporter 1 Company Name

U.S. EPA ID Number

Puryear Trucking

DOT# 896050

7. Transporter 2 Company Name

U.S. EPA ID Number

South Norfolk Trucking, Inc.

NOT REQUIRED

8. Designated Facility Name and Site Address

U.S. EPA ID Number

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 301983

T-10

Net Weight: 17.89

Job#VIENNA-MGEM

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/Offor's Printed/Typed Name

RM Hart

Signature

[Signature]

Month Day Year 12/18/06

15. International Shipments  Import to U.S.  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

L.R

Signature

[Signature]

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Carla Adams

[Signature]

Month Day Year 12/18/06

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1127**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 301927**

**P-73**

**Net Weight: 1559 tons**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*Rob Schonk*

Signature

*Rob Schonk*

Month Day Year

**12/18/06**

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

*Jerry Wood*

Signature

*Jerry Wood*

Month Day Year

**12/18/06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*John Adams*

Signature

*John Adams*

Month Day Year

**12/18/06**

GENERATOR

INT'L TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1128**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**  
U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**  
U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
U.S. EPA ID Number  
**NOT REQUIRED**  
Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539      Transaction#:**  
**36      Net Weight: 21.88      Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name  
**R M Hunt**  
Signature  
*[Signature]*  
Month Day Year  
**12 18 02**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter Signature (for exports only): \_\_\_\_\_  
Transporter 1 Printed/Typed Name  
**Chester D. SLADE**  
Signature  
*[Signature]*  
Month Day Year  
**12 18 02**  
Transporter 2 Printed/Typed Name  
**C Seede**  
Signature  
*[Signature]*  
Month Day Year  
**12 18 02**

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Laura Adams**  
Signature  
*[Signature]*  
Month Day Year  
**12 18 02**

GENERATOR

INT'L  
TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1129**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**301997**

**AT-14**

**Net Weight:**

**21.33**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R M Harris**

Signature

*[Signature]*

Month Day Year  
**12 18 06**

15. International Shipments  Import to U.S.  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

**RAY LLOYD**

Signature

*[Signature]*

Month Day Year

**12 18 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year

**12 18 08**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1130

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 302001

P-62

Net Weight: 13.70

Job#VIENNA-MGEM

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/Offor's Printed/Typed Name

Rm HART

Signature

*Rm Hart*

Month Day Year  
12 18 06

15. International Shipments  Import to U.S.  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

Signature

Jewell Y. Lockery

*Jewell Y. Lockery*

Month Day Year  
12 18 06

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 hazardous materials covered by the manifest except as noted in Item 17a

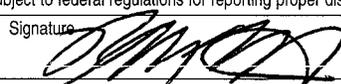
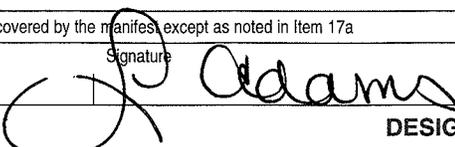
Printed/Typed Name

Signature

Laura Adams

*Laura Adams*

Month Day Year  
12 18 06

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>1131</b>		
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>		Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>				
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>						
6. Transporter 1 Company Name <b>Puryear Trucking</b>			U.S. EPA ID Number <b>DOT# 896050</b>			
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>			
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>			
Facility's Phone: <b>757-865-6070</b>						
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers	11. Total Quantity	12. Unit Wt./Vol.	
			No.      Type			
		<b>1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>
		<b>2.</b>				
		<b>3.</b>				
	<b>4.</b>					
13. Special Handling Instructions and Additional Information  <b>Project#116539      Transaction#: 302005</b> <b>P-69      Net Weight: 19.02</b> <b>Job#VIENNA-MGEM</b>						
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/Offor's Printed/Typed Name <b>R.M. Hart</b>		Signature 		Month <b>12</b>	Day <b>18</b>	
				Year <b>06</b>		
TRANSPORTER INT'L	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	Transporter 1 Printed/Typed Name <b>Monette Madison</b>		Signature 		Month <b>12</b>	
	Transporter 2 Printed/Typed Name		Signature		Day <b>18</b>	
				Year <b>06</b>		
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 hazardous materials covered by the manifest except as noted in Item 17a						
Printed/Typed Name <b>Kathryn Adams</b>		Signature 		Month <b>12</b>	Day <b>18</b>	
				Year <b>06</b>		

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1132**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**  
**18**

**Transaction#: 302009**  
**Net Weight: 20.94**

**Job#VIENNA-MGEM**

14. GENERATOR'S CERTIFICATION: I certify the materials described above are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Generator's/Officer's Printed/Typed Name **B M Hart** Signature *[Signature]* Month **12** Day **18** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **KW Falls** Signature *[Signature]* Month **12** Day **18** Year **06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Naureen Adams** Signature *[Signature]* Month **12** Day **18** Year **06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1133**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#: 302011**  
**RDQ#1**      **Net Weight: 26.46 TONS**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name: **R.M. HART**      Signature: *[Signature]*      Month: **12** Day: **18** Year: **06**

15. International Shipments  Import to U.S.  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: **RANDALL D ROGERSON**      Signature: *[Signature]*      Month: **12** Day: **18** Year: **06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: **Laura Adams**      Signature: *[Signature]*      Month: **12** Day: **18** Year: **06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1134**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-8070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#:** 302024  
*R 88*      **Net Weight:** 18.97

**Job#VIENNA-MGEM**

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: *RM Hart*      Signature: *[Signature]*      Month Day Year: *12 18 06*

15. International Shipments     Import to U.S.     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: *JOE W GRIFFIN*      Signature: *[Signature]*      Month Day Year: *12 18 06*

Transporter 2 Printed/Typed Name: \_\_\_\_\_      Signature: \_\_\_\_\_      Month Day Year: \_\_\_\_\_

17. Discrepancy

17a. Discrepancy Indication Space     Quantity     Type     Residue     Partial Rejection     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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: *[Signature]*      Signature: *[Signature]*      Month Day Year: *12 18 06*

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
2. Page 1 of **1**  
3. Emergency Response Phone: **302 652-0999**  
4. Waste Tracking Number: **1135**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Site Address (if different than mailing address): **Paradise Creek**  
Generator's Phone: **757 445-5703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 888050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23066** U.S. EPA ID Number: **NOT REQUIRED**  
Facility's Phone: **757-265-8070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 115539 Transaction#:**  
**DAVIS #12 Net Weight:**  
**Job# VIENNA-MGEM**

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: **RM HART** Signature: **[Signature]** Month Day Year: **12 18 06**

15. International Shipments  Import to U.S.  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: \_\_\_\_\_  
Transporter 2 Printed/Typed Name: **Walter Grant** Signature: **[Signature]** Month Day Year: **12 18 06**

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month Day Year: \_\_\_\_\_

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8898**

4. Waste Tracking Number  
**1136**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703** Attn: **Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Payear Trucking**

U.S. EPA ID Number  
**DOT# 886160**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23066**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**      **Transaction# 302028**  
**P.S.L.**      **Net Weight: 21.86**  
**Job# VIENNA-MGEM**

**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: **R.M. HART**      Signature: *[Signature]*      Month:      Day:      Year:

INT'L

15. International Shipments       Import to U.S.       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: **JOHN CART**      Signature: *[Signature]*      Month: **13**      Day: **12**      Year: **06**  
Transporter 2 Printed/Typed Name:      Signature:      Month:      Day:      Year:

DESIGNATED FACILITY

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)      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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name:      Signature:      Month:      Day:      Year:

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**202 642-8609**

4. Waste Tracking Number  
**1137**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-5703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116530**      **Transaction#:** **302031**  
**Net Weight:** **18-75**  
**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year **12/1/06**

GENERATOR

TRANSPORTER INT'L

15. International Shipments     Import to U.S.     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 \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

DESIGNATED FACILITY

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) \_\_\_\_\_ 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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of 1

3. Emergency Response Phone

302-652-8999

4. Waste Tracking Number

1138

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757-445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No. Type

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#:

14

Net Weight:

24.83

Job#VIENNA-MGEM

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/Offor's Printed/Typed Name

RM HART

Signature

[Signature]

Month Day Year

12 18 09

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

Q. Cross

Signature

[Signature]

Month Day Year

12 18 06

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Adams

[Signature]

Month Day Year

12 18 06

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1139**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#:** **302037**  
**P-68**      **Net Weight:** **21.67**  
**Job#VIENNA-MGEM**

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: **R.M. Hart**      Signature: *[Signature]*      Month: **12** Day: **18** Year: **06**

15. International Shipments     Import to U.S.     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: **Mark Mitchell**      Signature: \_\_\_\_\_      Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: **Aura Adams**      Signature: *[Signature]*      Month: **12** Day: **18** Year: **06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1140**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**  
**P-72**

**Transaction#: 300089**  
**Net Weight: 2300**

**Job# VIENNA-MGEM**

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 **RM Harris** Signature *[Signature]* Month **12** Day **18** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **Joe A Mullins** Signature *[Signature]* Month **12** Day **18** Year **06**

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **18** Year **06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of **1**  
 3. Emergency Response Phone: **302 652-0000**  
 4. Waste Tracking Number: **1147**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA), 1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 898050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill, 100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information:  
 Project# 118530 Transactions: 302042  
 P-64 Net Weight: 19.17  
 Job# VIENNA-MGEM

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/Offor's Printed/Typed Name: **BM Hart** Signature: *[Signature]* Month: **12** Day: **18** Year: **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: **MARY KELLEY** Signature: *[Signature]* Month: **12** Day: **18** Year: **06**  
 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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: *[Signature]* Signature: *[Signature]* Month: **12** Day: **18** Year: **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1142**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**P-63**

**Transaction#:**

**302050**

**Net Weight:**

**19.40**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

*RMHans*

Signature

*RMHans*

Month Day Year

**12/18/06**

INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**MARLON MITCHELL**

Signature

*Marlon Mitchell*

Month Day Year

**12/18/06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*Laura Adams*

Month Day Year

**12/18/06**

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 692-4000</b>	4. Waste Tracking Number <b>1143</b>			
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>		Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>					
Generator's Phone: <b>757 445-6700 Attn: Rob Schonk</b>							
6. Transporter 1 Company Name <b>Puryear Trucking</b>		U.S. EPA ID Number <b>DOT# 896150</b>					
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>					
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>					
Facility's Phone: <b>757-865-6170</b>							
<b>GENERATOR</b>	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers	11. Total Quantity	12. Unit Wt./Vol.		
			No. Type				
		1. <b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>	DT	20	T	<b>NONE</b>	
		2.					
		3.					
	4.						
13. Special Handling Instructions and Additional Information  <b>Project# 116530      Transaction#: 302049</b> <b>PAID. 07 6      Net Weight: 20.10      Job# VIENNA-MGEM</b>							
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/Offor's Printed/Typed Name <b>11/11/09</b>		Signature <b>[Signature]</b>		Month Day Year <b>12/18/09</b>			
<b>TRANSPORTER INT'L</b>	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		Signature		Month Day Year		
Transporter 2 Printed/Typed Name		Signature		Month Day Year			
<b>DESIGNATED FACILITY</b>	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 hazardous materials covered by the manifest except as noted in Item 17a							
Printed/Typed Name		Signature		Month Day Year			

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1144

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

6

Transaction#:

Net Weight:

22.22

Job#VIENNA-MGEM

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

RM Hart

Signature

RM Hart

Month Day Year 12 18 06

15. International Shipments

Import to U.S.

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

R Scott

Signature

R Awee

Month Day Year 12 18 06

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Laura Adams

Signature

Laura Adams

Month Day Year 12 18 06

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1145**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

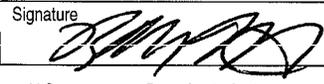
U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

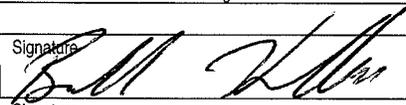
U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539 Transaction#: 302 055**  
**AT-11 Net Weight: 16.98**  
**Job# VIENNA-MGEM**

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 **R M Hart** Signature  Month **12** Day **18** Year **06**

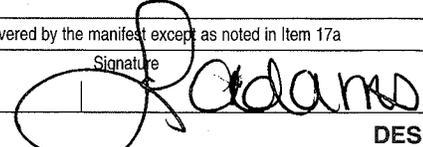
15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Bill Holland** Signature  Month **12** Day **18** Year **06**  
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) 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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Adams** Signature  Month **12** Day **18** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**

3. Emergency Response Phone  
**302.652.8999**

4. Waste Tracking Number  
**1146**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**2129**

**Net Weight:**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **R M HART** Signature *[Signature]* Month Day Year

GENERATOR

15. International Shipments  Import to U.S.  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 **Rich Troutman** Signature *[Signature]* Month Day Year **12 18 06**  
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

DESIGNATED FACILITY

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 hazardous materials covered by the manifest, except as noted in Item 17a  
Printed/Typed Name **Laurea Adams** Signature *[Signature]* Month Day Year **12 18 02**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1147**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302059**

**AT17**

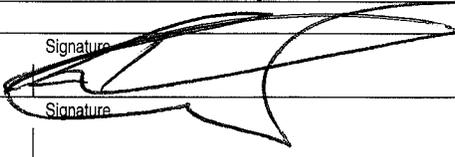
**Net Weight: 24.18**

**Job#VIENNA-MGEM**

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/Offeror's Printed/Typed Name **R M Hart** Signature  Month **12** Day **18** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

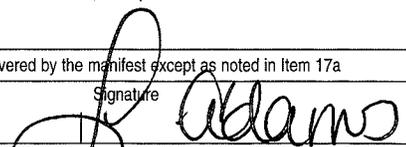
16. Transporter Acknowledgment of Receipt of Materials  
Transporter Signature (for exports only): \_\_\_\_\_  
Transporter 1 Printed/Typed Name **Robert Carpenter** Signature  Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature  Month **12** Day **18** Year **06**

GENERATOR  
TRANSPORTER INT'L  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of 1

3. Emergency Response Phone

302.652.8999

4. Waste Tracking Number

1148

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 302061

P-76

Net Weight: 22.42

Job#VIENNA-MGEM

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/Offor's Printed/Typed Name

R. M. Hart

Signature

[Signature]

Month Day Year

12 18 06

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

BRUCE BUGG

Signature

[Signature]

Month Day Year

12 18 06

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Robert Adams

Signature

[Signature]

Month Day Year

12 18 06

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1149**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23866  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number

**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

*P-73*

**Transaction#: 302063**

**Net Weight: 22.80 Tons**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

*BM HART*

Signature

*[Signature]*

Month Day Year

*12 18 06*

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

*Nancy Winch*

Signature

*[Signature]*

Month Day Year

*12 18 06*

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*[Signature]*

Month Day Year

*12 18 06*

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of 1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1150

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 302066

AT-14

Net Weight: 22.25

Job#VIENNA-MGEM

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/Offoror's Printed/Typed Name

RM Hart

Signature

[Signature]

Month Day Year

12 18 05

GENERATOR  
INT'L  
TRANSPORTER

15. International Shipments

Import to U.S.

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

Signature

Month Day Year

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

DESIGNATED FACILITY

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year

12 18 06

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1151**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539 Transaction#: 302067**  
**R-69 Net Weight: 21.63**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **B.M. HART** Signature *[Signature]* Month **12** Day **18** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Monette Madison** Signature *[Signature]* Month **12** Day **18** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Paul Adams** Signature *[Signature]* Month **12** Day **18** Year **06**

GENERATOR  
TRANSPORTER INT'L  
TRANSPORTER  
DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>1152</b>		
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>		Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>				
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>						
6. Transporter 1 Company Name <b>Puryear Trucking</b>			U.S. EPA ID Number <b>DOT# 896050</b>			
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>			
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>			
Facility's Phone: <b>757-865-6070</b>						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
	2.					
	3.					
4.						
13. Special Handling Instructions and Additional Information  <b>Project#116539      Transaction#: 302088</b> <b>RDR#1      Net Weight: 29.34 TONS</b> <div style="text-align:right;"><b>Job#VIENNA-MGEM</b></div>						
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 <b>RM Harris</b>		Signature <i>[Signature]</i>		Month <b>12</b>	Day <b>18</b>	
				Year <b>06</b>		
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 <b>RANDALL D. ROGERSON</b>		Signature <i>[Signature]</i>		Month <b>12</b>	Day <b>18</b>	
				Year <b>06</b>		
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 hazardous materials covered by the manifest except as noted in Item 17a						
Printed/Typed Name <b>Laura Adams</b>		Signature <i>[Signature]</i>		Month <b>12</b>	Day <b>18</b>	
				Year <b>06</b>		

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of: **1**  
 3. Emergency Response Phone: **302 662-8000**  
 4. Waste Tracking Number: **775 3**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA), 1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Puryeur Trucking** U.S. EPA ID Number: **DOT# 090050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill, 100 North Park Lane, Hampton, VA 23686** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-806-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information:  
**Project# 118530 Transaction# 307114**  
**Net Weight: 19.25 Job# VIENNA-NGEM**

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/Offor's Printed/Typed Name: **S.M. HARRIS** Signature: **[Signature]** Month: **11** Day: **11** Year: **11**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: **WILLIAM P. HARRIS** Signature: **[Signature]** Month: **11** Day: **11** Year: **11**  
 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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number NOT REQUIRED

2. Page 1 of 1

3. Emergency Response Phone 302 (52-8000)

4. Waste Tracking Number 1154

5. Generator's Name and Mailing Address Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St, Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address) Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schork

6. Transporter 1 Company Name Furey Trucking

U.S. EPA ID Number DOT# 636050

7. Transporter 2 Company Name South Norfolk Trucking, Inc.

U.S. EPA ID Number NOT REQUIRED

8. Designated Facility Name and Site Address Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23066 Facility's Phone: 757-885-6070

U.S. EPA ID Number NOT REQUIRED

Table with 6 columns: 9a. HM, 9b. U.S. DOT Description, 10. Containers (No., Type), 11. Total Quantity, 12. Unit Wt./Vol., and a final column for additional info. Row 1: Non RCRA, Non DOT Regulated Soil contaminated with Wood debris, 20, DT, T, NONE.

13. Special Handling Instructions and Additional Information Project# 116530 Transaction# 302116 Net Weight: 27.00 Job# VIENNA-MGEM

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/Offor's Printed/Typed Name R M HAST Signature [Signature] Month Day Year

15. International Shipments [ ] Import to U.S. [ ] 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 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: 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 hazardous materials covered by the manifest except as noted in Item 17a Printed/Typed Name Signature Month Day Year

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1155**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302119**

**Net Weight: 26.07**

**Job#VIENNA-MGEM**

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

*B.M. Hart*

Signature

*B.M. Hart*

Month Day Year

15. International Shipments  Import to U.S.  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

*A. Cross*

Signature

*A. Cross*

Month Day Year

*12 19 06*

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

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*SOANN BARLOW*

Signature

*Soann Barlow*

Month Day Year

*12 19 06*

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of 1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1156

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No. Type

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

16

Transaction#:

Net Weight:

Job#VIENNA-MGEM

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/Offoror's Printed/Typed Name

B.M. Hart

Signature

[Signature]

Month Day Year

12/19/06

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

R Scott

Signature

[Signature]

Month Day Year

12/19/06

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 hazardous materials covered by the manifest except as noted in Item 7/a

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year

12/19/06

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1157**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302128**

**Net Weight:**

**23.20**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*BM Howe*

Signature

*BM Howe*

Month Day Year

**1 21 06**

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

*Rick Trotman*

Signature

*Rick Trotman*

Month Day Year

**12 19 06**

Transporter 2 Printed/Typed Name

Signature

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*B Sumrell*

Signature

*B Sumrell*

Month Day Year

**12 19 06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1158

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 302131

AT17

Net Weight: 23.63

Job#VIENNA-MGEM

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/Offoror's Printed/Typed Name

R.M. Hart

Signature

[Signature]

Month Day Year

12 19 06

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

Robert Carpenter

Signature

[Signature]

Month Day Year

Transporter 2 Printed/Typed Name

Signature

[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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

[Signature]

Month Day Year

12 19 06

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1159**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302132**

**P-68**

**Net Weight: 23.85**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**Rm Hart**

Signature

**[Signature]**

Month Day Year  
**12/19/06**

INT'L

15. International Shipments  Import to U.S.  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

**Mark Mitchell**

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**JOANN BARLOW**

Signature

**[Signature]**

Month Day Year

**12/19/06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302-652-8999**

4. Waste Tracking Number

**1160**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**P-69**

**Transaction#:**

**302158**

**Net Weight:**

**22.54**

**Job# VIENNA-MGEM**

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

**R M Hart**

Signature

*[Signature]*

Month Day Year

**12 17 06**

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

**Monette Madison**

Signature

*[Signature]*

Month Day Year

**12 19 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Robert Adams**

Signature

*[Signature]*

Month Day Year

**12 18 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1161**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302155**

**AT14**

**Net Weight:**

**23.10**

**Job#VIENNA-MGEM**

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

**R M Hart**

Signature

*[Signature]*

Month Day Year  
**12 19 06**

INT'L

15. International Shipments  Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Debra Adams**

Signature

*[Signature]*

Month Day Year

**12 19 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number: NOT REQUIRED  
2. Page 1 of 1  
3. Emergency Response Phone: 302-652-8999  
4. Waste Tracking Number: 1162

5. Generator's Name and Mailing Address: Commander, Navy Region Mid-Atlantic (CNRMA), 1510 Gilbert St., Norfolk, VA 23511-2737  
Generator's Site Address (if different than mailing address): Paradise Creek  
Generator's Phone: 757-445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name: Puryear Trucking U.S. EPA ID Number: DOT# 896050  
7. Transporter 2 Company Name: South Norfolk Trucking, Inc. U.S. EPA ID Number: NOT REQUIRED

8. Designated Facility Name and Site Address: Bethel Sanitary Landfill, 100 North Park Lane, Hampton, VA 23666  
Facility's Phone: 757-865-6070 U.S. EPA ID Number: NOT REQUIRED

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
Project# 116539 Transaction#: 302159  
P-72 Net Weight: 04.43  
Job# VIENNA-MGEM

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] Signature: [Signature] Month: 12 Day: 19 Year: 06

15. International Shipments  Import to U.S.  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] Signature: [Signature] Month: 12 Day: 19 Year: 06  
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) 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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: Laura Adams Signature: [Signature] Month: 12 Day: 19 Year: 06

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8000**

4. Waste Tracking Number  
**1163**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMIA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Phone: **757 445-6703 Attn: Rob Schenk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Flyyear Trucking**

U.S. EPA ID Number  
**DOT# 898050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Seminary Landfill  
100 North Park Lane, Hampton, VA 23066**

Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM

9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# **116530**

Transaction# **302162**

**DH1**

Net Weight **20.16**

Job# **VIENNA-MGEM**

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/Offor's Printed/Typed Name

Signature

Month Day Year

INT'L

15. International Shipments  Import to U.S.  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

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

1

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1164**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:** **302146**

**Net Weight:** **17.21**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*Bob Hart*

Signature

*Bob Hart*

Month Day Year  
**12 17 06**

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

*Jewell Y. Lockamy P-62*

Signature

*Jewell Y. Lockamy P-62*

Month Day Year  
**12 19 06**

Transporter 2 Printed/Typed Name

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*Laura Adams*

Month Day Year  
**12 19 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1165**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-665-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
	2.					
	3.					
	4.					

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**Davis 2**

**Net Weight:**

**Job#VIENNA-MGEM**

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 **R M Hart** Signature *[Signature]* Month **12** Day **18** Year **06**

15. International Shipments  Import to U.S.  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 \_\_\_\_\_

Transporter 2 Printed/Typed Name **Vrette Grant** Signature *[Signature]* Month **12** Day **19** Year **06**

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **19** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8000**

4. Waste Tracking Number  
**1166**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-8703 Attn: Rob Schenk**

6. Transporter 1 Company Name  
**Furyear Trucking**

U.S. EPA ID Number  
**DOT# B06050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23606**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-0070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# **116539**

Transaction#:

**3021163**

**D-64**

Net Weight:

**18.70**

Job# **VIENNA-MGEM**

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/Offor's Printed/Typed Name

Signature

Month Day Year  
**12/19/06**

INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year  
**12/19/06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year  
**12/19/06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1167**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302174**

**P-61**

**Net Weight:**

**16.39**

**Job#VIENNA-MGEM**

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

**R M HART**

Signature

*[Signature]*

Month Day Year

**12 15 00**

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

**Andera Clark**

Signature

*[Signature]*

Month Day Year

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

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Karina Adams**

Signature

*[Signature]*

Month Day Year

**12 19 00**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302-652-8999

4. Waste Tracking Number

1168

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23686

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

P-58

Transaction#:

302169

Net Weight:

16.59

Job#VIENNA-MGEM

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

R M Hunt

Signature

[Signature]

Month Day Year

12 17 06

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

JOE W GRIFFIN

Signature

[Signature]

Month Day Year

12 18 06

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year

12 19 06

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1169**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302168**

**Net Weight:**

**21.02**

**Job#VIENNA-MGEM**

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

*BMHART*

Signature

*BMHART*

Month Day Year

*12 19 06*

INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

*Mark*

Signature

*Mark*

Month Day Year

*12 19 06*

Transporter 2 Printed/Typed Name

Signature

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*SOANN BARLOW*

Signature

*Soann Barlow*

Month Day Year

*12 19 06*

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

1

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1170**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302172**

*P-59*

**Net Weight: 16.63**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*R M Hantz*

Signature

*[Signature]*

Month Day Year  
**12 19 08**

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

INT'L

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

*Bill Holand*

Signature

*[Signature]*

Month Day Year  
**12 19 08**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

TRANSPORTER

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

DESIGNATED FACILITY

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Kelura Adams*

Signature

*[Signature]*

Month Day Year  
**12 19 08**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-0900**

4. Waste Tracking Number  
**1171**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703** Attn: **Rob Schonk**

6. Transporter 1 Company Name  
**Furyear Trucking**

U.S. EPA ID Number  
**DOT# 090050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23066**  
Facility's Phone: **757-865-0070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

Project# **115539**

Transaction# **302 186**

Net Weight: **18.35**

Job# **VIENNA-MGEM**

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

*BM Harris*

*[Signature]*

**12/19/00**

INT'L

15. International Shipments

Import to U.S.

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

*W.R. Wilson*

*[Signature]*

**12/17/00**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1172

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 302187

RDR-1

Net Weight: 29.54 TONS

Job#VIENNA-MGEM

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/Offor's Printed/Typed Name

RM Hart

Signature

[Signature]

Month Day Year

12 19 06

15. International Shipments  Import to U.S.  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

RANDALL D NEERGA

Signature

[Signature]

Month Day Year

12 19 06

Transporter 2 Printed/Typed Name

Signature

Month Day Year

12 19 06

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Paula Adams

[Signature]

Month Day Year

12 19 06

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8650**

4. Waste Tracking Number  
**1173**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryas Trucking**

U.S. EPA ID Number  
**DOT# 886050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-8070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 302190  
Net Weight: 18.95 Job#VIENNA-MGEM**

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: \_\_\_\_\_

15. International Shipments  Import to U.S.  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: \_\_\_\_\_  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

GENERATOR  
TRANSPORTER INT'L  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1174**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**      **Transaction#: 302188**  
**Net Weight: 21.28**      **Job# VIENNA-MGEM**  
*Pay print 6*

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/Offeror's Printed/Typed Name: **B.M. Hart**      Signature: *[Signature]*      Month: **12** Day: **15** Year: **06**

15. International Shipments       Import to U.S.       Export from U.S.      Port of entry/exit:      Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name: **Charles Aramington**      Signature: *[Signature]*      Month:      Day:      Year:  
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:

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 hazardous materials covered by the manifest except as noted in Item 17a.  
Printed/Typed Name: **JOANN BARLOW**      Signature: *[Signature]*      Month: **12** Day: **19** Year: **06**

GENERATOR  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1175**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302195**

**14**

**Net Weight: 25.18**

**Job#VIENNA-MGEM**

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  
**R M Hart**

Signature  
*[Signature]*

Month Day Year

INT'L

15. International Shipments  Import to U.S.  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]**

Signature  
*[Signature]*

Month Day Year  
**12 19 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**[Signature]**

Signature  
*[Signature]*

Month Day Year  
**12 19 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**

3. Emergency Response Phone  
**302-652-8999**

4. Waste Tracking Number  
**1176**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302198**

**Net Weight:**

**22.86**

**Job#VIENNA-MGEM**

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

**B. M. HART**

Signature

*[Signature]*

Month Day Year  
**12 19 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

DESIGNATED FACILITY TO GENERATOR

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302-652-8999

4. Waste Tracking Number

1177

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23866

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#:

16

Net Weight:

Job#VIENNA-MGEM

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/Offor's Printed/Typed Name

R M Hart

Signature

[Signature]

Month Day Year  
12 19 06

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

R Scott

Signature

[Signature]

Month Day Year  
12 19 06

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Kawita Adams

[Signature]

Month Day Year  
12 19 06

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1178**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302209**

**AT 17**

**Net Weight: 23.36**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **R.M. HART** Signature *[Signature]* Month **12** Day **19** Year **06**

TRANSPORTER INT'L

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Robert Carpenter** Signature *[Signature]* Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

DESIGNATED FACILITY

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a.  
Printed/Typed Name **JOANN BARLOW** Signature *[Signature]* Month **12** Day **19** Year **06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1179**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302213**

**P-68**

**Net Weight: 21.81**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R M HANT**

Signature

**R M HANT**

Month Day Year  
**12 19 06**

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

**mark mitchell**

Signature

Month Day Year

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**JOANN BARLOW**

Signature

**Joann Barlow**

Month Day Year

**12 19 06**

FIC# 302232

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1180**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 19.20**  
**DAVIS #1 Net Weight: Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **R MITCHELL** Signature **[Signature]** Month **12** Day **19** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **GENEISE ADAMS** Signature **[Signature]** Month **12** Day **19** Year **06**  
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) 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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Geneise Adams** Signature **[Signature]** Month **12** Day **19** Year **06**

GENERATOR  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302.652-8999

4. Waste Tracking Number

1181

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project#116539

D-65

Transaction#:

302260

Net Weight:

19.94

Job#VIENNA-MGEM

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/Ofior's Printed/Typed Name

R. M. Hart

Signature

[Signature]

Month Day Year  
12 19 06

15. International Shipments  Import to U.S.  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

Monette Madison

Signature

[Signature]

Month Day Year  
12 15 06

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Kelisa Adams

Signature

[Signature]

Month Day Year  
12 19 06

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1182**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302264**

**AT14**

**Net Weight:**

**23.84**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**RM HANT**

Signature

*[Signature]*

Month Day Year  
**12/19/06**

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

INT'L

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**RAY LLOYD**

Signature

*[Signature]*

Month Day Year  
**12/19/06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

↑

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in item 17a

Printed/Typed Name

**Kawira Adams**

Signature

*[Signature]*

Month Day Year  
**12/19/06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of **1**  
 3. Emergency Response Phone: **302 652-8999**  
 4. Waste Tracking Number: **1183**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information:  
**Project#116539 Transaction#: 302870**  
**P-72 Net Weight: 23.05**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name: **R M Hart** Signature: *[Signature]* Month: **12** Day: **08** Year: **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: **Son A Mullins** Signature: *[Signature]* Month: **12** Day: **15** Year: **06**  
 Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

17. Discrepancy  
 17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: **Kaita Adams** Signature: *[Signature]* Month: **12** Day: **19** Year: **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1184**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302273**

**P-64**

**Net Weight:**

**17.73**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R. M. Hantz**

Signature

**R. M. Hantz**

Month Day Year

**12/19/06**

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**Mary Kelley**

Signature

**M. Kelley**

Month Day Year

**12/19/06**

Transporter 2 Printed/Typed Name

Signature

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

**L. Adams**

Month Day Year

**12/19/06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-2000**

4. Waste Tracking Number  
**1185**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23065**

Facility's Phone: **757-665-0070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#110500 Transactions#:**  
**DAVIS #2 Net Weight:**

**Job#VIENNA-MGEM**

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: \_\_\_\_\_

GENERATOR

TRANSPORTER

15. International Shipments  Import to U.S.  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: \_\_\_\_\_

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: \_\_\_\_\_

DESIGNATED FACILITY

17b. Alternate Facility (or Generator) \_\_\_\_\_ U.S. EPA ID Number \_\_\_\_\_

Facility's Phone: \_\_\_\_\_

17c. Signature of Alternate Facility (or Generator) \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8800**

4. Waste Tracking Number  
**1186**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6700** Attn: **Rob Schenk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 606050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bothel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23660**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# **116539**

Transaction#:

**302303**

**DH 1**

Net Weight:

**20.50**

Job# **VIENNA-MGEM**

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  
**12/19/06**

INT'L

15. International Shipments  Import to U.S.  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

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1187**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539      Transaction#: 302258**  
**Net Weight: 22.67      Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **BM Hart** Signature **BM Hart** Month **12** Day **19** Year **06**

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 **Mark** Signature **Mark** Month **12** Day **19** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Adam Adams** Signature **Adam Adams** Month **12** Day **19** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**11880**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:** 302295

P-62

**Net Weight:** 18-25

**Job#VIENNA-MGEM**

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

*R M Hartz*

Signature

*R M Hartz*

Month Day Year  
**12 19 06**

INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

*Jewell Plockery P-62*

Signature

*Jewell Plockery P-62*

Month Day Year  
**12 19 09**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in item 17a

Printed/Typed Name

*Laura Adams*

Signature

*L. Adams*

Month Day Year  
**12 19 08**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1189**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302297**

**Net Weight:**

**16.63**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**RM Harris**

Signature

*[Signature]*

Month Day Year

15. International Shipments

Import to U.S.

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

**JOE W GRIFFIN**

Signature

*[Signature]*

Month Day Year

**12 19 06**

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:

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 hazardous materials covered by the manifest, except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year

**12 14 06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1190**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302 312**

**P-61**

**Net Weight:**

**18.02**

**Job#VIENNA-MGEM**

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

**R M Hant**

Signature

**[Signature]**

Month Day Year  
**12 19 06**

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**Andrea Clark**

Signature

**[Signature]**

Month Day Year  
**12 19 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

**[Signature]**

Month Day Year  
**12 19 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

1

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1191**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

*P-59*

**Transaction#:**

*302306*

**Net Weight:**

*16.89*

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*RM HANT*

Signature

*[Signature]*

Month Day Year

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

*PERKINS, Tremont*

Signature

*[Signature]*

Month Day Year

*Dec 19 06*

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*[Signature]*

Month Day Year

*12 19 06*

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1192**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 302 302**

*Handwritten: PAYDIRT 6*

**Net Weight: 2109**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name *RM Hant* Signature *[Signature]* Month *12* Day *18* Year *2006*

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name *Cleveland Harrington* Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name *JOANN BARLOW* Signature *[Signature]* Month *12* Day *19* Year *06*

GENERATOR

INT'L  
TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 602-8000**

4. Waste Tracking Number  
**1193**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 446-6703 Attn: Rob Schenk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOTW 800050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23660  
757 565-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116530**

**Transaction#: 302 317**

**Net Weight: 18.87**

**Job# VIENNA-MGEM**

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

15. International Shipments  Import to U.S.  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

Signature

Month Day Year

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1194**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking** U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.** U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number  
**NOT REQUIRED**  
Facility's Phone: **757-865-6070**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302307**

**Net Weight: 24.96**

**Job#VIENNA-MGEM**

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 **RMH** Signature **[Signature]** Month **12** Day **19** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **D. Cross** Signature **[Signature]** Month **12** Day **19** Year **06**  
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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **SOANN BARLOW** Signature **[Signature]** Month **12** Day **19** Year **06**

GENERATOR

INT'L TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8000**

4. Waste Tracking Number

**1195**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St, Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-5703** Attn: **Rob Schonk**

6. Transporter 1 Company Name  
**Pureyear Trucking**

U.S. EPA ID Number  
**DOT# 886050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bothel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-0070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

Project# **118539**

Transaction#:

**302 359**

**CIA 1**

Net Weight:

**18.45**

Job# **VIENNA-MGEM**

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]*

Signature

*[Signature]*

Month Day Year

**11/14/06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

15. International Shipments

Import to U.S.

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

Signature

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1196**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539 Transaction#:**  
**16 Net Weight: Job#VIENNA-MGEM**

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 **R M Harris** Signature *[Signature]* Month **12** Day **19** Year **06**

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 **R. Scott** Signature *[Signature]* Month **12** Day **19** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **19** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1197**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539 Transaction#: 302321**  
**Net Weight: 1752 Job#VIENNA-MGEM**  
*Maneoni*

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/Offor's Printed/Typed Name *R M Hart* Signature *[Signature]* Month **12** Day **19** Year **06**

INT'L

15. International Shipments  Import to U.S.  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 *KIKIE* Signature *[Signature]* Month **12** Day **19** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

DESIGNATED FACILITY

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name *Laura Adams* Signature *[Signature]* Month **12** Day **19** Year **06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1198**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302324**

**18**

**Net Weight:**

**22.28**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **RM Hart** Signature **[Signature]** Month Day Year

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **Rick Trotter** Signature **[Signature]** Month Day Year **12/19/06**

Transporter 2 Printed/Typed Name Signature Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Naura Adams** Signature **[Signature]** Month Day Year **12/19/06**

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1199**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302329**

**AT17**

**Net Weight: 23.21**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*RM Hart*

Signature

*[Signature]*

Month Day Year

**12/19/09**

15. International Shipments

Import to U.S.

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

*Robert Carpenter*

Signature

*[Signature]*

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Carver Adams*

Signature

*[Signature]*

Month Day Year

**12/19/09**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1200**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302336**

**RDR#1**

**Net Weight:**

**27.39 TONS**

**Job#VIENNA-MGEM**

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

**B. M. HART**

Signature

*[Signature]*

Month Day Year  
**12 19 06**

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

**RANDALL D ROGERSON**

Signature

*[Signature]*

Month Day Year  
**12 19 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year  
**12 19 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1201

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 3027331

P-68

Net Weight: 21.84

Job# VIENNA-MGEM

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/Offor's Printed/Typed Name

R M Hart

Signature

[Signature]

Month Day Year 12 19 06

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

Mark Mitchell

Signature

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Alita Adams

Signature

[Signature]

Month Day Year 12 19 06

TIC#302335

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1202**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**20.28**

**DAVES #1**

**Net Weight:**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**RM HART**

Signature

*[Signature]*

Month Day Year  
**12 19 06**

INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**DENISE ADAMS**

Signature

*[Signature]*

Month Day Year  
**12 19 06**

Transporter 2 Printed/Typed Name

Signature

DESIGNATED FACILITY

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

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**SOANN BARLOW**

Signature

*[Signature]*

Month Day Year  
**12 19 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1203**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302342**

**P-78**

**Net Weight:**

**19.69**

**Job#VIENNA-MGEM**

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

**RM Hans**

Signature

**RM Hans**

Month Day Year  
**12/19/06**

INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**Charles Wilson**

Signature

**CW Wilson**

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

**L Adams**

Month Day Year  
**12/19/06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of **1**  
 3. Emergency Response Phone: **302 652-8999**  
 4. Waste Tracking Number: **1204**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information:  
**Project#116539 Transaction#: 302350**  
**P-69 Net Weight: 22.47 Job#VIENNA-MGEM**

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: **R.M. HART** Signature: *[Signature]* Month: **12** Day: **9** Year: **06**

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: **Monette Madison** Signature: *[Signature]* Month: **12** Day: **9** Year: **06**  
 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: \_\_\_\_\_ 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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: **Naura Adams** Signature: *[Signature]* Month: **12** Day: **19** Year: **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1205**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302361**

**AT14**

**Net Weight:**

**21.75**

**Job#VIENNA-MGEM**

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

**R M Hart**

Signature

**[Signature]**

Month Day Year

**12/19/06**

15. International Shipments  Import to U.S.  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

**RAYLOYD**

Signature

**[Signature]**

Month Day Year

**12/19/06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

**[Signature]**

Month Day Year

**12/19/06**

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 662-8000</b>	4. Waste Tracking Number <b>1706</b>			
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (COMNA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>		Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>					
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>							
6. Transporter 1 Company Name <b>Fryrear Trucking</b>		U.S. EPA ID Number <b>DOT# 00000</b>					
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>					
8. Designated Facility Name and Site Address <b>Belthel Sanitary Landfill 100 North Park Lane, Hampton, VA 23068</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>					
Facility's Phone: <b>757-265-8070</b>							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
			No.	Type			
	1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
	2.						
	3.						
4.							
13. Special Handling Instructions and Additional Information <b>Project# 116530      Transaction#: 302 358</b> <b>Net Weight: 16.38</b> <b>Job# VIENNA-MGEM</b>							
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	
TRANSPORTER INT'L	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		Signature		Month	Day	Year	
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						
	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 hazardous materials covered by the manifest except as noted in item 17a							
Printed/Typed Name		Signature		Month	Day	Year	

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1207**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302306**

**P-72**

**Net Weight: 22.07**

**Job#VIENNA-MGEM**

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

**RM Hart**

Signature

*[Signature]*

Month Day Year  
**12 19 06**

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

Port of entry/exit:

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

**SON AMULLINS**

Signature

*[Signature]*

Month Day Year  
**12 19 06**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year  
**12 19 06**

GENERATOR

INT'L TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1208**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#: 302371**  
**Net Weight: 21.31**      **Job#VIENNA-MGEM**

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 **RM HANT**      Signature **[Signature]**      Month **12** Day **19** Year **06**

INT'L

15. International Shipments     Import to U.S.     Export from U.S.    Port of entry/exit: \_\_\_\_\_  
Transporter Signature (for exports only): \_\_\_\_\_    Date leaving U.S.: \_\_\_\_\_

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **[Signature]**      Signature **[Signature]**      Month **12** Day **19** Year **06**

Transporter 2 Printed/Typed Name \_\_\_\_\_      Signature \_\_\_\_\_      Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space     Quantity     Type     Residue     Partial Rejection     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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **SOANN BARLOW**      Signature **[Signature]**      Month **12** Day **19** Year **06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1209**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302372**

**D-64**

**Net Weight: 16.44**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**RM HART**

Signature

*[Signature]*

Month Day Year  
**12 19 06**

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

**MARY KELLEY**

Signature

*[Signature]*

Month Day Year  
**12 19 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Paula Adams**

Signature

*[Signature]*

Month Day Year  
**12 19 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1210

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 302380

P-62

Net Weight: 14.83

Job#VIENNA-MGEM

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

R M Hunt

Signature

[Signature]

Month Day Year

12 19 06

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

Jewell Y Kockany P-62

Signature

Jewell Y Kockany P-62

Month Day Year

12 19 06

Transporter 2 Printed/Typed Name

Signature

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Charles Adams

Signature

[Signature]

Month Day Year

12 19 06

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1211**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#:** **302386**  
**P-58**      **Net Weight:** **14.76**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **R M Hunt**      Signature *[Signature]*      Month **12** Day **19** Year **06**

15. International Shipments     Import to U.S.     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 **JOE W GRIFFIN**      Signature *[Signature]*      Month **12** Day **19** Year **06**

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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Kathryn Adams**      Signature *[Signature]*      Month **12** Day **19** Year **06**

GENERATOR

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8000**

4. Waste Tracking Number  
**1-212**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CHRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-0700 Attn: Rob Schenk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# R06050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23060  
757-865-8070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No. Type

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 302387**

**DH1**

**Net Weight: 19.38**

**Job# VIENNA-MGEM**

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

**R/M Hart**

Signature

*[Signature]*

Month Day Year  
**12 19 06**

15. International Shipments  Import to U.S.  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

Signature

Month Day Year

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 hazardous materials covered by the manifest except as noted in item 17a

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1213**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539 Transaction#: 802393**  
**Net Weight: 18.54**  
**Job# VIENNA-MGEM**  
**PAYDIRT 6**

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 **R M Hart** Signature *[Signature]* Month **12** Day **19** Year **06**

TRANSPORTER INT'L

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **CLEVELAND ARINGTON** Signature *[Signature]* Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

DESIGNATED FACILITY

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

17b. Alternate Facility (or Generator) Manifest Reference Number: \_\_\_\_\_ 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 hazardous materials covered by the manifest, except as noted in Item 17a

Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **19** Year **06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1214

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

13. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 302394

14

Net Weight: 22.33

Job# VIENNA-MGEM

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/Offor's Printed/Typed Name

B. M. HART

Signature

[Signature]

Month Day Year  
12 19 05

15. International Shipments  Import to U.S.  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

D. Cross

Signature

[Signature]

Month Day Year  
12 19 06

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

[Signature]

Signature

[Signature]

Month Day Year  
12 19 06

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1215**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil  
contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

*16*

**Net Weight:**

**Job#VIENNA-MGEM**

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/Offoror's Printed/Typed Name

*R M Hant*

Signature

*[Signature]*

Month Day Year  
**12 19 06**

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

*R Scott*

Signature

*[Signature]*

Month Day Year  
**12 19 06**

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 hazardous materials covered by the manifest except as noted in item 17a

Printed/Typed Name

*Bumrell*

Signature

*[Signature]*

Month Day Year  
**12 19 06**

GENERATOR

INT'L  
TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 852-4000**

4. Waste Tracking Number  
**1216**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703** Attn: **Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 890150**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23665**  
Facility's Phone: **757-805-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DDT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116530**

**Transaction#: 302911**

**P-59**

**Net Weight: 17.16 TONS**

**Job# VIENNA-MGEM**

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

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

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-6800**

4. Waste Tracking Number

**1217**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-5703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 890050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539 Transaction#: 302417  
Net Weight: 18.70 Job# VIENNA-MGEM**

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: **AN HAZI** Signature: **[Signature]** Month: **10** Day: **03** Year: **2000**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name: **W.S. [Signature]** Signature: **[Signature]** Month: **10** Day: **03** Year: **2000**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

GENERATOR  
TRANSPORTER INT'L  
DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1218**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address

U.S. EPA ID Number

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

Facility's Phone: **757-865-6070**

**NOT REQUIRED**

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No. Type

1. **Non RCRA, Non DOT Regulated Soil  
contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302422**

**MANCOON**

**Net Weight:**

**22.15**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**Rm Hans**

Signature

**[Signature]**

Month Day Year  
**12 19 06**

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]**

Signature

**[Signature]**

Month Day Year

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**[Signature]**

Signature

**[Signature]**

Month Day Year  
**12 19 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1219**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**Net Weight:**

**20.00**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*B.M. Hunt*

Signature

*B.M. Hunt*

Month Day Year

15. International Shipments  Import to U.S.  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

*Rick Trofman*

Signature

*Rick Trofman*

Month Day Year

**12 15 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*Laura Adams*

Month Day Year

**12 19 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8089**

4. Waste Tracking Number  
**1220**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 8960150**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Deibel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23066  
757-845-0070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM

9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))  
**1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

10. Containers  
No. Type

11. Total Quantity

12. Unit Wt./Vol.

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

Project# **116539**

Transaction# **302430**

**P. 52**

Net Weight: **22.75**

Job# **VIENNA-MGEM**

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/Offor's Printed/Typed Name

**K M Hoot**

Signature

*[Signature]*

Month Day Year

**11 19 06**

INT'L

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in item 17a

Printed/Typed Name

Signature

Month Day Year

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number NOT REQUIRED 2. Page 1 of 1 3. Emergency Response Phone 302 652-8999 4. Waste Tracking Number 1221

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
 Facility's Phone: **757-865-6070** U.S. EPA ID Number: **NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 302471**  
**AT 17 Net Weight: 23.35**  
**Job#VIENNA-MGEM**

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: **R M HART** Signature: *[Signature]* Month: Day: Year:

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: **Robert Carpenter** Signature: *[Signature]* Month: Day: Year:  
 Transporter 2 Printed/Typed Name: Signature: Month: Day: Year:

17. Discrepancy  
 17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: **Dumrell** Signature: *[Signature]* Month: Day: Year: **12/19/06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number NOT REQUIRED 2. Page 1 of 1 3. Emergency Response Phone 302 652-8999 4. Waste Tracking Number 1222

5. Generator's Name and Mailing Address: Commander, Navy Region Mid-Atlantic (CNRMA), 1510 Gilbert St., Norfolk, VA 23511-2737  
 Generator's Site Address (if different than mailing address): Paradise Creek  
 Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name: Puryear Trucking U.S. EPA ID Number: DOT# 896050

7. Transporter 2 Company Name: South Norfolk Trucking, Inc. U.S. EPA ID Number: NOT REQUIRED

8. Designated Facility Name and Site Address: Bethel Sanitary Landfill, 100 North Park Lane, Hampton, VA 23666  
 Facility's Phone: 757-865-6070 U.S. EPA ID Number: NOT REQUIRED

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
 Project# 116539 Transaction#: 302441  
 P 61 Net Weight: 23.41 Job# VIENNA-MGEM

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: Rm Hart Signature: [Signature] Month: 12 Day: 19 Year: 06

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: Andera clark Signature: [Signature] Month: 12 Day: 19 Year: 06  
 Transporter 2 Printed/Typed Name: Signature: [Signature] Month: Day: Year:

17. Discrepancy  
 17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: [Signature] Signature: [Signature] Month: 12 Day: 19 Year: 06

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number

**1223**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone:

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No. Type

1. **Non RCRA, Non DOT Regulated Soil  
contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302448 16.72**

**P-63**

**Net Weight:**

**33440**

**Job#VIENNA-MGEM**

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/Offeror's Printed/Typed Name

**R. Mitchell**

Signature

**R. Mitchell**

Month Day Year

**12 19 06**

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

**MARLON MITCHELL**

Signature

**Marlon Mitchell**

Month Day Year

**12 19 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Kenneth Adams**

Signature

**K Adams**

Month Day Year

**12 19 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1224**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302446**

**Net Weight:**

**22.02**

**Job#VIENNA-MGEM**

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

**RM HANT**

Signature

**[Signature]**

Month Day Year  
**12/19/06**

INT'L

15. International Shipments  Import to U.S.  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

**Mark Mitchell**

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

**[Signature]**

Month Day Year  
**12/19/06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number

**1225**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No. Type

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 302453**

**P-76**

**Net Weight: 22.58**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

*R. M. Hart*

Signature

*R. M. Hart*

Month Day Year  
**12 19 06**

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

**BRUCE BUGG**

Signature

*Bruce Bugg*

Month Day Year

**12 19 06**

Transporter 2 Printed/Typed Name

Signature

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

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*Laura Adams*

Month Day Year  
**12 19 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 832-8688

4. Waste Tracking Number

1726

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryscar Trucking

U.S. EPA ID Number

DOT# 886150

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23886

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-8070

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		OT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# 115530

Transaction#

302455

RDR#1

Net Weight:

29.71 tons

Job# VIENNA-MGEM

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/Offor's Printed/Typed Name

R M Hart

Signature

[Signature]

Month Day Year

12 19 06

15. International Shipments

Import to U.S.

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

RANDALL D ROGERSON

Signature

[Signature]

Month Day Year

12 19 06

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

[Signature]

[Signature]

12 19 06

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1227**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302462**  
**302467**

**Net Weight:**

**2,120 tons**

**Job#VIENNA-MGEM**

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

**R M Hart**

Signature

**R M Hart**

Month Day Year

15. International Shipments

Import to U.S.

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

**Tary Winch**

Signature

**Tary Winch**

Month Day Year

**12 19 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Kaura Adams**

Signature

**K Adams**

Month Day Year

**12 19 06**

Tic. # 302468

NON-HAZARDOUS WASTE MANIFEST	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>7228</b>
------------------------------	---	--------------------------	--	---

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name <b>Puryear Trucking</b>	U.S. EPA ID Number <b>DOT# 896050</b>
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
Facility's Phone: <b>757-865-6070</b>	

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#:** **19.77**

**DAVIS #1**      **Net Weight:**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **RM HART**      Signature **[Signature]**      Month **12** Day **19** Year **06**

15. International Shipments     Import to U.S.     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 **DENISE ADAMS**      Signature **[Signature]**      Month **12** Day **19** Year **06**

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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Denise Adams**      Signature **[Signature]**      Month **12** Day **19** Year **06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1229**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 302476  
P-78 Net Weight: 21.90 Job#VIENNA-MGEM**

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 **R M HART** Signature *[Signature]* Month **12** Day **19** Year **05**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **Charles Wilson** Signature *[Signature]* Month Day Year

Transporter 2 Printed/Typed Name Signature Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **19** Year **05**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1230**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No. Type

1. **Non RCRA, Non DOT Regulated Soil  
contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302473**

**P-69**

**Net Weight: 19.02**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R M Hart**

Signature

**R M Hart**

Month Day Year  
**12 15 06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

15. International Shipments

Import to U.S.

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

Signature

Month Day Year

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

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

**Laura Adams**

Month Day Year  
**12 19 06**

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator ...  
**NOT REQD.**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8530**

4. Waste Tracking Number  
**1231**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Pureyear Trucking**

U.S. EPA ID Number  
**DOT# 686050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23066**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-805-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# **116530**

Transaction#:

Net Weight: **25.45**

**JOH/VIENNA-MGEM**

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

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

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8000**

4. Waste Tracking Number  
**1232**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOTS 000050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23060  
757-865-8070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

Project# **116500**

Transaction#: **302480**

**CIA**

Net Weight: **2092**

Job# **VIENNA-MGEM**

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/Offor's Printed/Typed Name

Signature

Month Day Year

**R/M HART**

*[Signature]*

**11/19/00**

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

**VIRGEN SIKULSTER**

*[Signature]*

**12/11/00**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1233**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
	1. <b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
	2.					
	3.					
	4.					

13. Special Handling Instructions and Additional Information  
**Project#116539      Transaction#: 302484**  
**AT14      Net Weight: 22.72**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **Rob Schonk** Signature **[Signature]** Month **12** Day **19** Year **08**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **RAY LLOYD** Signature **[Signature]** Month **12** Day **19** Year **08**  
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) \_\_\_\_\_ 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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature **[Signature]** Month **12** Day **19** Year **08**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1234**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 302490**  
**P-72 Net Weight: 22,000**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **R M HART** Signature *[Signature]* Month **12** Day **19** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter Signature (for exports only):  
Transporter 1 Printed/Typed Name **Saul A Muller** Signature *[Signature]* Month **12** Day **19** Year **06**  
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) 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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Naura Adams** Signature *[Signature]* Month **12** Day **19** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1235**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302488**

**P-64**

**Net Weight: 16.91**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **RM Hart** Signature **[Signature]** Month Day Year

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Mary Kelley** Signature **[Signature]** Month Day Year **12 19 06**  
Transporter 2 Printed/Typed Name Signature Month Day Year

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Klaus Adams** Signature **[Signature]** Month Day Year **12 19 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of 1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1236

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone:

757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone:

757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 302491

P-6 2

Net Weight: 17.99

Job#VIENNA-MGEM

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/Offor's Printed/Typed Name

*R.M. Harris*

Signature

*[Signature]*

Month Day Year

12 19 06

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

Jewell Y Lockary P-6 2

Signature

*[Signature]* P-6 2

Month Day Year

12 19 06

Transporter 2 Printed/Typed Name

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Kauriz Adams

Signature

*[Signature]*

Month Day Year

12 19 06

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1237**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#: 302499**  
*P-S-J*      **Net Weight: 15.99**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name *RM Hart*      Signature *[Signature]*      Month *12* Day *19* Year *06*

15. International Shipments       Import to U.S.       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 *JOE W GRIFFIN*      Signature *[Signature]*      Month *12* Day *19* Year *06*  
Transporter 2 Printed/Typed Name *JOE W GRIFFIN*      Signature *[Signature]*      Month *12* Day *19* Year *06*

17. Discrepancy  
17a. Discrepancy Indication Space       Quantity       Type       Residue       Partial Rejection       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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name *Kaurz Adams*      Signature *[Signature]*      Month *12* Day *19* Year *06*

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1238

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil  
contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project# 116539

Transaction#:

11

Net Weight:

21.09

Job# VIENNA-MGEM

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

R M Hart

Signature

[Signature]

Month Day Year  
12 19 06

15. International Shipments

Import to U.S.

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

Mark

Signature

[Signature]

Month Day Year  
12 19 06

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

B. Sumree

Signature

[Signature]

Month Day Year  
12 19 06

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: NOT REQUIRED  
 2. Page 1 of 1  
 3. Emergency Response Phone: 302 652-4028  
 4. Waste Tracking Number: 1739

5. Generator's Name and Mailing Address: Commander, Navy Region Mid-Atlantic (CNRMMA), 1610 Gilbert St., Norfolk, VA 23511-2797  
 Generator's Site Address (if different than mailing address): Paradise Creek  
 Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name: Puryear Trucking  
 U.S. EPA ID Number: DOT# 808050

7. Transporter 2 Company Name: South Norfolk Trucking, Inc.  
 U.S. EPA ID Number: NOT REQUIRED

8. Designated Facility Name and Site Address: District Sanitary Landfill, 100 North Park Lane, Hampton, VA 23666  
 Facility's Phone: 757-865-6070  
 U.S. EPA ID Number: NOT REQUIRED

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
 Project# 116538 Transaction#: 302510  
 Net Weight: 70.64 Job# VIENNA-MGEM  
 DHI

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: \_\_\_\_\_

15. International Shipments  Import to U.S.  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: \_\_\_\_\_  
 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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1240**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 302506**

**14**

**Net Weight: 23.81**

**Job# VIENNA-MGEM**

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

*R M Haney*

Signature

*R M Haney*

Month Day Year

*12/19/06*

15. International Shipments

Import to U.S.

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

*D. Cross*

Signature

*D. Cross*

Month Day Year

*12/19/06*

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*B Summelle*

Signature

*B Summelle*

Month Day Year

*12/19/06*

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1241**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address

U.S. EPA ID Number  
**NOT REQUIRED**

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**      **Transaction#: 3027??**  
*Paydini &*      **Net Weight: 21.26**  
**Job# VIENNA-MGEM**

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 *R M Hunt*      Signature *R M Hunt*      Month *12* Day *13* Year *06*

15. International Shipments       Import to U.S.       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 *Cleveland Armstrong*      Signature *Cleveland Armstrong*      Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_  
Transporter 2 Printed/Typed Name \_\_\_\_\_      Signature \_\_\_\_\_      Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy

17a. Discrepancy Indication Space       Quantity       Type       Residue       Partial Rejection       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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name *B Sumrell*      Signature *B Sumrell*      Month *12* Day *19* Year *06*

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1** 3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1242**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

*Handwritten: 10*

**Net Weight:**

*Handwritten: 19.88*

**Job#VIENNA-MGEM**

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

*Handwritten: R M Hart*

*Handwritten Signature*

Month Day Year  
**12 19 06**

INT'L

15. International Shipments

Import to U.S.

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

*Handwritten: R Scott*

*Handwritten Signature*

Month Day Year  
**12 19 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

*Handwritten: Laura Adams*

*Handwritten Signature*

Month Day Year  
**12 19 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302-652-8999**

4. Waste Tracking Number  
**12 43**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757-445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#: 3025221**  
*P-59*      **Net Weight: 15.52**  
**Job#VIENNA-MGEM**

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: *R M Hans*      Signature: *[Signature]*      Month: *12* Day: *19* Year: *06*

15. International Shipments       Import to U.S.       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: *Tremont L. Perkins*      Signature: *[Signature]*      Month: *12* Day: *19* Year: *06*  
Transporter 2 Printed/Typed Name: \_\_\_\_\_      Signature: \_\_\_\_\_      Month: *1* Day: \_\_\_\_\_ Year: \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space       Quantity       Type       Residue       Partial Rejection       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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: *Karen Adams*      Signature: *[Signature]*      Month: *12* Day: *19* Year: *06*

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8500**

4. Waste Tracking Number  
**1244**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (COMNAVMAC)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schenk**

6. Transporter 1 Company Name  
**Furyear Trucking**

U.S. EPA ID Number  
**DOT# 806050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Central Sanitary Landfill  
100 North Park Lane, Hampton, VA 23660  
757-605-8070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

Project# **116539**

Transaction#: **302-515**

Net Weight: **19.42**

Job# **VIENNA-MGEM**

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  
**12 17 06**

INT'L

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year  
**12 17 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1** 3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1245**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539**      **Transaction#: 302531**  
**AT17**      **Net Weight: 22.28**  
**Job# VIENNA-MGEM**

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: **B.M. Hart**      Signature: *[Signature]*      Month: **12** Day: **09** Year: **00**

15. International Shipments       Import to U.S.       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: **Robert Carpenter**      Signature: *[Signature]*      Month: **12** Day: **19** Year: **00**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: **Laura Adams**      Signature: *[Signature]*      Month: **12** Day: **19** Year: **00**

GENERATOR

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8900**

4. Waste Tracking Number  
**1246**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
Generator's Phone: 757 445-5703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 080050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23058  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information  
**Project# 116539 Transaction# 302522  
P-52 Net Weight: 22.4  
Job# VIENNA-MGEM**

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]** Signature **[Signature]** Month **12** Day **15** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter Signature (for exports only):  
Transporter 1 Printed/Typed Name Signature Month Day Year  
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:

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name Signature Month Day Year

GENERATOR  
TRANSPORTER  
DESIGNATED FACILITY



NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number

**1248**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302538**

**P-63**

**Net Weight: 16.74**

**Job#VIENNA-MGEM**

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 **B M Hans** Signature *[Signature]* Month **12** Day **19** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Marlon Mitchell** Signature *[Signature]* Month **12** Day **19** Year **06**  
Transporter 2 Printed/Typed Name Signature Month Day Year

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **19** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1249**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

*302541*

*P-68*

**Net Weight:**

*22.55*

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*R M Hans*

Signature

*[Signature]*

Month Day Year

*1 2 19 06*

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

*Mark Schell*

Signature

Month Day Year

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*[Signature]*

Month Day Year

*12 19 06*

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1250**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302557**

**RDR-1**

**Net Weight:**

**28.02 TONS**

**Job#VIENNA-MGEM**

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

**BM Hart**

Signature

*[Signature]*

Month Day Year  
**12 19 06**

INT'L

15. International Shipments

Import to U.S.

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

**RANDALL DORGERSON**

Signature

*[Signature]*

Month Day Year  
**12 19 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year  
**12 14 07**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**9257**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. 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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 302584**

**Net Weight: 19.11**

**Job# VIENNA-MGEM**

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

*RM Harris*

Signature

*[Signature]*

Month Day Year

*12/20/06*

15. International Shipments

Import to U.S.

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

*Cleveland Aramigh*

Signature

*[Signature]*

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Jackie Blackwell*

Signature

*[Signature]*

Month Day Year

*12/20/06*

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1252**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

9a. 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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

*14*

**Net Weight:**

**Job#VIENNA-MGEM**

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

*Rob Schonk*

Signature

*[Signature]*

Month Day Year  
*12 20 06*

INT'L

15. International Shipments

Import to U.S.

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

*R SCOTT*

Signature

*[Signature]*

Month Day Year  
*12 20 06*

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Jodie Blackwell*

Signature

*[Signature]*

Month Day Year  
*12 20 06*

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1853**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1810 Gilbert St., Norfolk, VA 23511-2737  
Generator's Phone: 757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
Facility's Phone: 757-865-8070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539 Transaction# 302589  
DH Net Weight: 20.30 Job# VIENNA-MGEM**

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]** Signature: **[Signature]** Month: Day: Year:

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter Signature (for exports only):  
Transporter 1 Printed/Typed Name: Signature: Month: Day: Year:

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): 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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: Signature: Month: Day: Year:

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1254**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-8703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539      Transaction#: 302593**  
**14      Net Weight: 24.02**  
**Job# VIENNA-MGEM**

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/Ofier's Printed/Typed Name **R M Hantz** Signature *[Signature]* Month Day Year

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **A. Cross** Signature *[Signature]* Month Day Year **12 20 06**

Transporter 2 Printed/Typed Name Signature Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Jackie Blackwell** Signature *[Signature]* Month Day Year **12 20 06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1255**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539 Transaction#: 302595**  
**ATI 7 Net Weight: 24.61**  
**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name **Rob Schonk** Signature *[Signature]* Month **12** Day **06** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter Signature (for exports only): Date leaving U.S.:

Transporter 1 Printed/Typed Name **Robert Carpenter** Signature *[Signature]* Month Day Year  
Transporter 2 Printed/Typed Name Signature Month Day Year

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Jackie Blackwell** Signature *[Signature]* Month **12** Day **06** Year **06**

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1256**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302605**

*15*

**Net Weight: 23.99**

**Job#VIENNA-MGEM**

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/Offoror's Printed/Typed Name

*RM HART*

Signature

*[Signature]*

Month Day Year  
*12 20 06*

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

*Rick Trotter*

Signature

*[Signature]*

Month Day Year  
*12 20 06*

Transporter 2 Printed/Typed Name

Signature

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Jackie Blackwell*

Signature

*[Signature]*

Month Day Year  
*12 20 06*

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1257**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302601**

**Net Weight:**

**23.41**

**Job#VIENNA-MGEM**

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

*R M Hunt*

Signature

*[Signature]*

Month Day Year  
**12 20 06**

INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

*Marc*

Signature

*[Signature]*

Month Day Year  
**12 20 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a.

Printed/Typed Name

*Jackie Blackwell*

Signature

*[Signature]*

Month Day Year  
**12 20 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8990**

4. Waste Tracking Number  
**1258**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737  
Generator's Phone: 757 445-6703 Attn: Rob Schenk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 880050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23006  
Facility's Phone: 757-866-8070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information  
**Project# 116539 Transaction#: 302606  
Net Weight: 27.21 Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name **B. M. H...** Signature **[Signature]** Month Day Year

15. International Shipments  Import to U.S.  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  
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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name Signature Month Day Year

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 852-8000**

4. Waste Tracking Number  
**1259**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6700 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 898050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23066  
757-883-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No. Type

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

Project# **116530**

Transaction#:

**302614**

**CIAI**

Net Weight:

**21.17**

Job# **VIENNA-MGEM**

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

**Rob Schonk**

Signature

*[Signature]*

Month Day Year

**1/2/00**

15. International Shipments  Import to U.S.  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

**W. J. ...**

Signature

*[Signature]*

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1260**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**

**12-62**

**Transaction#:**

**302649**

**Net Weight:**

**17.88**

**Job# VIENNA-MGEM**

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

**R. M. HART**

Signature

*[Signature]*

Month Day Year

**12 20 06**

15. International Shipments  Import to U.S.  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

**Jewell Plockany P62**

Signature

*[Signature]*

Month Day Year

**12 20 06**

Transporter 2 Printed/Typed Name

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Kelara Adams**

Signature

*[Signature]*

Month Day Year

**12 20 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

1

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1265**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**302-617**

**Net Weight:**

**25.07**

**Job# VIENNA-MGEM**

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

*Rob Schonk*

Signature

*Rob Schonk*

Month Day Year

**12 2006**

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

Port of entry/exit:

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

*Mark Mitchell*

Signature

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Jackie Blackwell*

Signature

*Jackie Blackwell*

Month Day Year

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1762**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539 Transaction#: 302621**  
**Net Weight: 19.96 Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **R.M. HART** Signature *[Signature]* Month **12** Day **20** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Monette Madison** Signature *[Signature]* Month **12** Day **20** Year **06**  
Transporter 2 Printed/Typed Name Signature Month Day Year

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

17b. Alternate Facility (or Generator) Manifest Reference Number: 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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **20** Year **06**

GENERATOR

INT'L  
TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1263**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 302622**

**ATI4**

**Net Weight: 19.61**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

**RM Han**

Signature

*RM Han*

Month Day Year  
**12 20 06**

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

**RAY LLOYD**

Signature

*Ray Lloyd*

Month Day Year  
**12 20 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*Laura Adams*

Month Day Year  
**12 20 03**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1** 3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Num. **1264**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**T-10**

**Net Weight:**

**302625  
19.99  
Job# VIENNA-MGEM**

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

**R.M. Hart**

Signature

**[Signature]**

Month Day Year

**12 20 00**

15. International Shipments  Import to U.S.  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

**L.R.**

Signature

**L.R.**

Month Day Year

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Karina Adams**

Signature

**[Signature]**

Month Day Year

**12 20 00**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1265

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 302630

Net Weight: 35900 17.95

Job# VIENNA-MGEM

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/Offor's Printed/Typed Name

B. M. Adams

Signature

[Signature]

Month Day Year

12 20 06

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

T.S.

Signature

T.S.

Month Day Year

12 20 06

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Laura Adams

[Signature]

Month Day Year

12 20 06

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1206**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539 Transaction#: 302635**  
**P-72 Net Weight: 23.61**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **R M Hart** Signature *[Signature]* Month **12** Day **20** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter Signature (for exports only):  
Transporter 1 Printed/Typed Name **Mullins God A.** Signature *[Signature]* Month **12** Day **20** Year **06**  
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: 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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Keluz Adams** Signature *[Signature]* Month **12** Day **20** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

TIC # 302633

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>1267</b>
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5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#:** **22.87**

**DAVIS #1**      **Net Weight:**

**Job#VIENNA-MGEM**

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: **R M HANT**      Signature: *[Signature]*      Month: **12** Day: **20** Year: **06**

15. International Shipments       Import to U.S.       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: **DENISE ADAMS**      Signature: *[Signature]*      Month: **12** Day: **20** Year: **06**

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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: **Laura Adams**      Signature: *[Signature]*      Month: **12** Day: **20** Year: **06**

GENERATOR

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1268**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 P-64 Transaction#: 302641**  
**Net Weight: 17.84**  
**Job#VIENNA-MGEM**

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/Offeror's Printed/Typed Name **Rob Schonk** Signature *[Signature]* Month **12** Day **20** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Mary Kelley** Signature *[Signature]* Month **12** Day **20** Year **06**  
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) \_\_\_\_\_ 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 hazardous materials covered by this manifest except as noted in Item 17a  
Printed/Typed Name **Paul Adams** Signature *[Signature]* Month **12** Day **20** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number **NOT REQUIRED** 2. Page 1 of **1** 3. Emergency Response Phone **302 652-8999** 4. Waste Tracking Number **1269**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Phone: **757-445-8703 Attn: Rob Schonk**  
 Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name **Puryear Trucking** U.S. EPA ID Number **DOT# 896050**

7. Transporter 2 Company Name **South Norfolk Trucking, Inc.** U.S. EPA ID Number **NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23666**  
 Facility's Phone: **757-865-6070** U.S. EPA ID Number **NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 302643**  
**P-61 Net Weight: 17.40 Job#VIENNA-MGEM**

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 **R M Hunt** Signature **R M Hunt** Month **12** Day **20** Year **05**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name **Andera Clark** Signature **Andera Clark** Month **12** Day **20** Year **06**  
 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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name **Laura Adams** Signature **Laura Adams** Month **12** Day **20** Year **05**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1270**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703** Attn: **Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 302644**

**P-63**

**Net Weight: 33320 14.66**

**Job# VIENNA-MGEM**

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

*R. M. Hunt*

Signature

*[Signature]*

Month Day Year  
**12 20 06**

INT'L

15. International Shipments

Import to U.S.

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

**MARLON MITCHELL**

Signature

*Marlon Mitchell*

Month Day Year  
**12 20 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Kellera Adams**

Signature

*Kellera Adams*

Month Day Year  
**12 20 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of: **1**  
 3. Emergency Response Phone: **302 652-8999**  
 4. Waste Tracking Number: **1271**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information:  
**Project#116539 Transaction#: 302645**  
**Net Weight: 20.91 Job#VIENNA-MGEM**  
*Maroon*

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: *R.M. Hart* Signature: *R.M. Hart* Month: *12* Day: *20* Year: *05*

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: *Nickie* Signature: *[Signature]* Month: *12* Day: *20* Year: *06*  
 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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: *Naura Adams* Signature: *[Signature]* Month: *12* Day: *20* Year: *06*

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of **1**  
 3. Emergency Response Phone: **302 652-8999**  
 4. Waste Tracking Number: **1272**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA), 1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill, 100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information:  
**Project# 116539 Transaction#: 302657**  
**P-59 Net Weight: 16.88**  
**Job# VIENNA-MGEM**

**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/Offor's Printed/Typed Name: **R M Hart** Signature: *[Signature]* Month: Day: Year:

15. International Shipments:  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: **Tremont L Perkins** Signature: *[Signature]* Month: Day: Year: **Dec 20 06**  
 Transporter 2 Printed/Typed Name: Signature: Month: Day: Year:

17. Discrepancy

17a. Discrepancy Indication Space:  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: **Laura Adams** Signature: *[Signature]* Month: Day: Year: **12 20 06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**12 73**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

NONE

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

No. Type  
**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

Project# **116539**

Transaction#: **302653**

Net Weight: **22.84**

Job# **VIENNA-MGEM**

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/Offor's Printed/Typed Name

Signature

Month Day Year

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

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

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-0329**

4. Waste Tracking Number  
**1274**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (NRMIA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-8703 Attn: Rob Schork**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 030050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23066**  
Facility's Phone: **757-865-8070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539 Transaction# 302656**  
**DH1 Net Weight: 20.87 Job# VIENNA-MGEM**

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]** Signature: **[Signature]** Month: **11** Day: **20** Year: **06**

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: \_\_\_\_\_  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1275**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**16**

**Net Weight:**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **R M Hart** Signature **[Signature]** Month **12** Day **20** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **R Scott** Signature **[Signature]** Month **12** Day **20** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Laura Adams** Signature **[Signature]** Month **12** Day **20** Year **06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1276**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539**      **Transaction#: 302663**  
**14**      **Net Weight: 22.75**  
**Job#VIENNA-MGEM**

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: **B M HART**      Signature: *[Signature]*      Month:      Day:      Year:

15. International Shipments       Import to U.S.       Export from U.S.      Port of entry/exit:      Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: **Q. CROSS**      Signature: *[Signature]*      Month: **12**      Day: **20**      Year: **06**

Transporter 2 Printed/Typed Name:      Signature:      Month:      Day:      Year:

17. Discrepancy

17a. Discrepancy Indication Space       Quantity       Type       Residue       Partial Rejection       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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: **Jackie Blackwell**      Signature: *[Signature]*      Month: **12**      Day: **20**      Year: **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1277**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone:

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No.

Type

1. **Non RCRA, Non DOT Regulated Soil  
contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 302575**

**AT17**

**Net Weight: 22.85**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

**KM HUNT**

Signature

**[Signature]**

Month Day Year  
**12 20 06**

15. International Shipments  Import to U.S.  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

**Robert [Signature]**

Signature

**[Signature]**

Month Day Year

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Kevin Adams**

Signature

**[Signature]**

Month Day Year

**12 20 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1278**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**302674**

**Net Weight:**

**19.53**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

*R.M. HART*

Signature

*[Signature]*

Month Day Year  
**12 20 06**

TRANSPORTER INT'L

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

*M. COLE*

Signature

*[Signature]*

Month Day Year  
**12 20 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*[Signature]*

Month Day Year  
**12 20 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1279**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No.

Type

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 302677**

**Net Weight: 19.20**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R M HANT**

Signature

*[Signature]*

Month Day Year

**12 20 06**

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

**Rick Trotman**

Signature

Month Day Year

**12 20 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest, except as noted in Item 17a

Printed/Typed Name

**Robert Adams**

Signature

*[Signature]*

Month Day Year

**12 20 06**

DESIGNATED FACILITY TO GENERATOR

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8000**

4. Waste Tracking Number  
**1280**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Furyour Trucking**

U.S. EPA ID Number  
**DOT# 800050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23066**  
Facility's Phone: **757-686-8070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>1</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project # 116530 Transaction # 302681**  
**Davis H, Net Weight: 20.30**  
**Job VIENNA MOEM**

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]** Signature: **[Signature]** Month: **11** Day: **10** Year: **06**

15. International Shipments  Import to U.S.  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: \_\_\_\_\_  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8300**

4. Waste Tracking Number  
**1781**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schenk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 866050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-8070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**57**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

Project# **116539**

Transaction#:

**17-85**

Net Weight:

**302684**

**VIENNA-MGEM**

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/Offor's Printed/Typed Name

Signature

Month Day Year

*[Signature]*

**11/20/06**

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

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1282**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:** *302604*

*P-68*

**Net Weight:** *20.43*

**Job#VIENNA-MGEM**

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

*RM HART*

Signature

*RMH*

Month Day Year  
*12 20 06*

INT'L

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

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

*Mark Mitchell*

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

*Laura Adams*

*L Adams*

*12 20 06*

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1283**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302698**

**P-62**

**Net Weight:**

**14.88**

**Job#VIENNA-MGEM**

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

**RM HART**

Signature

**[Signature]**

Month Day Year

**12 20 06**

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

**Jewell Lockamy PC2**

Signature

**[Signature] P62**

Month Day Year

**12 20 06**

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

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**JACKIE BLACKWELL**

Signature

**[Signature]**

Month Day Year

**12 20 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1284**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302706**

**AT14**

**Net Weight: 22.38**

**Job#VIENNA-MGEM**

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

**Am Harris**

Signature

*[Signature]*

Month Day Year  
**12 20 06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

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

**Ray Lloyd**

Signature

*[Signature]*

Month Day Year  
**12 20 06**

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

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Harris Adams**

Signature

*[Signature]*

Month Day Year  
**12 20 06**

TIC# 302707

<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>1288</b>	
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>			Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>			
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>						
6. Transporter 1 Company Name <b>Puryear Trucking</b>				U.S. EPA ID Number <b>DOT# 896050</b>		
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>				U.S. EPA ID Number <b>NOT REQUIRED</b>		
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>				U.S. EPA ID Number <b>NOT REQUIRED</b>		
Facility's Phone: <b>757-865-6070</b>						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						
13. Special Handling Instructions and Additional Information  <b>Project#116539      Transaction#: 302707      22.45</b> <b>Net Weight: 22.45      Job#VIENNA-MGEM</b> <i>DAW 1</i>						
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/Ofior's Printed/Typed Name <i>Rm HART</i>			Signature <i>[Signature]</i>		Month Day Year <i>12 20 06</i>	
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 <i>DENISE ADAMS</i>			Signature <i>[Signature]</i>		Month Day Year <i>12 20 06</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 hazardous materials covered by the manifest except as noted in Item 17a						
Printed/Typed Name <i>[Signature]</i>			Signature <i>[Signature]</i>		Month Day Year <i>12 20 06</i>	

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

1

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1286**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302112**

**P-72**

**Net Weight: 21656**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R M Hans**

Signature

*[Signature]*

Month Day Year  
**12 20 06**

INT'L

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

**MULLINS SON A**

Signature

*[Signature]*

Month Day Year  
**12 20 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

TRANSPORTER

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

DESIGNATED FACILITY

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Laura Adams**

Signature

*[Signature]*

Month Day Year  
**12 20 06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1287**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302713**

**P-61**

**Net Weight:**

**16.57**

**Job#VIENNA-MGEM**

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

**R M Haney**

Signature

**[Signature]**

Month Day Year

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

**Andera Clark**

Signature

**Andera Clark**

Month Day Year

**12 20 08**

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

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest, except as noted in Item 17a

Printed/Typed Name

**Naura Adams**

Signature

**[Signature]**

Month Day Year

**12 20 08**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1288

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# 116539

P-64

Transaction#: 302714

Net Weight: 17.96

Job# VIENNA-MGEM

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

R M Hart

Signature

[Signature]

Month Day Year  
12 20 06

INT'L

15. International Shipments

Import to U.S.

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

Mary Kelley

Signature

[Signature]

Month Day Year  
12 20 06

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year  
12 20 06

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**289**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302719**

*MARCOON*

**Net Weight: 21.03**

**Job#VIENNA-MGEM**

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

*RM Hays*

Signature

*[Signature]*

Month Day Year  
*12 20 06*

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

15. International Shipments  Import to U.S.  Export from U.S.

Transporter Signature (for exports only):

Port of entry/exit:

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

*Kyrie*

Signature

*[Signature]*

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Keliana Adams*

Signature

*[Signature]*

Month Day Year  
*12 20 06*

<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8869</b>	4. Waste Tracking Number <b>1790</b>	
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>			Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>			
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>						
6. Transporter 1 Company Name <b>Puryear Trucking</b>				U.S. EPA ID Number <b>DOT# 886050</b>		
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>				U.S. EPA ID Number <b>NOT REQUIRED</b>		
8. Designated Facility Name and Site Address <b>Bothel Sanitary Landfill 100 North Park Lane, Hampton, VA 23668</b>				U.S. EPA ID Number <b>NOT REQUIRED</b>		
Facility's Phone: <b>757-885-6070</b>						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						
13. Special Handling Instructions and Additional Information  <b>Project# 115539      Transaction#: 302722</b> <b>P-63      Net Weight: 34760 17.38</b> <b>Job# VIENNA-MGEM</b>						
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 <b>Rm Hays</b>				Signature <i>[Signature]</i>		Month Day Year <b>12 20 06</b>
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 <b>Marlon Mitchell</b>				Signature <i>[Signature]</i>		Month Day Year <b>12 20 06</b>
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 hazardous materials covered by the manifest except as noted in Item 17a						
Printed/Typed Name <b>Laura Adams</b>				Signature <i>[Signature]</i>		Month Day Year <b>12 20 06</b>

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of **1**  
 3. Emergency Response Phone: **302 652-8999**  
 4. Waste Tracking Number: **1291**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA)**  
**1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Puryear Trucking**  
 U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.**  
 U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill**  
**100 North Park Lane, Hampton, VA 23866**  
 Facility's Phone: **757-865-6070**  
 U.S. EPA ID Number: **NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information:  
**Project#116539 Transaction#: 302725**  
**P-59 Net Weight: 15.09**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name: **RAM HART**  
 Signature: *[Signature]*  
 Month Day Year: **12 20 06**

15. International Shipments:  Import to U.S.  Export from U.S.  
 Transporter Signature (for exports only):  
 Port of entry/exit:  
 Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: **TREMONT PERKINS**  
 Signature: *[Signature]*  
 Month Day Year: **12 20 06**  
 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:

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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: **Laura Adams**  
 Signature: *[Signature]*  
 Month Day Year: **12 20 06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8000**

4. Waste Tracking Number  
**1192**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Phone: **757 445-0703** Attn: **Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Pureyear Trucking**

U.S. EPA ID Number  
**DOT# B00010**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Deftel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23686  
757-895-0070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# **116539**

Transaction#: **302728**

**DH1**

Net Weight: **19.74**

Job# **VIENNA-MGEM**

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

*R. Schonk*

Signature

*[Signature]*

Month Day Year

**11 20 96**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

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

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1293**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 302729**

*Way dirt*

**Net Weight: 19.09**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name **R.M. HART** Signature *R.M. Hart* Month **12** Day **20** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Chelamed A. Arango** Signature *Chelamed A. Arango* Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laurie Adams** Signature *Laurie Adams* Month **12** Day **20** Year **06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of **1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1294**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

*16*

**Net Weight:**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name

*R M Hant*

Signature

*[Signature]*

Month Day Year  
*12 20 06*

GENERATOR

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

*R Scott*

Signature

*[Signature]*

Month Day Year  
*12 20 06*

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Quinn Adams*

Signature

*[Signature]*

Month Day Year  
*12 20 06*

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1295**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302734**

**14**

**Net Weight: 22.62**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name  
**R.M. HANT**

Signature  
*[Signature]*

Month Day Year  
**12 20 06**

INT'L

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
**Q. Cross**

Signature  
*[Signature]*

Month Day Year  
**12 20 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
**Jackie Blackwell**

Signature  
*[Signature]*

Month Day Year  
**12 20 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of **1**  
 3. Emergency Response Phone: **302 652-8999**  
 4. Waste Tracking Number: **1296**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information:  
**Project#116539 Transaction#: 302750**  
**T-11 Net Weight: 45100 22.55**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name: **R M HART** Signature: *[Signature]* Month Day Year: **12 20 06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter Signature (for exports only): \_\_\_\_\_  
 Transporter 1 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month Day Year: **12 20 06**  
 Transporter 2 Printed/Typed Name: **T.S.** Signature: **T.S.** Month Day Year: \_\_\_\_\_

17. Discrepancy  
 17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: **Jockie Blackwell** Signature: *[Signature]* Month Day Year: **12 20 06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1297**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703** Attn: **Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539**      **Transaction#:** **202743**  
**11**      **Net Weight:** **23.39**      **Job#VIENNA-MGEM**

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: **R.M. Hant**      Signature: *[Signature]*      Month: **12** Day: **20** Year: **06**

15. International Shipments       Import to U.S.       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: **Mark**      Signature: *[Signature]*      Month: **12** Day: **20** Year: **06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: **Quinn Adams**      Signature: *[Signature]*      Month: **12** Day: **20** Year: **06**

↑ GENERATOR  
↓ INT'L  
↑ TRANSPORTER  
↑ DESIGNATED FACILITY  
↓

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1298**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No. Type

1. **Non RCRA, Non DOT Regulated Soil  
contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

2.

3.

4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302746**

**Net Weight: 21.19**

**Job#VIENNA-MGEM**

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

*R.M. Hano*

Signature

*R.M. Hano*

Month Day Year  
**12 20 06**

15. International Shipments  Import to U.S.  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

*L.R.*

Signature

*L.R.*

Month Day Year

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

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*JACKIE Blackwell*

Signature

*JACKIE Blackwell*

Month Day Year

**12 20 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1299**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302751**

**P-69**

**Net Weight: 23.76**

**Job#VIENNA-MGEM**

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

*R. M. Harris*

Signature

*R. M. Harris*

Month Day Year  
**12 20 06**

15. International Shipments  Import to U.S.  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

*Monette Madison*

Signature

*Monette Madison*

Month Day Year  
**12 20 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Jackie Blackwell*

Signature

*Jackie Blackwell*

Month Day Year  
**12 20 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of: **1**  
 3. Emergency Response Phone: **302 652-8000**  
 4. Waste Tracking Number: **1300**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA), 1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schenk**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 890050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bohler Sanitary Landfill, 100 North Park Lane, Hampton, VA 23668** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-885-8070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information:  
**Project# 118539 Transaction# 302754**  
**DAVIS #2 Net Weight: 27.17**  
**Job# VIENNA-MGEM**

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: \_\_\_\_\_

15. International Shipments  Import to U.S.  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: \_\_\_\_\_  
 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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1301**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302756**

**Net Weight:**

**23.07**

**Job#VIENNA-MGEM**

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

*R. M. HART*

Signature

*[Signature]*

Month Day Year

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

*Rich Trotter*

Signature

*[Signature]*

Month Day Year

**12 26 06**

Transporter 2 Printed/Typed Name

Signature

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Jackie Blackwell*

Signature

*[Signature]*

Month Day Year

**12 26 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8900**

4. Waste Tracking Number  
**1302**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNFMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703** Attn: **Rob Schenk**

6. Transporter 1 Company Name  
**Puryour Trucking**

U.S. EPA ID Number  
**DOT# 880650**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23660  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116530**

**Transaction#:**

**762**

**CIA**

**Net Weight:**

**302  
21.02**

**Job# VIENNA-MGEM**

**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/Offor's Printed/Typed Name

Signature

Month Day Year  
**12/10/00**

GENERATOR

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

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:

17b. Alternate Facility (or Generator)

U.S. EPA ID Number

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

DESIGNATED FACILITY

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>1303</b>
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>			Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>		
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>					
6. Transporter 1 Company Name <b>Puryear Trucking</b>				U.S. EPA ID Number <b>DOT# 896050</b>	
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>				U.S. EPA ID Number <b>NOT REQUIRED</b>	
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>				U.S. EPA ID Number <b>NOT REQUIRED</b>	
Facility's Phone: <b>757-865-6070</b>					
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.
		No.	Type		
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>
2.					
3.					
4.					
13. Special Handling Instructions and Additional Information  <b>Project#116539                      Transaction#: 302766</b> <b>RD R.#1                              Net Weight: 28.55 TONS</b> <span style="float: right;"><b>Job#VIENNA-MGEM</b></span>					
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/Offor's Printed/Typed Name <b>RM HART</b>		Signature <i>[Signature]</i>		Month Day Year <b>12 20 06</b>	
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 <b>RANDALL D ROGERSON</b>		Signature <i>[Signature]</i>		Month Day Year <b>12 20 06</b>	
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 hazardous materials covered by the manifest except as noted in Item 17a					
Printed/Typed Name <b>Charlie Blackwell</b>		Signature <i>[Signature]</i>		Month Day Year <b>12 20 06</b>	

GENERATOR  
 INT'L  
 TRANSPORTER  
 DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1304**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302768**

**P-68**

**Net Weight:**

**23.02**

**Job#VIENNA-MGEM**

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

**R M Hans**

Signature

**[Signature]**

Month Day Year

**12 2006**

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

**Mark Mitchell**

Signature

Month Day Year

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Jackie Blackwell**

Signature

**[Signature]**

Month Day Year

**12 2006**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1305**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539 Transaction#: 302770**  
**P-62 Net Weight: 18.13 Job# VIENNA-MGEM**

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/Offoror's Printed/Typed Name **Rm Hart** Signature **[Signature]** Month Day Year **12 20 06**

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 **Jewell Y Lockamy P-62** Signature **[Signature]** Month Day Year **12 20 06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Jackie Blackwell** Signature **[Signature]** Month Day Year **12 20 06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1306**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302776**

**AT14**

**Net Weight: 25.19**

**Job#VIENNA-MGEM**

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 **R M HART** Signature *[Signature]* Month Day Year

INT'L

15. International Shipments  Import to U.S.  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  
Transporter 2 Printed/Typed Name Signature Month Day Year

DESIGNATED FACILITY

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Jackie Blackwell** Signature *[Signature]* Month Day Year

TIC# 302775

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1307**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**20**

**T**

**NONE**

2.					
3.					
4.					

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

*wgt. 23.67*

*DAVIS /*

**Net Weight:**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*R M HART*

Signature

*R M HART*

Month Day Year  
*12 20 06*

INTL

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

*DEWISE ADAMS*

Signature

*DeWise Adams*

Month Day Year  
*12 20 06*

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Jackie Blackwell*

Signature

*Jackie Blackwell*

Month Day Year  
*12 20 06*

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1308

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 302787

P-58

Net Weight: 18.39

Job#VIENNA-MGEM

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

R M Hanes

Signature

[Signature]

Month Day Year  
12 20 06

INT'L

15. International Shipments

Import to U.S.

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

JOE W GRIFFIN

Signature

[Signature]

Month Day Year  
12 21 06

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

JACKIE BLACKWELL

Signature

[Signature]

Month Day Year  
12 20 06

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1309**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#:** *302784*  
*D-72*      **Net Weight:** *24.97*  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name: *RM Hart*      Signature: *[Signature]*      Month Day Year: *12 20 06*

15. International Shipments     Import to U.S.     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: *Mullins Son*      Signature: *[Signature]*      Month Day Year: *12 20 06*

Transporter 2 Printed/Typed Name: \_\_\_\_\_      Signature: \_\_\_\_\_      Month Day Year: \_\_\_\_\_

17. Discrepancy

17a. Discrepancy Indication Space     Quantity     Type     Residue     Partial Rejection     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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: *John Blackwell*      Signature: *[Signature]*      Month Day Year: *12 20 06*

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302-652-8999**

4. Waste Tracking Number

**131**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757-445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:** **302783**

**P-61**

**Net Weight:** **18.98**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*Rob Schonk*

Signature

*[Signature]*

Month Day Year  
**12 20 06**

INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

*Andera Clark*

Signature

*[Signature]*

Month Day Year  
**12 20 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Jackie Backwell*

Signature

*[Signature]*

Month Day Year  
**12 20 06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1311**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302787**

**P-04**

**Net Weight:**

**17.37**

**Job#VIENNA-MGEM**

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

**RM Harris**

Signature

**[Signature]**

Month Day Year  
**12 20 06**

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

**MARY KELLEY**

Signature

**[Signature]**

Month Day Year  
**12 20 06**

Transporter 2 Printed/Typed Name

Signature

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Jackie Blackwell**

Signature

**[Signature]**

Month Day Year  
**12 20 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

**1**

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1312**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302790**

*MARCON*

**Net Weight: 22.98**

**Job#VIENNA-MGEM**

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

*Rob Schonk*

Signature

*[Signature]*

Month Day Year

*12 20 06*

15. International Shipments

Import to U.S.

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

*[Signature]*

Signature

*[Signature]*

Month Day Year

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Jackie Blackwell*

Signature

*[Signature]*

Month Day Year

*12 20 06*

GENERATOR

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8809**

4. Waste Tracking Number  
**1313**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Pureyear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-885-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# **116539**

Transaction#:

**30274**

**P-63**

Net Weight:

**34580**

**17-29**

Job# **VIENNA-MGEM**

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

*R Mitchell*

Signature

*R Mitchell*

Month Day Year  
**12 20 06**

INT'L

15. International Shipments

Import to U.S.

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

*Marlon Mitchell*

Signature

*Marlon Mitchell*

Month Day Year  
**12 20 08**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Cherie H... (illegible)*

Signature

*(illegible)*

Month Day Year  
**12 20 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of **1**  
 3. Emergency Response Phone: **302 852-8899**  
 4. Waste Tracking Number: **1314**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA), 1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 894050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill, 100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-865-8070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information:  
**Project# 116539 Transaction#: 302807**  
**DH1 Net Weight: 20.52 Job# VIENNA-MGEM**

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: **R M Hout** Signature: *[Signature]* Month: **12** Day: **20** Year: **06**

15. International Shipments  Import to U.S.  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]* Signature: *[Signature]* Month: **12** Day: **20** Year: **06**  
 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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: *[Signature]* Signature: *[Signature]* Month: **12** Day: **20** Year: **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of 1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1315

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#:

16

Net Weight:

Job#VIENNA-MGEM

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

R M Hart

Signature

R M Hart

Month Day Year

12 20 06

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

R Scott

Signature

R Scott

Month Day Year

12 20 06

Transporter 2 Printed/Typed Name

Signature

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Adam Adams

Signature

Adam Adams

Month Day Year

12 20 06

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1314

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone:

757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone:

757-865-6070

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No. Type

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 302803

Net Weight: 23.60

Job#VIENNA-MGEM

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/Offor's Printed/Typed Name

B M Hayes

Signature

[Signature]

Month Day Year  
12 20 06

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

15. International Shipments

Import to U.S.

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

Signature

Month Day Year

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

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Laura Adams

Signature

[Signature]

Month Day Year  
12 20 06

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1317**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302804**

**Net Weight: 23.82**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **R M Harris** Signature **[Signature]** Month **12** Day **20** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Q. Cross** Signature **[Signature]** Month **12** Day **20** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature **[Signature]** Month **12** Day **20** Year **06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of 1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1318

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)  
Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project# 116539

Transaction#: 302814

Net Weight: 1.17

Job# VIENNA-MGEM

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/Offor's Printed/Typed Name

R M HANS

Signature

[Signature]

Month Day Year  
12 20 06

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

Tremont Perkins

Signature

[Signature]

Month Day Year

12 20 06

Month Day Year

Transporter 2 Printed/Typed Name

Signature

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Jackie Blackwell

Signature

[Signature]

Month Day Year

12 20 06

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1319**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

DT

20

T

NONE

2.   
3.   
4.

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302802**

**Net Weight:**

**22.08**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*Rm Adams*

Signature

*Rm Adams*

Month Day Year  
**12 20 06**

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

*Mark*

Signature

*Mark*

Month Day Year  
**12 20 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*L Adams*

Month Day Year  
**12 20 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1320**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302818**

**P-69**

**Net Weight:**

**22.35**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**R M Hart**

Signature

*[Signature]*

Month Day Year  
**12 20 06**

INT'L

15. International Shipments

Import to U.S.

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

**Monette Madison**

Signature

*[Signature]*

Month Day Year  
**12 20 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Jackie Blackwell**

Signature

*[Signature]*

Month Day Year  
**12 20 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**902 862-8900**

4. Waste Tracking Number  
**1321**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703** Attn: **Rob Schenk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 882050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6170**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

Project# **116530**

Transaction#

**302819**

**DAVIS 2**

Net Weight:

**26.25**

Job# **VIENNA-MGEM**

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/Offor's Printed/Typed Name

Signature

Month Day Year

INT'L

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

1322

~~1021~~

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number **NOT REQUIRED** 2. Page 1 of **1** 3. Emergency Response Phone **302 652-8999** 4. Waste Tracking Number

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 302902**  
**P-68 Net Weight: 22.09**  
**Job#VIENNA-MGEM**

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/Offoror's Printed/Typed Name: **B M Hart** Signature: **B M Hart** Month: **12** Day: **20** Year: **06**

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: **Mark Mitchell** Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_  
 Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

17. Discrepancy  
 17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: **Patricia Blackwell** Signature: **Patricia Blackwell** Month: **12** Day: **20** Year: **06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

1

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1323**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302823**

**Net Weight:**

**23.66**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*R M Hays*

Signature

*[Signature]*

Month Day Year

**12 20 06**

15. International Shipments

Import to U.S.

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

*Rich Trohman*

Signature

*[Signature]*

Month Day Year

**12 20 06**

Transporter 2 Printed/Typed Name

Signature

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Sadie Blackwell*

Signature

*[Signature]*

Month Day Year

**12 20 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

GENERATOR

INT'L  
TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8060**

4. Waste Tracking Number  
**1324**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CHRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 448-8703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-899-8070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116530 Transaction#: 302827**  
**Net Weight: 19.12**  
**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

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 \_\_\_\_\_  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**13 25**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#:** **302835**  
**Net Weight:** **25.54 TONS**  
**RDR#1**      **Job#VIENNA-MGEM**

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: **R M Hart**      Signature: *[Signature]*      Month Day Year: **12 20 06**

15. International Shipments     Import to U.S.     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: **RANDALL D ROGERSON**      Signature: *[Signature]*      Month Day Year: **12 20 06**

Transporter 2 Printed/Typed Name: \_\_\_\_\_      Signature: \_\_\_\_\_      Month Day Year: \_\_\_\_\_

17. Discrepancy

17a. Discrepancy Indication Space     Quantity     Type     Residue     Partial Rejection     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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: \_\_\_\_\_      Signature: \_\_\_\_\_      Month Day Year: \_\_\_\_\_

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of **1**  
 3. Emergency Response Phone: **302 652-8999**  
 4. Waste Tracking Number: **1326**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539**      **Transaction#:** **302838**  
**T-10**      **Net Weight:** **1982**  
**Job#VIENNA-MGEM**

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: **B.M. HART** Signature: **[Signature]** Month Day Year: **12 20 06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: **L.R.** Signature: **[Signature]** Month Day Year: \_\_\_\_\_  
 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) 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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: **JACKIE Blackwell** Signature: **[Signature]** Month Day Year: **12 20 06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1327**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23866**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 18.41**  
**Net Weight: 36820**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **BM HART** Signature **[Signature]** Month **12** Day **20** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **T.S.** Signature **T.S.** Month **12** Day **20** Year **06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **JACQUE B Blackwell** Signature **[Signature]** Month **12** Day **20** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1328**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302843**

**P-62**

**Net Weight: 16.80**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*R M Hunt*

Signature

*[Signature]*

Month Day Year

**12 20 06**

INT'L

15. International Shipments

Import to U.S.

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

*Jewell Y. Lockamy P62*

Signature

*Jewell Y. Lockamy P62*

Month Day Year

**12 20 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Jackie Blackwell*

Signature

*Jackie Blackwell*

Month Day Year

**12 20 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**4329**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:** *302854*

*P-68*

**Net Weight:** *18.04*

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*R M Hunt*

Signature

*[Signature]*

Month Day Year

*12 2006*

INT'L

15. International Shipments

Import to U.S.

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

*Mark Mitchell*

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Jackie Blackwell*

Signature

*Jackie Blackwell*

Month Day Year

*12 2006*

TC302853

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1330**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 21.06**  
**Davis / Net Weight: Job#VIENNA-MGEM**

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 **Rmilton** Signature **[Signature]** Month Day Year **12 20 06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **Denise Adams** Signature **[Signature]** Month Day Year **12 20 06**

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) 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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Jackie Blackwell** Signature **[Signature]** Month Day Year **12 20 06**

GENERATOR  
INTL  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1331**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539      Transaction#: 302854**  
**ATI4      Net Weight: 21.65**  
**Job#VIENNA-MGEM**

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 **R M Hart** Signature *[Signature]* Month Day Year **12 20 06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **RAY LLOYD** Signature *[Signature]* Month Day Year **12 20 06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **JACKIE BLACKWELL** Signature *[Signature]* Month Day Year **12 20 06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1332**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#: 302857**

**P-58**

**Net Weight: 16.93**

**Job# VIENNA-MGEM**

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

*RMHart*

Signature

*[Signature]*

Month Day Year

15. International Shipments  Import to U.S.  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

Signature

*[Signature]*

Month Day Year

Transporter 2 Printed/Typed Name

Signature

**JOE W GRIFFIN**

Month Day Year  
**12 20 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Jackie Blackwell**

Signature

*[Signature]*

Month Day Year

**12 20 06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1333**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

No.

Type

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302 858**

**P-72**

**Net Weight: 21.70**

**Job#VIENNA-MGEM**

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

*R M Hart*

Signature

*[Signature]*

Month Day Year

**12 4 06**

INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

*Mullins son*

Signature

*[Signature]*

Month Day Year

**12 20 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Jackie Blackwell*

Signature

*[Signature]*

Month Day Year

**12 20 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1334**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

**NONE**

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

No.

Type

**DT**

**20**

**T**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302860**

**P-61**

**Net Weight:**

**18.00**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

**RM Hans**

Signature

**RM Hans**

Month Day Year

**12 20 06**

15. International Shipments

Import to U.S.

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

**Andera Clark**

Signature

**Andera Clark**

Month Day Year

**12 20 06**

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:

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 hazardous materials covered by the manifest except as noted in item 17a

Printed/Typed Name

**Spacie Blackwell**

Signature

**Spacie Blackwell**

Month Day Year

**12 20 06**

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1335**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116539 Transaction#: 302864  
P-64 Net Weight: 17.63 Job# VIENNA-MGEM**

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 **R M Hantz** Signature **R M Hantz** Month Day Year **12 20 06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **MARY KELLEY** Signature **M. Kelley** Month Day Year **12 20 06**  
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) \_\_\_\_\_ 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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name **Cacie Blackwell** Signature **Cacie Blackwell** Month Day Year **02 06**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1336**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302865**

**P-63**

**Net Weight: 18.81**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name *R.M. Hart* Signature *[Signature]* Month *12* Day *20* Year *06*

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name *Marlon Mitchell* Signature *[Signature]* Month *12* Day *20* Year *06*  
Transporter 2 Printed/Typed Name Signature Month Day Year

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name *Opal Blackwell* Signature *[Signature]* Month *12* Day *20* Year *06*

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

NOT REQUIRED

2. Page 1 of 1

3. Emergency Response Phone

302 652-8000

4. Waste Tracking Number

1337

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-0703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 898030

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Beitel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23668

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-8070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project# 110530

16

Transaction#: 302869

Net Weight: 19.35

Job# VIENNA-MGEM

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

RM Hart

Signature

[Signature]

Month Day Year  
12 20 06

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

R Scott

Signature

[Signature]

Month Day Year  
12 20 06

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1338**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539**      **Transaction#: 302869**  
**14**      **Net Weight: 24.63**  
**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **B.M. Hant**      Signature **[Signature]**      Month      Day      Year

15. International Shipments     Import to U.S.     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 **Q. Cross**      Signature **[Signature]**      Month      Day      Year  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Jackie Blackwell**      Signature **[Signature]**      Month      Day      Year

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8000**

4. Waste Tracking Number  
**1339**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-8703** Attn: **Rob Schork**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 886050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23668**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-825-8070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# **116539** Transaction# **302877**  
**DH1** Net Weight **21.78** Job# **VIENNA-MGEM**

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 **R M Hart** Signature *[Signature]* Month Day Year

TRANSPORTER INT'L

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name **L Campbell** Signature *[Signature]* Month Day Year **12 20 06**  
 Transporter 2 Printed/Typed Name Signature Month Day Year

DESIGNATED FACILITY

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) 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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name **[Signature]** Signature *[Signature]* Month Day Year **12 16**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1340**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302873**

**Net Weight: 17.22**

**Job#VIENNA-MGEM**

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 **R M HARRIS** Signature *[Signature]* Month Day Year

TRANSPORTER INT'L

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Cleveland ARINGTON** Signature *[Signature]* Month Day Year  
Transporter 2 Printed/Typed Name Signature Month Day Year

DESIGNATED FACILITY

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Jackie Blackwell** Signature *[Signature]* Month Day Year

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

**NOT REQUIRED**

2. Page 1 of

1

3. Emergency Response Phone

**302 652-8999**

4. Waste Tracking Number

**1341**

5. Generator's Name and Mailing Address

**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)

**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name

**Puryear Trucking**

U.S. EPA ID Number

**DOT# 896050**

7. Transporter 2 Company Name

**South Norfolk Trucking, Inc.**

U.S. EPA ID Number

**NOT REQUIRED**

8. Designated Facility Name and Site Address

**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number

**NOT REQUIRED**

Facility's Phone: **757-865-6070**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

*11*

**Net Weight:**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*R M Harris*

Signature

*[Signature]*

Month Day Year  
**12 20 01**

INT'L

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

*Mark*

Signature

*[Signature]*

Month Day Year

**12 20 01**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Jackie Blackwell*

Signature

*Jackie Blackwell*

Month Day Year

**12 20 06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1342**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302879**

**P-69**

**Net Weight: 23.71**

**Job#VIENNA-MGEM**

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 **R M Hart** Signature *[Signature]* Month **12** Day **20** Year **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Monette Madison** Signature *[Signature]* Month **12** Day **20** Year **06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Opkie Blackwell** Signature *[Signature]* Month **12** Day **20** Year **06**

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302.652.8999

4. Waste Tracking Number

1343

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 302882

P-59

Net Weight: 18.98

Job#VIENNA-MGEM

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

R.M. Hunt

Signature

[Signature]

Month Day Year

12 20 06

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

Tremont Perkins

Signature

[Signature]

Month Day Year

12 20 06

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Jackie Blackwell

Signature

[Signature]

Month Day Year

12 20 06

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1344**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**Net Weight:**

**20.46**

**Job#VIENNA-MGEM**

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

*R M Hanes*

Signature

*R M Hanes*

Month Day Year

15. International Shipments  Import to U.S.  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

*Rock Trotman*

Signature

*Rock Trotman*

Month Day Year

*12 20 06*

Transporter 2 Printed/Typed Name

Signature

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Patricia Beckwell*

Signature

*Patricia Beckwell*

Month Day Year

*12 20 06*

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8080**

4. Waste Tracking Number  
**1,45**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNFMA)  
1510 Gilbart St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schunk**

6. Transporter 1 Company Name  
**Puryzar Trucking**

U.S. EPA ID Number  
**DOT# 808050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-865-8070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539 Transaction#: 302883**  
**DAVIS #2 Net Weight: 27.58**  
**Job#VIENNA-MGEM**

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 **S. M. [Signature]** Signature **[Signature]** Month **11** Day **20** Year **2006**

15. International Shipments  Import to U.S.  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 \_\_\_\_\_  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

GENERATOR  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8899**

4. Waste Tracking Number  
**1344**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-8703 Attn: Rob Schork**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 886050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Beltsol Sanitary Landfill  
100 North Park Lane, Hampton, VA 23066**  
Facility's Phone: **757-965-8070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project# 116539**

**Transaction#:**

**CIA**

**Net Weight:**

**20.27**

**Job# VIENNA-MGEM**

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

**RM Hunt**

Signature

*[Signature]*

Month Day Year

**11 8 0006**

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

**WENDELL SWANSON**

*[Signature]*

**11 8 0006**

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:

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1347**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#:** **30288**  
*M Ancon*      **Net Weight:** **21.22**      **Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name: *R M Hart*      Signature: *R M Hart*      Month: **12** Day: **20** Year: **06**

15. International Shipments     Import to U.S.     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: *[Signature]*      Signature: *[Signature]*      Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_  
Transporter 2 Printed/Typed Name: \_\_\_\_\_      Signature: \_\_\_\_\_      Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space     Quantity     Type     Residue     Partial Rejection     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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: *Patrick Blackwell*      Signature: *Patrick Blackwell*      Month: **12** Day: **20** Year: **06**

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1348**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone:

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.

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:**

**302897**

**RDR#1**

**Net Weight:**

**30.78 TONS**

**Job#VIENNA-MGEM**

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

*R M Hunt*

Signature

*[Signature]*

Month Day Year  
**12 20 06**

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

**RANDALL D ROBERSON**

Signature

*[Signature]*

Month Day Year  
**12 20 06**

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

**Jackie Blackwell**

Signature

*[Signature]*

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1349**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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. Special Handling Instructions and Additional Information

1. **Non RCRA, Non DOT Regulated Soil contaminated with Wood debris**

**DT**

**20**

**T**

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#: 302896**

**R-62**

**Net Weight: 18.70**

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

*R. M. Hines*

Signature

*R. M. Hines*

Month Day Year  
**12 20 06**

INT'L

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

*Jewell Y. Locking R-62*

Signature

*Jewell Y. Locking R-62*

Month Day Year  
**12 20 06**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

*Jackie Blackwell*

Signature

*Jackie Blackwell*

Month Day Year  
**12 20 06**

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8999</b>	4. Waste Tracking Number <b>1350</b>
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5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>	Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>	

6. Transporter 1 Company Name <b>Puryear Trucking</b>	U.S. EPA ID Number <b>DOT# 896050</b>
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>

8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>	U.S. EPA ID Number <b>NOT REQUIRED</b>
Facility's Phone: <b>757-865-6070</b>	

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information	
<b>Project# 116539</b> <i>P-72</i>	<b>Transaction#: 302 904</b> <b>Net Weight: 25.48</b>
	<b>Job# VIENNA-MGEM</b>

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 <i>B M Harts</i>	Signature <i>B M Harts</i>	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 <i>Mullis Son A</i>	Signature <i>Son A Mullis</i>	Month	Day	Year <i>12 20 06</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:		
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 hazardous materials covered by the manifest except as noted in Item 17a				
Printed/Typed Name <i>Grace Blackwell</i>	Signature <i>Grace Blackwell</i>	Month	Day	Year <i>12 20 06</i>

GENERATOR  
 INT'L  
 TRANSPORTER  
 DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of **1**  
 3. Emergency Response Phone: **302 652-8999**  
 4. Waste Tracking Number: **1351**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Phone: **757 445-6703 Attn: Rob Schonk**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**

6. Transporter 1 Company Name: **Puryear Trucking** U.S. EPA ID Number: **DOT# 896050**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information:  
**Project#116539 Transaction#: 302905**  
**AT14 Net Weight: 24.62**  
**Job#VIENNA-MGEM**

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: **R M Hunt** Signature: *[Signature]* Month: **12** Day: **20** Year: **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: **Ray Lloyd** Signature: *[Signature]* Month: **12** Day: **20** Year: **06**  
 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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: **Jackie Blackwell** Signature: *[Signature]* Month: **12** Day: **20** Year: **06**

GENERATOR  
INTL  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1352**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
Facility's Phone: 757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#: 302930**  
**Net Weight: 23.04**      **Job#VIENNA-MGEM**

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: **R M Hart**      Signature: *[Signature]*      Month: **11** Day: **7** Year: **06**

15. International Shipments       Import to U.S.       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: \_\_\_\_\_      Signature: *[Signature]*      Month: **12** Day: **21** Year: **06**  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: **Jackie Blackwell**      Signature: *[Signature]*      Month: **12** Day: **21** Year: **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1353**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project#116539**      **Transaction#:** 302932  
**Net Weight:** 24.27      **Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **RMHart**      Signature **[Signature]**      Month      Day      Year

INT'L

15. International Shipments       Import to U.S.       Export from U.S.      Port of entry/exit: \_\_\_\_\_  
Transporter Signature (for exports only): \_\_\_\_\_      Date leaving U.S.: \_\_\_\_\_

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **Rich Trotman**      Signature **[Signature]**      Month      Day      Year  
Transporter 2 Printed/Typed Name \_\_\_\_\_      Signature \_\_\_\_\_      Month      Day      Year

DESIGNATED FACILITY

17. Discrepancy  
17a. Discrepancy Indication Space       Quantity       Type       Residue       Partial Rejection       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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Jackie Blackwell**      Signature **[Signature]**      Month      Day      Year

Work done on 12-21-06 2 loads Total

<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 852-8888</b>	4. Waste Tracking Number <b>1354</b>	
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>			Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>			
Generator's Phone: <b>757 445-6703 Attn: Rob Schonk</b>						
6. Transporter 1 Company Name <b>Furyear Trucking</b>		U.S. EPA ID Number <b>DOT# 806050</b>				
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>				
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>				
Facility's Phone: <b>757-865-6070</b>						
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.
			No.	Type		
		1. <b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>
		2.				
		3.				
	4.					
13. Special Handling Instructions and Additional Information  <b>Project# 116530      Transaction#: 302 929</b> <b>DHI      Net Weight: 21.35</b> <b>Job# VIENNA-MGEM</b>						
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 <b>R M Hantz</b>		Signature <i>[Signature]</i>		Month Day Year <b>12 21 06</b>		
TRANSPORTER 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):					
	16. Transporter Acknowledgment of Receipt of Materials					
TRANSPORTER	Transporter 1 Printed/Typed Name <b>L CAMPBELL</b>		Signature <i>[Signature]</i>		Month Day Year <b>12 21 06</b>	
	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					
	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 hazardous materials covered by the manifest except as noted in item 17a						
Printed/Typed Name <b>Jackie Blackwell</b>		Signature <i>[Signature]</i>		Month Day Year <b>12 21 06</b>		

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

7355

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23866

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 302933

MARLOW

Net Weight: 22.96

Job#VIENNA-MGEM

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

RM Hart

Signature

[Signature]

Month Day Year

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

Transporter 2 Printed/Typed Name

Signature

Signature

Month Day Year

Month Day Year

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

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

JACKIE Blackwell

Signature

JACKIE Blackwell

Month Day Year

12 21 06

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1354**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#:**  
**Net Weight: 2380 Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **RM HART** Signature **[Signature]** Month Day Year

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name **CHRISTOPHER ARRINGTON** Signature **[Signature]** Month Day Year  
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) 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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature **[Signature]** Month Day Year **12/21/05**

302945  
TIC#

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number **NOT REQUIRED** 2. Page 1 of **1** 3. Emergency Response Phone **302 652-8999** 4. Waste Tracking Number **1357**

5. Generator's Name and Mailing Address **Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Site Address (if different than mailing address) **Paradise Creek**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name **Puryear Trucking** U.S. EPA ID Number **DOT# 896050**

7. Transporter 2 Company Name **South Norfolk Trucking, Inc.** U.S. EPA ID Number **NOT REQUIRED**

8. Designated Facility Name and Site Address **Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666** U.S. EPA ID Number **NOT REQUIRED**  
Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539 Transaction#: 23.03**  
**DAVIS I Net Weight: Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name **R M Harris** Signature *[Signature]* Month **12** Day **21** Year **06**

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 **Denise Adams** Signature *[Signature]* Month **12** Day **21** Year **06**  
Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name **Laura Adams** Signature *[Signature]* Month **12** Day **21** Year **06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: **NOT REQUIRED**  
 2. Page 1 of: **1**  
 3. Emergency Response Phone: **302 662-8888**  
 4. Waste Tracking Number: **1358**

5. Generator's Name and Mailing Address: **Commander, Navy Region Mid-Atlantic (CNRMA), 1510 Gilbert St., Norfolk, VA 23511-2737**  
 Generator's Site Address (if different than mailing address): **Paradise Creek**  
 Generator's Phone: **757 445-8703 Attn: Rob Schenk**

6. Transporter 1 Company Name: **Fuyear Trucking** U.S. EPA ID Number: **DOT# 808000**

7. Transporter 2 Company Name: **South Norfolk Trucking, Inc.** U.S. EPA ID Number: **NOT REQUIRED**

8. Designated Facility Name and Site Address: **Bethel Sanitary Landfill, 100 North Park Lane, Hampton, VA 23060** U.S. EPA ID Number: **NOT REQUIRED**  
 Facility's Phone: **757-865-6070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	Non RCRA, Non DOT Regulated Soil contaminated with Wood debris		DT	20	T	NONE
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
 Project# 116539  
 Transaction#: 302937  
 Net Weight: 22.94  
 CIA  
 Job#VIENNA-MGEM

**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/Offor's Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

TRANSPORTER INT'L

15. International Shipments  Import to U.S.  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: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_  
 Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

DESIGNATED FACILITY

17. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection  
 Manifest Reference Number: \_\_\_\_\_ U.S. EPA ID 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 hazardous materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8949**

4. Waste Tracking Number  
**1359**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St, Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-8703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Furyear Trucking**

U.S. EPA ID Number  
**DOT# 606350**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project# 116530 Transaction# 302948**  
**DAW 2 Net Weight: 28.57**  
**Job# VIENNA-MGEM**

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]** Signature: **[Signature]** Month: **12** Day: **21** Year: **06**

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter Signature (for exports only): \_\_\_\_\_  
Transporter 1 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_  
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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

GENERATOR  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1360**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**  
Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**  
Facility's Phone: **757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information  
**Project#116539      Transaction#: 302950**  
**SNOWDEN      Net Weight: 22.18**  
**Job#VIENNA-MGEM**

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: **R M HART**      Signature: *[Signature]*      Month Day Year: **12 21 06**

15. International Shipments       Import to U.S.       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: **X**      Signature: *[Signature]*      Month Day Year: **12 21 06**  
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)      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 hazardous materials covered by the manifest, except as noted in Item 17a  
Printed/Typed Name: **Laura Adams**      Signature: *[Signature]*      Month Day Year: **12 20 06**

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of 1

3. Emergency Response Phone

302.652.8999

4. Waste Tracking Number

1361

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

No. Type

DT

20

T

NONE

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 302960

RDR#1

Net Weight: 28.61 TONS

Job#VIENNA-MGEM

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/Offor's Printed/Typed Name

*R.M. Harris*

Signature

*R.M. Harris*

Month Day Year

12 21 06

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

RANDALL D. ROCKERSON

Signature

*Randall D. Rocerson*

Month Day Year

12 21 06

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

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest, except as noted in Item 17a

Printed/Typed Name

*Laura Adams*

Signature

*Laura Adams*

Month Day Year

12 21 06

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

Work done on 12-21-06 2 loads Total 1362

<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8390</b>	4. Waste Tracking Number <b>1362</b>	
5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Gilbert St., Norfolk, VA 23511-2737</b>			Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>			
Generator's Phone: <b>757 443-6703 Attn: Rob Schenk</b>						
6. Transporter 1 Company Name <b>Puryear Trucking</b>			U.S. EPA ID Number <b>DOT# 886050</b>			
7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>			
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23066</b>			U.S. EPA ID Number <b>NOT REQUIRED</b>			
Facility's Phone: <b>757-365-8070</b>						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers		11. Total Quantity
				No.	Type	12. Unit Wt./Vol.
	1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>			<b>DT</b>	<b>20 T</b>
	2.					
	3.					
4.						
13. Special Handling Instructions and Additional Information  <b>Project# 118530      Transaction#: 302990</b> <b>DH1      Net Weight: 22.85</b> <b>JOEVIENNA-MGEM</b>						
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/Offor's Printed/Typed Name <b>R M Hart</b> Signature <b>[Signature]</b> Month <b>12</b> Day <b>21</b> Year <b>06</b>						
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 <b>L Campbell</b> Signature <b>[Signature]</b> Month <b>12</b> Day <b>21</b> Year <b>06</b> 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 hazardous materials covered by the manifest except as noted in Item 17a Printed/Typed Name <b>William Adams</b> Signature <b>[Signature]</b> Month <b>12</b> Day <b>21</b> Year <b>06</b>						

NON-HAZARDOUS  
WASTE MANIFEST

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1363**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 896050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666  
757-865-6070**

U.S. EPA ID Number  
**NOT REQUIRED**

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.

**NONE**

13. Special Handling Instructions and Additional Information

**Project#116539**

**Transaction#:** *303029*

**Net Weight:** *22.01*

**Job#VIENNA-MGEM**

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/Offor's Printed/Typed Name

Signature

Month Day Year

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

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

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302.652.8999

4. Waste Tracking Number

1364

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757.445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

9a. 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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 302997

Net Weight: 2305

Job#VIENNA-MGEM

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

R M HART

Signature

*[Signature]*

Month Day Year

12 21 06

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]*

Signature

*[Signature]*

Month Day Year

12 21 06

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Laura Adams

Signature

*[Signature]*

Month Day Year

12 21 06

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-8999**

4. Waste Tracking Number  
**1365**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Phone: **757 445-6703 Attn: Rob Schonk**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

6. Transporter 1 Company Name  
**Puryear Trucking**

U.S. EPA ID Number  
**DOT# 806050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

Facility's Phone: **757-885-0070**

U.S. EPA ID Number  
**NOT REQUIRED**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

**Project# 116539      Transaction#:**

**Net Weight: 19.80**

**Job# VIENNA-MGEM**

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/Offor's Printed/Typed Name: **R. M. H. ...** Signature: **[Signature]** Month: **12** Day: **21** Year: **2006**

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: **W. ...** Signature: **[Signature]** Month: **12** Day: **21** Year: **2006**

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: \_\_\_\_\_

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: **[Name]** Signature: **[Signature]** Month: **12** Day: **21** Year: **2006**

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

TIC# 307098

GENERATOR	<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>NOT REQUIRED</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>302 652-8299</b>	4. Waste Tracking Number <b>1366</b>	
	5. Generator's Name and Mailing Address <b>Commander, Navy Region Mid-Atlantic (CNRMA) 1510 Oilbert St., Norfolk, VA 23511-2737</b>			Generator's Site Address (if different than mailing address) <b>Paradise Creek</b>		
Generator's Phone: <b>757 445-6703</b>		Attn: <b>Rob Schonk</b>		U.S. EPA ID Number <b>DOT# 086050</b>		
6. Transporter 1 Company Name <b>Puryear Trucking</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>		7. Transporter 2 Company Name <b>South Norfolk Trucking, Inc.</b>		
8. Designated Facility Name and Site Address <b>Bethel Sanitary Landfill 100 North Park Lane, Hampton, VA 23666</b>		Facility's Phone: <b>757-865-6070</b>		U.S. EPA ID Number <b>NOT REQUIRED</b>		
TRANSPORTER	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity
				No.	Type	12. Unit Wt./Vol.
	1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>			<b>DT</b>	<b>20</b>
	2.					<b>T</b>
	3.					<b>NONE</b>
13. Special Handling Instructions and Additional Information  <b>Project# 116539</b> <b>Transaction#:</b> <b>302998</b> <b>22.85</b> <b>Davis 1</b> <b>Net Weight:</b> <b>22-85</b> <b>Job# VIENNA-MGEM</b>						
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/Offor's Printed/Typed Name <b>RMHANT</b>		Signature <i>[Signature]</i>		Month Day Year <b>12 21 06</b>		
INT'L	15. International Shipments		<input type="checkbox"/> Import to U.S.		<input type="checkbox"/> Export from U.S.	
	Transporter Signature (for exports only):		Port of entry/exit:		Date leaving U.S.:	
TRANSPORTER	16. Transporter Acknowledgment of Receipt of Materials					
	Transporter 1 Printed/Typed Name <b>DENISE ADAMS</b>		Signature <i>[Signature]</i>		Month Day Year <b>12 21 06</b>	
	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			
	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 hazardous materials covered by the manifest except as noted in Item 17a						
Printed/Typed Name <i>[Signature]</i>		Signature <i>[Signature]</i>		Month Day Year <b>12 21 06</b>		

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
**NOT REQUIRED**

2. Page 1 of  
**1**

3. Emergency Response Phone  
**302 652-6888**

4. Waste Tracking Number  
**1367**

5. Generator's Name and Mailing Address  
**Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737**

Generator's Site Address (if different than mailing address)  
**Paradise Creek**

Generator's Phone: **757 445-8703** Attn: **Rob Schork**

6. Transporter 1 Company Name  
**Purveyor Trucking**

U.S. EPA ID Number  
**DOT# 806050**

7. Transporter 2 Company Name  
**South Norfolk Trucking, Inc.**

U.S. EPA ID Number  
**NOT REQUIRED**

8. Designated Facility Name and Site Address  
**Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666**

U.S. EPA ID Number  
**NOT REQUIRED**

Facility's Phone: **757-665-5070**

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1.	<b>Non RCRA, Non DOT Regulated Soil contaminated with Wood debris</b>		<b>DT</b>	<b>20</b>	<b>T</b>	<b>NONE</b>
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

Project# **118539**

Transaction#:

**303011**

**27.86**

**Davis 2**

Net Weight:

Job# **VIENNA-MGEM**

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

**RPM HART**

Signature

*[Signature]*

Month Day Year

**11 21 06**

INT'L

15. International Shipments  Import to U.S.  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

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

DESIGNATED FACILITY

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

NOT REQUIRED

2. Page 1 of

1

3. Emergency Response Phone

302 652-8999

4. Waste Tracking Number

1368

5. Generator's Name and Mailing Address

Commander, Navy Region Mid-Atlantic (CNRMA)  
1510 Gilbert St., Norfolk, VA 23511-2737

Generator's Site Address (if different than mailing address)

Paradise Creek

Generator's Phone: 757 445-6703 Attn: Rob Schonk

6. Transporter 1 Company Name

Puryear Trucking

U.S. EPA ID Number

DOT# 896050

7. Transporter 2 Company Name

South Norfolk Trucking, Inc.

U.S. EPA ID Number

NOT REQUIRED

8. Designated Facility Name and Site Address

Bethel Sanitary Landfill  
100 North Park Lane, Hampton, VA 23666

U.S. EPA ID Number

NOT REQUIRED

Facility's Phone: 757-865-6070

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.

1. Non RCRA, Non DOT Regulated Soil contaminated with Wood debris

DT

20

T

NONE

2.

3.

4.

13. Special Handling Instructions and Additional Information

Project#116539

Transaction#: 303013

Snow den

Net Weight: 20.09

Job#VIENNA-MGEM

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

R. M. Harris

Signature

[Signature]

Month Day Year

12 21 06

15. International Shipments  Import to U.S.  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

Signature

[Signature]

Month Day Year

12 21 06

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 hazardous materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Paul Adams

Signature

[Signature]

Month Day Year

12 21 06